



# Ipswich 2022 Weatherization Services Program Application Form



## Program Overview

The Ipswich Electric Light Department's Home Efficiency Incentive Program is designed to assist the customer with the cost of installation for the most cost effective measures recommended in a home energy audit. Those measures are shown on the energy audit report.

We encourage you to proceed with the installation of those conservation measures that best suit your energy needs and are listed on your Home Energy Report.

**General rule for cost-effective home energy efficiency: Insulate and air -seal first. (Ask the auditor for a list of firms providing air-sealing services).**

All new heating systems receiving an incentive must have an [Energy Star](#) certification.

Self-installation of insulation is not eligible for rebate.

| Ipswich Municipal Light Department   |                               |
|--|-------------------------------|
| Eligible Measures  | Rebate                        |
| <b>Blower Door Test,<br/>Air Sealing &amp;<br/>Insulation</b>  | <b>75%, up<br/>to \$2,000</b> |
| <b>Blower Door Test, Air Sealing &amp;<br/>Insulation<br/>(Paired with Air Source Heat Pump<br/>Rebate Application )</b> | <b>75%</b>                    |

## Eligible Projects

In general, the most cost-effective audit recommendations should be installed first, excluding lighting. Renters should seek approval from their landlord before installing any measures.

## How to Apply

- Please contact our partners at
- **Center for EcoTechnology 1-(866) 306-0909** to schedule a Free Home Energy Audit, then after measure(s) installation contact CET to schedule a post installation inspection. The inspector will conduct a site visit and complete the required inspection form. The inspection must be performed before submitting a billing credit application.
- Complete and submit this application **with the signed inspection form** and invoice(s) to:

Ipswich Electric Light Department  
Home Efficiency Incentive Program  
272 High Street  
Ipswich, MA 01938

When submitting the application, ***please attach originals of all dated receipts/work orders that document*** the installation. Submissions valid from 1/1/22-12/31/22 must be postmarked by 1/31/23.

Receipts and/or work orders should include the name, license number, address and phone number of the contractor that completed the installation. You may wish to retain a copy of all documents for your records.

If you have any questions, or if you would like assistance in completing this form, call our office at 978-356-6635.

1.) Customer Information

|  |  |                                  |  |  |  |
|--|--|----------------------------------|--|--|--|
| <b>Account Holder First Name:</b>  |  | <b>Account Holder Last Name:</b> |  | <b>Application Date:</b>                                     |  |
|  |  |                                  |  |  |  |
| <b>Installed Address:</b>  |  | <b>City:</b>                     |  | <b>State:</b>  |  |
|  |  |                                  |  |  |  |
| <b>Phone #:</b>  |  | <b>Email:</b>                    |  | <b>Requested Rebate Amount \$:</b>                           |  |
|  |  |                                  |  |  |  |
| <b>Name of Municipal Utility</b>   |  | <b>Utility Account Number:</b>   |  | <b>Name of Person to whom rebate should be made payable:</b> |  |
|  |  |                                  |  |  |  |
| <b>Mailing Address (for rebate check if different than installed address):</b> |  |                                  |  | <b>City, State, Zip:</b>                                     |  |
|  |  |                                  |  |  |  |

2.) Owner/Landlord Information (if different from above)

|                                |  |               |  |               |  |
|--------------------------------|--|---------------|--|---------------|--|
| <b>Owner/Landlord Name:</b>    |  |               | <b>Tax ID # (required if owner is incorporated):</b> |               |  |
|                                |  |               |  |               |  |
| <b>Owner/Landlord Address:</b> |  | <b>City:</b>  |  | <b>State:</b> |  |
|                                |  |               |  |               |  |
| <b>Phone #:</b>                |  | <b>Fax #:</b> |  | <b>Email:</b> |  |
|                                |  |               |  |               |  |

3.) Contractor Information

|                            |  |                                   |                           |                          |  |
|----------------------------|--|-----------------------------------|---------------------------|--------------------------|--|
| <b>Contractor Name:</b>    |  | <b>License Number (required):</b> |                           | <b>Federal Tax ID #:</b> |  |
|                            |  |                                   |                           |                          |  |
| <b>Contractor Address:</b> |  | <b>City:</b>                      |                           | <b>State:</b>            |  |
|                            |  |                                   |                           |                          |  |
| <b>Phone Number:</b>       |  |                                   | <b>Contractor Email :</b> |                          |  |
|                            |  |                                   |                           |                          |  |

4.) Measure(s) Installed

|  |
|--|
| <b>Provide Description of Measure(s) (i.e. Air Sealing, Attic Insulation, Wall Insulation, etc.)</b> |
|  |

5.) Customer Acknowledgement

|  |              |
|--|--------------|
| <i>I hereby request a rebate for the listed work. I certify that a licensed contractor has installed the measures listed in accordance with state and local codes.</i> |              |
| <b>Signature:</b>  | <b>Date:</b> |
|  |              |