RESIDENTIAL WEATHERIZATION
Rebate Claim Form

FOR UPGRADES COMPLETED ON OR BEFORE 9/30/2026

efficiency MAINE®

Homeowner Name:	Street Address:

Requirements Checklist

All boxes must be checked:

	1	Insulation installed in a Maine: (check one) ☐ single-family, OR ☐ duplex, OR ☐ condominium **(number of units in building: _____)**, OR ☐ mobile home, OR ☐ mixed-use building with one or two housing units and no commercial electrical meter(s)
☐	2	Insulated space heated the entire heating season
☐	3	Rebate claim form emailed or postmarked within six months of project completion
☐	4	Upgrade completed by an Efficiency Maine Residential Registered Vendor
☐	5	Upgrade was not part of the construction of a new home or addition
☐	6	Weatherization Requirements Checklist attached

Check when applicable

☐	7	W-9 attached if the home is owned by a business and the business is the rebate recipient (one-time requirement)

Additional Requirements for Low- and Moderate-Income Customers

☐	1	Condominium or building is owner's principal residence
	2	Customer eligibility verified (**check one**): ☐ **Low Income** - Customer participates in MaineCare, TANF, SNAP, or HEAP ☐ **Moderate Income** - Customer has Adjusted Gross Income of up to $70,000 for single filers or $100,000 for joint filers *Note: If customer is not verified prior to claim submission, the claim may not qualify for a low- or moderate-income rebate, or it may be delayed*

Blower Door Test Results. Enter results or select reason not performed.

Pre-Upgrade CFM50:		Post-Upgrade CFM50:	
Reason not performed: ☐ Health and safety risk ☐ Wood or pellet stove in operation ☐ In-progress home repairs		Reason not performed: ☐ Health and safety risk ☐ Wood or pellet stove in operation ☐ In-progress home repairs	

Please submit by email: **hesp@efficiencymaine.com OR** Mail: PO Box 219, Brunswick, ME 04011–0219.
Please allow 6 weeks for rebate processing.
efficiencymaine.com • 866-376-2463

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Customer Information

Homeowner Name:								
Installation Address:	Address		Town		State	ME	Zip	
Mailing Address:	Address		Town		State		Zip	
Homeowner Email Address:								
Homeowner Phone Number:								
Pre-upgrade Primary Heating Fuel:	☐ N/A (new construction) ☐ Oil ☐ Kerosene ☐ Propane ☐ Natural Gas ☐ Wood ☐ Heat Pump(s) ☐ Electric Baseboard ☐ Other							
Natural Gas Utility (if applicable):	☐ Bangor ☐ Maine ☐ Summit ☐ Unitil							

Upgrade Details

#	Upgrade Type	Location *(attic, wall, basement, underbelly)*	Square Feet Insulated	Pre-Upgrade R-Value	Post-Upgrade R-Value	Cost
1	Air Sealing	Not applicable	N/A	N/A	N/A	$
2	Insulation					$
3	Insulation					$
4	Insulation					$
5	Health & Safety	*When calculating rebate, health & safety cost is capped at 25% of total air sealing and insulation project cost.*				$

Rebate Calculation

1	**Total Project Cost** (add rows 1 - 5 in "Upgrade Details" section, above)	$
2	**Rebate Percentage** Low Income = 80% Moderate Income = 60% Any Income = 40%	%
3	**Unadjusted Rebate Amount** (multiply row 1 by row 2)	$
4	**Lifetime Limit (per condominium or building)*** Low Income lifetime limit = $8,000 in insulation and air sealing rebates Moderate Income lifetime limit = $6,000 in insulation and air sealing rebates Any Income lifetime limit = $4,000 in insulation and air sealing rebates	$
5	**Previous Insulation and Air Sealing Rebates Issued for This Building or Condominium**	$
6	**Remaining Balance of Lifetime Limit** (row 4 minus row 5)	$
7	**Requested Rebate Amount** (enter row 3 or row 6, whichever is less)	$
8	**Homeowner's Required Contribution Amount, After Rebate** (row 1 minus row 7)	$

Project Completion Date:	_____
Rebate Recipient:	☐ Homeowner ☐ Residential Registered Vendor **Rebates for low-income customers are sent to the vendor**
Residential Registered Vendor Company Name *(and branch, if applicable)*:	

SIGNATURES. Please sign below to certify that all information on this claim form is correct, all work has been completed, and to commit to help Efficiency Maine conduct an inspection.

Registered Vendor Signature:		Date:	_____
Homeowner Signature:		Date:	_____

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