

SRP DUCT TEST REBATE PROGRAM

APPLICATION INSTRUCTIONS, TERMS AND CONDITIONS

A. INSTRUCTIONS FOR COMPLETING THE REBATE APPLICATION FORM

1. Complete the Customer Information section of the rebate application (Section A).
2. Have your contractor do the following:
 - a. Complete the Contractor Information in Section B of the rebate application.
 - b. Sign and date the Program Compliance portion in Section B of the rebate application.
 - c. Specify if releasing rebate.
 - d. Complete the Equipment Information portion in Section C of the rebate application.
3. Mail the top copy of the completed rebate application and a copy of the dated paid invoice from your licensed duct test and repair contractor to the following address:
SRP Duct Test and Repair Rebate Program
2702 N. Third St., Suite 2020
Phoenix, AZ 85004
4. Retain this page, a copy of your invoice and the pink customer copy of the completed rebate application for your records.
5. For more information about this program or assistance in completing your rebate application, call **(602) 274-6808**.

B. IMPORTANT TERMS AND CONDITIONS

1. To qualify for a Duct Test and Repair Rebate, the participant must:
 - a. Be a permanent SRP residential electric customer and reside in a single-family detached dwelling, a single-family attached home (duplex, triplex or quadplex ONLY) or an apartment/condominium (duplex, triplex or quadplex ONLY). New construction is NOT eligible.
 - b. Have duct testing and repair services performed by a contractor licensed in Arizona and certified by the Building Performance Institute (BPI) as a "Building Analyst" who has completed the BPI training course. For current program requirements, rebate amounts and program effective dates, go to **savewithsrp.com** or call the Duct Test and Repair answer line at **(602) 274-6808**.
 - c. With the assistance of your contractor, submit a completed rebate application and a dated copy of the paid invoice. If you are applying for more than one

rebate, a separate rebate application must be completed and submitted within six months for each system that was tested and repaired. The limit is five duct system rebates per customer (one rebate per duct system every five years).

- d. Abide by the rules and rebate levels in effect at the date of equipment installation.
 - e. Allow SRP or its agent to inspect the repairs to verify compliance with all rebate program requirements.
2. To qualify for a Duct Test and Repair Rebate, the installing contractor must:
 - a. Be licensed in Arizona.
 - b. Have an on-site technician certified by the BPI as a "Building Analyst."
 - c. Complete the Contractor Information and Equipment Information sections of the rebate application.
 - d. Sign the Program Compliance section of the rebate application.
 - e. Perform work in accordance with National Renewable Energy Laboratory standard duct-sealing work specifications (sws.nrel.gov/spec/31602).
 - f. Be in good standing with all other SRP rebate programs and their requirements to be eligible to participate in the Duct Test and Repair Rebate Program.
 - g. Meet the requirements for each duct seal and repair.
 3. Failure to provide any of the required information, including signatures, will result in the return of the rebate application.
 4. SRP reserves the right to inspect the repairs for compliance with the program requirements. If the repairs are selected for an inspection, the rebate will be withheld pending the outcome of the inspection. If the repairs are found to be in compliance, the rebate will be paid. If the repairs are not in compliance, the customer and contractor will be notified. To qualify for the rebate, the customer is responsible for negotiating with the contractor to bring the repairs into compliance. A reinspection using SRP's authorized inspectors must be completed and submitted to SRP. The contractor is responsible for the expense of a reinspection. SRP will process the application after receiving the reinspection documentation.

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5. Program procedures, requirements and rebate levels are subject to change or cancellation without notice.
6. This program is for inspection and repair of existing systems only.
7. Any contractors using an aerosol sealant for testing and subsequent sealing of identified leaks must include supply ducts, return ducts and the air handler.
8. One rebate check will be issued per approved application to the person listed on the SRP account (limit five per customer).
9. SRP makes no representations and provides no warranty or guarantee with respect to the design, manufacture, construction, safety, performance or effectiveness of the newly installed equipment, including any warranties of merchantability or fitness for a particular purpose. Responsibility for delivery and workmanship related to any

equipment or services the customer procures exclusively rests with the contractor selected by the customer. Responsibility for supervision of the contractor to ensure the contractor complies with the requirements of the SRP Duct Test and Repair Rebate Program rests with the customer. SRP assumes no responsibility for oversight of contractor services.

10. The Terms and Conditions set forth herein constitute a complete statement of the Terms and Conditions applicable to this promotion and supersede all prior representations or understandings, whether written or oral. SRP shall not be bound by or be liable for any statement, representation, promise, inducement or understanding of any kind that is not set forth herein. SRP reserves the right to change or cancel this promotion or its Terms and Conditions at any time.

*Contractors may recommend increasing and adding additional return air ducts before sealing ducts. Homeowners who decline a contractor's recommendation to properly size the duct system prior to duct sealing may reduce the air-conditioning system's cooling capacity, and this could cause energy costs to increase.

SRP DUCT TEST AND REPAIR REBATE PROGRAM APPLICATION

To qualify for a rebate, you must perform duct testing and repair services that meet the program requirements. For current program requirements, rebate amounts and program effective dates, go to savewithsrp.com or call the Duct Test and Repair answer line at (602) 274-6808. See the Terms and Conditions pages for qualifications and details. Program procedures, requirements and rebate levels are subject to change.

A. CUSTOMER INFORMATION (PLEASE PRINT)

SRP Account Number: _____ Email: _____

Customer Name: _____
First Name MI Last Name

Mailing Address: _____ City: _____ State: _____ ZIP Code: _____

Installation Address: _____ City: _____ State: _____ ZIP Code: _____

Phone (Work): _____ (Home): _____

HOME TYPE: Single-family detached Mobile home/manufactured home Apartment/condominium/townhome (duplex, triplex or quadplex ONLY)

PROGRAM COMPLIANCE: I certify that I am an SRP customer at the address of the services provided for which I am applying for a rebate. I also agree that the contracting company that performed the services in my home associated with this rebate application is solely responsible for the performance of its work. It is understood and agreed that the contracting company is not an agent, a servant or an employee of SRP and is retained by me as an independent contractor. I indemnify and hold harmless SRP and its officers, directors, employees, agents, representatives, affiliates, successors and assigns from any liability, cost or expense, including reasonable attorneys' fees and legal costs, arising out of or resulting from the contractor's performance.

Customer Signature: _____ Date: _____

How did you hear about this offer? (Check all that apply.)

- SRP Home Performance with ENERGY STAR® Recommendation Billboard/Outdoor Ad Contractor Email Family/Friend Home/Trade Show Mail Movie Theater
 Newspaper/Magazine Online Ad Radio Retailer/Store Sporting Event SRP Bill SRP Representative SRP Website Truck Ad TV
 Other: _____

B. CONTRACTOR INFORMATION (ALL FIELDS MUST BE COMPLETED BY THE INSTALLING CONTRACTOR)

Company Name: _____

Company Street Address: _____ City: _____ State: _____ ZIP Code: _____

Daytime Phone: _____ Fax: _____

Contractor License Number: _____ BPI Number: _____

PROGRAM COMPLIANCE: I certify that I am a licensed contractor in Arizona, am certified by the BPI as a "Building Analyst" and am fully qualified to provide duct test and repair services to this SRP customer. I have read and complied with IMPORTANT TERMS AND CONDITIONS, including Section g, and as such, I accept full liability for the performance of my work, and indemnify and hold harmless SRP and its officers, directors, employees, agents, representatives, affiliates, successors and assigns from any liability, cost or expense, including reasonable attorneys' fees and legal costs, arising out of or resulting from the services provided by my company at this address.

Contractor Name (Please Print): _____ Contractor Signature: _____

Date: _____ Email: _____

Initial if releasing rebate to contractor (application must be accompanied by rebate assignment form): _____

C. EQUIPMENT INFORMATION (ALL FIELDS MUST BE COMPLETED BY THE INSTALLING CONTRACTOR)

Type of System: AC/Furnace OR Heat Pump Type of Ductwork: Flex OR Metal

Total System Size (Tons): _____ Year House Built: _____ Number of Floors: _____

Air Handler Location: Attic Garage Inside Closet Outside Closet Rooftop

(For homes with more than one system, submit a separate application for each system.)

DUCT LEAKAGE (CHECK ONE TEST METHOD BELOW)

BLOWER-DOOR SUBTRACTION

Test In: _____ Duct Leakage Pre-repair (cfm 50): _____

Test Out: _____ Duct Leakage Post-repair (cfm 50): _____

DUCT BLASTER OR PRESSURIZED AEROSOL SEALANT

Test In: _____ Duct Leakage Pre-repair (cfm 25): _____

Test Out: _____ Duct Leakage Post-repair (cfm 25): _____

PRESSURE PAN

Test In: _____ Average Pan # (Pascal): _____ Highest Pan # (Pascal): _____

Test Out: _____ Average Pan # (Pascal): _____ Highest Pan # (Pascal): _____

Test In: _____ Whole-House cfm 50 Initial Measurement: _____

Test Out: _____ Whole-House cfm 50 After Duct Sealing: _____

(Testing/sealing must include supply ducts, return ducts, and air handler leakage and sealing information.)

REMEDIAL ACTION TAKEN (PLEASE ATTACH DOCUMENT FOR ADDITIONAL REPAIRS THAT WON'T FIT IN THE SECTION BELOW)

Location (Example: Main trunk serving master bedroom): _____

Type of Repair Performed (Example: Sealed main trunk takeoff to master bedroom with additional mastic): _____

REBATE AMOUNT REQUESTED (COPY OF INVOICE FROM YOUR DUCT TEST AND REPAIR CONTRACTOR MUST BE PROVIDED WITH YOUR APPLICATION)

Total Cost of Test and Repair: _____

Leakage Reduction (cfm): _____

