

ELIGIBILITY CRITERIA



- ❖ To qualify for this program's \$500 incentive, **ONE** of the following three Program/Code requirements must be met:
 1. **Touchstone Energy Home Program** To qualify for the incentive under this Program/Code, the following is required:
 - a. A qualified rater or inspector* must verify ALL the requirements on the attached checklist have been met unless not applicable.
 - b. Submit the completed checklist and this incentive form with Section 1 and Section 2 completed.
 2. **Touchstone Energy Home Program with blower door test in place of "Ductwork & Air Infiltration Control" requirements** To qualify for the incentive under this Program/Code, the following is required:
 - a. A qualified rater or inspector* must verify all requirements on the attached checklist have been met unless not applicable, except for the requirements in the "Ductwork & Air Infiltration Control" category.
 - b. A blower door test is required in place of the "Ductwork & Air Infiltration Control" requirements. Less than 3 air exchanges/hour at -50 Pascal is considered passing. Person performing the test must complete Section 3 of this incentive form.
 - c. Submit completed checklist and this incentive form with Section 1, Section 2, and Section 3 completed.
 3. **2015 Minnesota Energy Code** To qualify for the incentive under this Program/Code, the following is required:
 - a. A Minnesota built home must meet the energy efficiency requirements of the *2015 Minnesota Energy Code*.
 - b. Submit documentation showing compliance with the *2015 Minnesota Energy Code* and this incentive form with Section 1 completed.

**A qualified rater or inspector refers to a person who is knowledgeable in building standards, has experience in using blower door test equipment, if blower door test is performed, and is approved by your electric cooperative.*

 - ❖ New home must be on cooperative's lines.
 - ❖ One of the incentive qualifying actions listed above must have been completed in 2018.
 - ❖ Incentives are in place through December 31, 2018. Funds are limited so members are encouraged to submit as soon as possible.
 - ❖ Additional eligibility criteria may apply. Contact cooperative for details.
 - ❖ All documentation listed below must be submitted no later than 3 months after certification.
 - ✓ This Incentive Form
 - ✓ Documentation as explained above, depending on which program/code was followed

Submit required documentation to:

MiEnergy Cooperative, PO Box 90, Cresco, IA 52136 | email jsunnes@MiEnergy.coop | fax 563-547-4033

Section 1: MEMBER INFORMATION (Please fill out entire section)

Member Name		Email	
Address		Account	Phone
City	State	Zip	Member Signature

Email addresses will be used for cooperative communication only, including eNewsletters filled with energy saving tips. Opting out now or in the future is always available. Opt out Now

Which program/code requirement has been met to qualify you for this incentive (program/code requirements are listed above):

Touchstone Energy Home Program Touchstone Energy Home Program with "Ductwork & Air Infiltration Control" requirements bypassed

2015 Minnesota Energy Code

Section 2: RATER / INSPECTOR VERIFICATION (Please fill out entire section if home satisfies requirements of Program/Code 1 or Program/Code 2 as defined under ELIGIBILITY CRITERIA above)

By signing this form, the rater or inspector certifies that the home has met:

1) All requirements in the attached checklist if member is qualifying with option 1 (Touchstone Energy Home Program) OR

2) All requirements in the attached checklist if member is qualifying with option 2 (Touchstone Energy Home Program less the "Ductwork & Air Infiltration Control" requirements)

Rater or Inspector Name	Rater or Inspector Signature	Date of Final Inspection
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Section 3: BLOWER DOOR TEST VERIFICATION (Please fill out entire section if home satisfies requirements of Program/Code 2 or Program/Code 3 as defined under ELIGIBILITY CRITERIA above)

By signing this form, the person performing the blower door test certifies that the home has met the requirement of less than 3 air exchanges per hour at -50 Pascal.

Name of Person Performing Blower Door Test	Signature of Person Performing Blower Door Test	Air Exchanges Per Hour
		Date of Blower Door Test

OFFICE USE ONLY

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved-Reason	Total incentive issued: \$
Cooperative representative:	Date: