

Please Return This Form To:

Idaho Falls Power
Energy Services
140 S Capital Ave
PO Box 50220
Idaho Falls, ID 83405-0220



Heat Pump Water Heater Installation Form

All sections must be filled out by the installer at the time of installation. A copy of this completed form and the purchase receipt or invoice must be promptly submitted to the homeowner's utility in accordance with utility policy.

Household Information

Customer Name		Installation Address	
City	State	Zip	Customer Phone
Mailing Address, if different:			
Home Type: <input type="checkbox"/> Existing Site Built <input type="checkbox"/> New Construction Site Built <input type="checkbox"/> Manufactured			
Year Built:	Heated Area: Sq Ft	Foundation Type (Site Built): <input type="checkbox"/> Crawlspace <input type="checkbox"/> Full Basement <input type="checkbox"/> Half Basement <input type="checkbox"/> Slab	
Existing Heating System: <input type="checkbox"/> Electric Forced Air <input type="checkbox"/> Electric Forced Air w/AC <input type="checkbox"/> Electric Zonal <input type="checkbox"/> Air Source Heat Pump <input type="checkbox"/> Geothermal Heat Pump <input type="checkbox"/> Ductless Heat Pump <input type="checkbox"/> Natural Gas Furnace (Gas Company: _____) <input type="checkbox"/> Other Non-Electric Space Heating: _____			
Back up Heat: <input type="checkbox"/> None <input type="checkbox"/> Elec. Forced Air <input type="checkbox"/> Elec. Zonal <input type="checkbox"/> Heat Pump <input type="checkbox"/> Ductless Heat Pump <input type="checkbox"/> Natural Gas Furnace <input type="checkbox"/> Non-Electric Space Heating			
Number of Water Heaters in Home: ___ Before This Installation ___ After this Installation			Number of Occupants:
Information about the water heater being replaced (this row only):	Fuel: <input type="checkbox"/> Electric <input type="checkbox"/> Gas* <input type="checkbox"/> Propane*	Age (years):	Size (gallons):

* In existing homes, only Heat Pump Water Heaters replacing electric tanks are eligible.

Installation Information

Brand Installed:	Model:	Size (gallons):	Installation Date:
Manufacturer Installation Training Location:		Date of Training:	
Other Appliances in installation room: <input type="checkbox"/> Clothes Dryer <input type="checkbox"/> Fridge <input type="checkbox"/> Freezer <input type="checkbox"/> Furnace <input type="checkbox"/> Other (specify): _____			
Where was this water heater purchased? <input type="checkbox"/> Installer <input type="checkbox"/> Retailer <input type="checkbox"/> Online <input type="checkbox"/> Other (specify): _____			
Total Installed Cost (before rebates): \$_____ Please break down total cost into the categories below:			
Equipment: \$_____ Labor: \$_____ Electrical: \$_____ Other (specify): \$_____ for _____			
Installation Location: <input type="checkbox"/> Interior Heated Location <input type="checkbox"/> Unheated Location		<input type="checkbox"/> Garage <input type="checkbox"/> Basement <input type="checkbox"/> Other _____	
Installation Room Size (feet): (length _____) x (width _____) x (height _____) = _____ cu. ft.			
Complete for Ducted Installations Only:	CO Monitor Location:	Ducted out of conditioned space? <input type="checkbox"/> Yes <input type="checkbox"/> No	Length of intake duct (ft): _____ Length of exhaust duct (ft): _____

Required Signatures

This form must be signed by the person whose name appears on the electric utility account. ENERGY INFORMATION RELEASE: The undersigned utility customer requests and authorizes the specified utility to release billing and usage information for the account listed below to Bonneville Power Administration (BPA). With this authorization, BPA can request billing information for up to two years pre-installation and two years post-installation. The utility customer also hereby releases the utility company from any and all liability arising from or connected with providing this information.

A copy of the purchase receipt or installer's invoice is included with this application.

Electric Utility	Customer Account #	
Account Holder Name		
Account Holder Signature		Date
By signing below, the installer certifies that this form and any accompanying documentation are complete and accurate, and that all measures associated with this project were completed as of the signature date below. The signature certifies that the installer is licensed, bonded, insured (or homeowner) and has been trained by the manufacturer of the installed product.		
Installer Name	Installation Company	<input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner/Other
Installer Signature	Installer Phone #	Date

PRIVACY ACT STATEMENT

Basic authority for collecting this information is authorized by 16 U.S.C. §§ 832 et. seq., and 838 et. seq., pursuant to Bonneville Power Administration's Conservation Program system of records established in 46 FR 31700. This information is primarily intended to further, but is incidental to the performance of, BPA's overall Energy Efficiency Program, the objective of which is to acquire energy resources through energy efficiency, to determine what cost-effective conservation and direct application renewable resources measures should be installed or adopted under different circumstances, and to provide incentives for the installation of such measures. Other routine issues of this information include: aggregation into a public database on energy efficiency; furnished to authorized personnel for installation/repair of equipment; aggregated into a database for program publicity; and in some instances information regarding buildings will be made available to subsequent purchasers of the buildings. Your disclosure of the requested information is voluntary; however failure to provide requested information means that it will not be possible for you to participate in this BPA Energy Efficiency program.