HOME EFFICIENCY ASSESSMENT FORM



Secti	on 1: Customer Infor	matio	n										
Proje	ect ID:							Year Home B	Built:				
Addr								Assessment					
Secti	on 2: Installer Inform	ation				Safe	Safety Entrance Testes (If any fall below BPI guidelines)						
Asse	ssor Name:					Amk	Ambient CO (PPM): Ambient LEL%						
Secti	on 3: Program Ally In	forma	ition										
	pany Name:					Con	tact Name:						
	on 4: Visually Identif	ied En	ergy S	Savings M	easures								
	<u> </u>			formation			HVAC Information						
	Foundation T		•				Heating System Type (select below)						
	Slab on Grade	'' 	l Spac		Basement		Treating dystem Type (select select)						
Attic	Insulation (R-Value):	0.0	. орас				Heating System Not Operational						
	lation Determination:						Cooling System Type (select below)						
	Insulation (SF):						Cooling System Type (select below)						
	Additional Opportunit	ioc Av	zilahl	o (soloct s	ull that apply)		Cooling System Not Operational						
	Wall Insulation	ies Av	allabi		Inaulation		Cooling System Not Operational						
							DHW Gas DWH Electric						
	Air Sealing			Crawi wa	all Insulation		Copper Gas Line Present						
	Heat Pump Water He			101 .			More than 50% of duct system located in unconditioned space						
Secti	on 5: Visually Identif				• • •			• •					
			-	ned without	disturbing suspect	asbestos		n the project may move for	rward)				
	Knob & Tu		iring				Vermiculite						
	Bulk Mois						Mold-Like Substance						
	Non-Friab						Friable Asbestos						
	Unvented						Other:						
Secti	on 6: Visually Identif	ied He	ealth 8	& Safety N	/leasures								
	Disclaime	r Relat	ed				Repair from Damaging Incident						
	Combustio	on Saf	ety				Fuel Distribution System						
	Reduce De	press	urizat	ion			Spillage/Backdrafting Correction						
	Interior Ar	mbien	t CO (Concern			Ventilation/Indoor Air Quailty						
	Viable project if H&S	meası	ures a	re remedi	ated. Please up	date FE	· · · · · · · · · · · · · · · · · · ·						
	Our company will ren	nediat	e the	H&S item	s identified. Ple	ease up	date FES:						
								cing Sheet for available me	easures.				
Note						, ,							
	Non Project - please	oroces	s \$10	0 Audit St	inend								
	Assessment Status:	0.0000	<i>75</i>	o / taare o	peria								
Sacti	on 7: Thermostat Info	ormat	ion										
	of thermostat presen				None		Manual	Programmable	Smart Stat				
	ing thermostat brand:		ille.		INOTIE	Evic	1 1 5 1 1						
	ld you like a smart the		ot inc	tallad?	Yes	EXIS	Existing Thermostat Model:						
	·			laneur	res		No						
Secti	on 8: Direct Install M	_											
			QTY										
	nstalled Measure	INT.	EXT.		Energy	Star ID		Installed Mea		QTY			
EnergyStar Smart Thermostat									5 GPM Showerhead Gas				
APS Tier 1 - 7-plug Left								1.5 GPM Showerhea					
APS Tier 1 - 7-plug Inst							1.0 GPM Kitchen Aerator Gas						
9 W LED							1.0 GPM Kitchen Aerator Electric						
13 W LED								1.0 GPM Bath Aerat	or Gas				
15 W LED								1.0 GPM Bath Aerat	or Electric				
17 W LED								1/2" Pipe Insulation	Gas				
4 W LED Candle								1/2" Pipe Insulation	Electric				
4.5 W LED Globe								3/4" Pipe Insulation	Gas				
8 W LED Reflector								3/4" Pipe Insulation	Electric				
		-		-						-			

HOME EFFICIENCY ASSESSMENT FORM



Section 8: Direct Install Measures (Continued)											
SAVE Kit Status:		Not Received		Received		Installed					
Measures Not Installed (Check all that apply):											
	Not qualified for gas			qualified for electric		Already existing LED's					
	Not compatible wit	th fixtures	Customer Declined			Other:					
	I attest that no energy efficiency measures were installed today due to the reasons marked above.										
Notoc											

Notes:

Customer Acknowledgement:

confirm that an Ameren Illinois Instant Savers assessment was performed. At my request and in my presence, the energy efficiency measures noted above were installed in my home. The assessment and installations were performed by an Energy Advisor representing the Ameren Illinois Energy Efficiency Program. I have inspected the products and workmanship of the installations and agree the new materials and existing fixtures are free from damage and are in good working order

Trickle Star Agreement:

Use the advanced power strip as installed or as intended if the plug configuration is changed after installation.

If self-installed: Install the advanced power strip as instructed per usage guide provided, manufacturer's recommendations, and the following additional guidelines:

- The product shall be plugged directly into a receptacle.
- The product shall not be used with extension cords, or "daisy chained" together in serial fashion with other power boards, UPS', or other surge protectors.
- If a three-to-two prong adaptor is used, it shall be properly grounded per manufacturer's instructions.
- The product is not to be used with aquariums and all other water-related products.

Contact the manufacturer for any issues arising from the use of the advanced power strip.

TrickleStar email: warranty@tricklestar.com or phone: 1.999.700.1098

Complete product warranty information can be found at https://www.tricklestar.com/warranty.html

Pursue any and all warranty claims directly with the manufacturer identified above.

Release and indemnify, hold harmless, and defend Ameren Illinois, its employees, representatives or agents.

CMC Energy Services Inc., Energy Federation Inc., Leidos Engineering LLC, Walker-Miller Energy Services LLC, from any and all claims, losses, harms, costs, liabilities, damages, and expenses (including attorney's fees) of any nature whatsoever arising directly or indirectly out of or in connection with any dispute or legal suit arising from performance or use of the advanced power strip.

Print Owner Name: Owner Signature: **Energy Advisor Signature:** Date:

PLEASE DIRECT ALL CORRESPONDENCE TO:

Ameren Illinois Energy Efficiency Programs, PO BOX 5098, Peoria, IL 61601-9998 Toll-free: 1.866.838.6918 Fax: 1.309.677.7961 AmerenIllinoisSavings.com