#### NYHEP

#### **Residential Energy Assessments REA**

#### Work Order: Assessment Submission

Enrollment #:

Customer Name: Customer #: Customer Class:

Account #: Premise Id: Site Address:

**Application Date:** 

Company Name: Phone: Employee Name:

Applicant Name: Home Phone: Alt Phone: Language:

## **Applicant Information**

**General Application Information** 

Application Submission Date:

## **Usage & Fuel Information**

Utility and Usage Information	
Electric Rate:	
Electric Utility Account Number:	
Electric Utility Provider:	
Gas Rate:	
Natural Gas Supplier:	
Primary Heating Fuel Type:	

Delivered Fuel Information
Delivered Fuel:
Delivered Fuel Account Number:
Delivered Fuel Supplier:
Price Per Unit:
Unit Type:

#### **Electric Usage Information**

Annual Electric Usage (kWh):

### **Electrical Panel Size:**

Electrical Panel Type:

Heating Usage Information
Annual Heating Usage:
Annual Heating Usage MMBTU:
Heating Usage Unit:

# **Existing Conditions**

Dwelling Information	
Average Story Height (ft):	
Do you Own or Rent your home?:	
Dwelling Type:	
Exterior Siding Type:	
Number of Bedrooms:	
Number of Full Time Occupants:	
Number of Units:	
Predominant Basement Type:	
Stories Above Grade:	
Total Conditioned Space (sq. ft.):	
Wind Exposure:	
Year Property Built:	

Shell - Air Infiltration
Attic Air Sealing:
Blower Door Test Complete?:
Estimated Air Leakage:
Estimated Air Leakage:

Shell - Insulation

Attached Garage Ceiling - Insulation Depth (in):

Attached Garage Ceiling - Insulation Grade:
Attached Garage Ceiling - Insulation Type:
Attached Garage Ceiling - Sq. Ft.:
Attached Garage Walls - Insulation Depth (in):
Attached Garage Walls - Insulation Grade:
Attached Garage Walls - Insulation Type:
Attached Garage Walls - Sq. Ft.:
Attached Garage Walls - Wall Cavity Depth:
Attic 1 - Insulation Depth (in):
Attic 1 - Insulation Grade:
Attic 1 - Insulation Type:
Attic 1 - Sq. Ft.:
Attic 2 - Insulation Depth (in):
Attic 2 - Insulation Grade:
Attic 2 - Insulation Type:
Attic 2 - Sq. Ft.:
Attic 3 - Insulation Depth (in):
Attic 3 - Insulation Grade:
Attic 3 - Insulation Type:
Attic 3 - Sq. Ft.:
Attic Access - Insulation Depth (in):
Attic Access - Insulation Grade:
Attic Access - Insulation Type:
Attic Access - Sq. Ft.:
Band Joist - Insulation Depth (in):
Band Joist - Insulation Grade:
Band Joist - Insulation Type:
Band Joist - Sq. Ft.:
Crawlspace Ceiling - Insulation Depth (in):
Crawlspace Ceiling - Insulation Grade:

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Crawlspace Ceiling - Insulation Type:	
Crawlspace Ceiling - Sq. Ft.:	
Exterior Overhangs - Insulation Depth (in):	
Exterior Overhangs - Insulation Grade:	
Exterior Overhangs - Insulation Type:	
Exterior Overhangs - Sq. Ft.:	
Exterior Walls - Insulation Depth (in):	
Exterior Walls - Insulation Grade:	
Exterior Walls - Insulation Type:	
Exterior Walls - Sq. Ft.:	
Exterior Walls - Wall Cavity Depth:	
Foundation Walls - Insulation Depth (in):	
Foundation Walls - Insulation Grade:	
Foundation Walls - Insulation Type:	
Foundation Walls - Sq. Ft.:	
Kneewall - Insulation Depth (in):	
Kneewall - Insulation Grade:	
Kneewall - Insulation Type:	
Kneewall - Sq. Ft.:	
Mobile Home Belly - Insulation Depth (in):	
Mobile Home Belly - Insulation Grade:	
Mobile Home Belly - Insulation Type:	
Mobile Home Belly - Sq. Ft.:	
Rim Joist - Insulation Depth (in):	
Rim Joist - Insulation Grade:	
Rim Joist - Insulation Type:	
Rim Joist - Sq. Ft.:	

Shell - Windows

Existing Window Type 1:

Existing Window Type 2:
Recommended Window 1 Improvement Area - East SqFt:
Recommended Window 1 Improvement Area - North SqFt:
Recommended Window 1 Improvement Area - South SqFt:
Recommended Window 1 Improvement Area - West SqFt:
Recommended Window 2 Improvement Area - East SqFt:
Recommended Window 2 Improvement Area - North SqFt:
Recommended Window 2 Improvement Area - South SqFt:
Recommended Window 2 Improvement Area - West SqFt:
Sq. Ft. of Windows 1:
Sq. Ft. of Windows 2:

HVAC - Primary Heating		
Heating Efficiency Primary:		
Heating Efficiency Primary Type:		
Heating Efficiency Secondary (Enter as Decimal):		
Heating Fuel Type Primary:		
Heating System Capacity (BTUh) Primary:		
Heating System Capacity (BTUh) Secondary:		
Heating System Fuel Type Secondary:		
Heating System Location Primary:		
Heating System Location Secondary:		
Heating System Primary:		
Heating System Secondary (if applicable):		
Heating System Status:		
Heating System Status Notes:		
Is System Zoned?:		
Primary Heating - Year Manufactured:		
Primary Heating Duct Length Unconditioned (feet):		
Primary Heating Duct Location (Supply and Return):		

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Primary Heating Total Duct Length (feet):

HVAC - Primary Cooling
Central AC System Installed:
Cooling Capacity (BTUh):
Cooling Efficiency:
Cooling Efficiency Type:
Cooling System:
Primary Cooling Duct Length Unconditioned (feet):
Primary Cooling Duct Location (Supply and Return):
Primary Cooling Location:
Primary Cooling Total Duct Length (feet):
Primary Cooling Year Manufactured:

WH - Water Heating
Hot Water Fuel Type:
Tank Volume (Gallons):
Water Heater Efficiency (UEF):
Water Heater Heating Capacity (BTUh):
Water Heater Location:
Water Heater System (Existing):
Water Heater System Status:
Water Heater Temperature Setpoint (*F):
Water Heating Showerheads (GPM):

	Appliances - Bulbs
% of CFL:	
% of Incandescent:	
% of LED:	

	Appliances - Thermostat
Thermostat System:	
Thermostat Type:	

Appliances - Appliances		
Dehumidifier Size:		
Dehumidifier Type:		
Dehumidifier Unit of Measure:		
Freezer or Secondary Refrigerator:		
Is the Dehumidifier ENERGY STAR/CEE Rated?:		
Is the Primary Refrigerator ENERGY STAR/CEE Rated?:		
Primary Refrigerator - Approximate Model Year:		
Primary Refrigerator - Configuration:		
Primary Refrigerator - Existing Volume:		

Summary
Appliance and Lighting:
Building Envelope:
Heating and Cooling:
Water Usage and Water Heating:

## Partner Information

Auditor Information	
Assessment Date:	
Auditor Company Name:	
Auditor First Name:	
Auditor Last Name:	
Certification Expiration Date:	
Late Submission Reason:	
Was Assessment Completed Remotely?:	

### NYHEP

Comments	Customer
	Signature:
	Trade Ally: Badge #:
	Date: Time In: Time Out: