

COMMERCIAL & INDUSTRIAL PRESCRIPTIVE INITIATIVE
HVAC Solutions - Heat Pump/Variable Refrigerant Flow Projects
Pre-approval Checklist for Qualified Partners



CUSTOMER INFORMATION

Customer (Business) Name: _____ Contact Name/Title: _____

Physical Installation Address: _____ City: _____ State: _____ Zip Code: _____

Mailing Address: _____

Email Address: _____ Telephone: _____

Incentive to be paid to (check box): Customer Qualified Partner Installer (Incentive Authorization Form Required)

QUALIFIED PARTNER INSTALLER INFORMATION

Company Name: _____

Contact Name _____ Telephone: _____ Email Address: _____

PROJECT INFORMATION

Select the Project Type:

- Retrofit (Replacement of Existing, Operating Equipment <16 Years Old)
- Early Retirement (Replacement of Existing, Operating Equipment, 16 to <22 Years Old)
- Replace on Burnout or Replacement of Existing Equipment ≥22 Years Old
- New Construction (New Building or Addition)
- Funding Opportunity Notice (FON - add name/#): _____

Select the Design Type

- Whole Building Design
- Zonal Replacement (*Intended for the replacement of non-electric existing heating systems (oil/propane/kerosene). Excluding multifamily projects, zonal retrofits must serve at least 50% of the building's calculated heat load or at least 50% of the existing system's heating capacity.*)

Brief Project Description:

Description of Existing HVAC System:

Existing Equipment Type, Model, and Serial Number(s): _____

Existing Equipment Fuel Type: _____

Existing Equipment Capacity: _____

Age of Existing Equipment: _____

Areas/Zones Served: _____

Existing Ventilation System (describe if present): _____

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Description of Proposed HVAC System (refer to Measure Code Reference Guide and QP Website for program eligibility and design criteria)

Proposed Equipment Type & Model(s):

VRF/LEV Kit: _____

Heat Pump: _____

PTHP/VTPH: _____

ERV: _____

DOAS: _____

Total Proposed Equipment Capacity (Btu/hr): _____

Heat Load Reference (check one):

Manual J Existing System Capacity Other (please describe): _____

Estimated Heat Load (Btu/hr): _____

Building or Zones Served: _____

Will the proposed HVAC system(s) serve as the primary heating system(s) for the building or zone served? Yes No

Does the proposed HVAC design capacity meet the estimated heating requirements for the building or zone served? Yes No

Does the proposed HVAC design for the building or zone provide effective heat distribution for the occupants? Yes No

Proposed Ventilation System (include heating fuel type as applicable): _____

Additional Notes: _____

Heat Pump Design Criteria:

System Controls:

1. Is the existing heating system going to remain onsite for emergency backup or supplemental heat? Yes No

If yes to #1 above, please answer questions 2-4 below:

2. When will the backup system be utilized?

3. What controls strategy is planned to be implemented? Please detail the proposed controls and set points. The proposed controls equipment must be included on the supplier quote(s).

4. Have you informed the customer that the new HVAC system must be operated as the primary system, the proposed controls strategy may be inspected upon project completion, and the incentive may be reduced or denied if the project is not completed as proposed? Yes No

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Incentive Application & Documentation:

Please create an incentive application under the applicable program in effRT and provide the following supportive documents for pre-approval review:

- Installation quote to end user (include proposed models, total material cost to end user, and total labor cost)
- Material quote from supplier
- Heat load calculations
- Manufacturer specification sheets for proposed HVAC equipment, including controls when applicable
- Pictures of existing heating system and nameplate(s)
- Building layout plan/sketch that identifies the room layouts and locations of proposed outdoor & indoor units
(Include square footages of each conditioned space on building layout plan for VRF or Multifamily projects)
- Manufacturer's Selection Report for VRF projects
- A completed copy of this Pre-approval Checklist

As required:

- Recent copy of customer's electric bill (full bill for each account) for Small Business Heat Pump Retrofit projects
- Incentive Authorization Form if the incentive is to be paid to the Qualified Partner

Contact the delivery team with any questions or for support with the effRT enrollment:

- CIP@efficiencymaine.com
- Individual team members: <https://qualifiedpartner.me/contact/>
- (207) 213-6247

Qualified Partner Installer Validation:

By signing below, I confirm that the new HVAC system has been designed as stated herein.
(An actual signature or an e-signature through Adobe Certificate that includes a timestamp is required.)

Qualified Partner Print Name

Qualified Partner Signature

Date

Customer Validation:

By signing below, I confirm that I have reviewed this checklist and understand the new HVAC system must serve as the primary heating system with an eligible controls strategy when needed. The final approved incentive is subject to change if the installed scope differs from the pre-approved design.

(An actual signature or an e-signature through Adobe Certificate that includes a timestamp is required.)

Customer Print Name

Customer Signature

Date