

# 2010 CONNECTICUT

## GEOHERMAL HEAT PUMP RETROFIT **PREQUALIFICATION** APPLICATION



**Connecticut  
Light & Power**

The Northeast Utilities System

EMS6607-5 2-10

The Connecticut Light and Power Company  
P.O. Box 270  
Hartford, CT 06141-0270  
Tel: 877-WISE-USE (877-947-3873)



**CONNECTICUT**  
ENERGY EFFICIENCY FUND

www.CTEnergyInfo.com



The United Illuminating Company

The United Illuminating Company  
157 Church Street, MS 1-6B  
New Haven, CT 06510  
Tel: 877-WISE-USE (877-947-3873)

**This is a prequalification application—not a rebate form**

### CUSTOMER CONTACT INFORMATION

First Name		Last Name		
Street Address		City	State	Zip
Mailing Address (if different from above)		City	State	Zip
Telephone Number	Fax Number		E-mail Address	

### PROJECT / HOME INFORMATION

Year Built	Current Heating Equipment <input type="checkbox"/> OIL <input type="checkbox"/> PROPANE <input type="checkbox"/> NATURAL GAS <input type="checkbox"/> ELECTRIC BASEBOARD OR PANELS <input type="checkbox"/> ELECTRIC HEAT PUMP <input type="checkbox"/> OTHER (SPECIFY) _____			
Current Cooling Equipment <input type="checkbox"/> CENTRAL A/C <input type="checkbox"/> WINDOW A/C <input type="checkbox"/> OTHER _____ <input type="checkbox"/> NONE			ELECTRIC UTILITY <input type="checkbox"/> CL&P <input type="checkbox"/> UI	
Home Square Footage (Total Conditioned Area)		Home Square Footage (To Be Conditioned By Geothermal)		No. of Bedrooms

### GEOHERMAL INFORMATION

#### INSTALLATION CONTRACTOR

HVAC / Geothermal Company Name		Installer		
Address		City	State	Zip
Telephone Number		E-mail Address		

#### PROPOSED SYSTEM

	Make	Model	Tonnage
Unit 1			
Unit 2			
Unit 3			

Loop Size (Example: single 400' etc.)	Type* <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical <input type="checkbox"/> DX *No Open Loops Will Be Accepted
Estimated Install Date	Estimated Completion Date

**Purpose:** The 2010 Geothermal Heat Pump Retrofit Prequalification Application has been created to:

1. Verify existing homes meet required energy efficiency levels to maximize benefit to customers
2. Reserve incentive dollars for the proposed project
3. Notify Connecticut Clean Energy Fund (CCEF) of a new geothermal project

**Application:** This application must be filled out completely, truthfully and accurately. The customer must sign the form and submit the completed application to:

**Tammy Wilson, Geothermal Project Coordinator**  
**Connecticut Light & Power**  
**66 Curtis Street**  
**New Britain, CT 06052**

The Home Energy Solutions Geothermal Eligibility Inspection Report must be completed by a Home Energy Solutions inspector or HERS Rater. Incomplete inspection reports will not be accepted.

You will be notified within three business days if your geothermal project has been approved. Once pre-approval is obtained, you have six months to complete the project and submit the Verification of Installed Performance (VIP) spreadsheet.

## HOME ENERGY SOLUTIONS GEOTHERMAL ELIGIBILITY INSPECTION REPORT

*(To be completed by Home Energy Solutions inspector at time of inspection)*

Current Insulation – Meets Requirements		Current Insulation Values
- Roof/attic insulation (must be $\geq$ R-30)	<input type="checkbox"/> Yes	<input type="checkbox"/> No _____
- Floor over basement (must be $\geq$ R-19)	<input type="checkbox"/> Yes	<input type="checkbox"/> No _____
- Framed floor over ambient air/garage (must be $\geq$ R-30)	<input type="checkbox"/> Yes	<input type="checkbox"/> No _____
- Above grade exterior walls (must be $\geq$ R-13)	<input type="checkbox"/> Yes	<input type="checkbox"/> No _____
Windows		Current Window Type/U Value
- Double pane <b>or</b> U-value $\leq$ .40 <b>or</b> equivalent	<input type="checkbox"/> Yes	<input type="checkbox"/> No _____
Air Leakage		Current CFM50/sq. ft.
- Tested cfm50/sq. ft. conditioned floor area (must be $\leq$ 1cfm50/sq. ft conditioned floor area)	<input type="checkbox"/> Yes	<input type="checkbox"/> No _____

Signature of Inspector / Printed Name	Date
Company Name	

**If any of the above requirements are not met at the time of inspection, applicant must submit receipt or other documentation that deficient items have been corrected.**

Inspection previously performed?  Yes                      Date: \_\_\_\_\_

**To Participate in Home Energy Solutions, Call 1-877-WISE-USE (1-877-947-3873)  
or Visit [www.cl-p.com/forms/HomeEnergySolution.aspx](http://www.cl-p.com/forms/HomeEnergySolution.aspx)**

Customer Signature	Date
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