

Home Energy Visit Form



VOLUNTEER INFORMATION

| | | |
|--|-----------------|------------------------------------|
| Date: | | |
| Volunteer Name: | | Volunteer Name: |
| Visit Start Time: | Visit End Time: | Please have homeowner sign waiver. |
| Is fuel and electrical usage information available? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| What is the estimated BTUs/square foot of the property: | | |

PARTICIPANT INFORMATION

| | | | |
|--|--|--|--------------------|
| Name: | | | |
| Mailing Address: | | Town: | Zip Code: |
| Installation Address: | | Town: | Zip Code: |
| Best time to reach you: | | Phone: | |
| Email Address: | | Age of home: | Approx. square ft: |
| Do you rent or own this residence? <input type="checkbox"/> Rent <input type="checkbox"/> Own | | If renting, landlord name: Landlord phone number: | |
| If rental property: # Units in building: | | | |
| Type of Residence (Check all that apply): <input type="checkbox"/> Primary Residence <input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Secondary Residence <input type="checkbox"/> Seasonal Home <input type="checkbox"/> Farm | | Type of dwelling: <input type="checkbox"/> Single Family Home <input type="checkbox"/> Apartment <input type="checkbox"/> Mobile Home <input type="checkbox"/> Condo/Townhome <input type="checkbox"/> Other | |
| Electric Utility Provider(s): | | | |
| Electric Utility Account #(s)(If available): | | | |
| Fuel type: <input type="checkbox"/> Oil <input type="checkbox"/> propane <input type="checkbox"/> natural gas <input type="checkbox"/> kerosene <input type="checkbox"/> pellets <input type="checkbox"/> wood stove <input type="checkbox"/> other | | | |
| Are you a Vermont Gas Customer?: <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

This visit is not a professional home energy audit and will not include weatherizing your home. A professional home energy audit includes an evaluation of the amount of air leakage in your home and the effectiveness of your insulation, heating system, lighting, appliances, and windows and results in a comprehensive scope of work for improvement.

WALK-THROUGH ASSESSMENT

The purpose of the walk-through assessment is to visually identify possible energy saving opportunities in the home and provide information on resources to help improve both thermal and electrical efficiency.

THERMAL SAVING OPPORTUNITIES

Attic

If you have an attic hatch, is it insulated and/or weather-stripped? Yes No Don't know

If you have pull down attic stairs, are they insulated and/or weatherstripped? Yes No Don't know

What is the type of attic insulation? _____

What is the thickness (in inches) of the attic insulation? _____

Walls

Do the walls of the home have plaster and lath? Yes No Don't know

Are there "plugs" present? Yes No Don't know

What is the type of exterior wall insulation? _____ Don't know

What is the thickness (in inches) of the exterior wall insulation? _____ Don't know

Basement

Have the box sills been well-insulated? Yes No Don't know

Is the mud sill insulated and air sealed? Yes No Don't know

Have all or a portion of the basement walls been insulated? Yes No Don't know

If yes, what type of insulation? _____

Is there a bulkhead door? Yes No Don't know

Has the bulk head door been air sealed and insulated? Yes No Don't know

Is there an exposed stone or dirt floor (no plastic covering)? Yes No Don't know

Living Space

Is the fireplace closed off with a tight seal (either with a fireplace insert or some other type of seal)? Yes No Don't know

Have windows and exterior doors been weather stripped? Yes No Don't know

ELECTRICAL SAVING OPPORTUNITIES

Incandescent lighting: Are there incandescent (traditional) light bulbs that could be replaced with CFLs or LEDs?

Yes No Don't know

Phantom power: Is there a home entertainment center or home computer center that could benefit from an advanced power strip?

Yes No Don't know

Showerheads: Do any showerheads use more than two gallons of water per minute and could benefit from a low-flow showerhead?

Yes No Don't know

Refrigerator: Is there an old and potentially inefficient refrigerator or freezer?

Yes No Don't know

Is there a second refrigerator that is inefficient and has the potential to be eliminated?

Yes No Don't know

KITCHEN TABLE DISCUSSION

Review the "How Energy Efficient is Your Home" worksheet

Ask the participant a few general questions

Are any of the following present: Major drafts Ice dams Mold/moisture issues

Is the house pre-1950? Yes No Don't know

Have any major energy efficiency home improvements been done in the last 10 years? Yes No Don't know

If yes, please indicate improvements: _____

This home would be a good candidate for:

Home Performance with ENERGY STAR® comprehensive energy improvements

Appliance upgrade or remove second refrigerator

Advanced power strip

Referral to Vermont Weatherization Assistance Program or Vermont Gas Retrofit Program

Replacing light bulbs with CFLs or LEDs

PARTICIPANT'S RELEASE AND LIABILITY WAIVER

I am the legal occupant of the property on which the energy saving work is to be performed and have full authority to enter into this agreement. I agree to participate in this energy saving program and understand the work will be performed at no charge.

I understand that the work entails risk. I understand that the purpose of this home energy visit is to visually identify possible energy saving opportunities in the home and provide information on resources to help improve both thermal and electrical efficiency. I accept the conditions under which each activity is conducted, and I accept and assume all risks inherent in each of these activities, including property loss/damage, personal injury, and including those risks I may not foresee or anticipate. I hereby agree to release and hold harmless any person or organization that participates in any way in planning and/or executing this program, including its advisors, sponsors and volunteers from any and all liability, costs, claims, losses, or damages arising from, or in any way related to, my participation in this project.

I have read this entire Release and Liability Waiver. I fully understand it and agree to be legally bound by it.

Print Name of Participant: _____ Date: _____

Signature: _____