



American Rescue Plan Act (ARPA) Advanced Wood Heating System (AWHS) Income-eligible Incentive Adder – Voucher Application

VOUCHER PROCESS

- 1. Customer finds Participating Installer via Renewable Energy Resource Center (RERC) or Efficiency Vermont.
- 2. Participating installer applies on customer's behalf for AWHS Income-eligible Incentive Adder BEFORE project starts
- 3. RERC reviews application.
- 4. Customer directed to third party for income verification; Customer will need to provide all required documentation of income.
- 5. RERC receives result of income verification and determines incentive amount.
- 6. If RERC approves incentive, Customer receives approval & voucher for AWHS Income-eligible Incentive Adder.
- 7. Participating installer completes project & submits voucher, invoice, and photos of the installed systems.
- 8. Participating installer receives a reimbursement check from the State of Vermont via the Clean Energy Development Fund (CEDF) (*The check will also include the CEDF's fixed \$3,000 incentive for a boiler/furnace*).

SECTION A: CUSTOMER INFORMATION

First Name	Last Name			
Contact Email	Phone Number			
Mailing Address				
City	State	Zip Code		
Installation Physical Address (if different than mailing)				
City	State	Zip Code		

SECTION B: PARTICIPATING INSTALLER INFORMATION

Company Name				
Contact First Name	Last Name			
Contact Email	Phone Number			

SECTION D: PELLET SYSTEM & INCENTIVE AMOUNT

□ Proposal attached for **new pellet boiler/furnace** (*Circle one; equipment must be CEDF and/or Efficiency VT eligible*)

New Pellet System Manufacturer	New Pellet System Model Number
Total Estimated Installation Cost (from quote to customer)	

Selection (Check <u>One</u>)	Income Level	Incentive Level	Total Incentive Amount (\$3K + income adder)
	Low Income (<80% Area Median Income (AMI))	\$8000	
	Moderate Income (80% - 120% AMI)	\$6000	

INCOME VERIFICATION MUST BE COMPLETED TO COMPLETE THIS APPLICATION.

Please check which categories apply to the property OR

□ Building is more than fifty (50) years old

Building is in a historic district

Building is listed in the State or National Register of Histo
Places. Form (Section E) is complete.

□ N/A, building is less than 50 years old, not located in a historic district, and not listed in the State or National Register of Historic Places. Form (Section E) is complete.

If any above categories above are checked, check all below that apply OR

☐ Installation involves ground disturbance

(e.g., excavating for concrete footings)

□ Installation involves installing equipment visible from a public right of way

(e.g., pellet storage bin)

N/A, installation does not involve ground disturbance or equipment visible from public right of way. Form (Section E) is complete.

If a project involves a <u>historic property</u> or <u>ground disturbance</u> or <u>equipment visible from a public right of way</u>, this State Historic Preservation Compliance Form signed by State Historic Preservation Office must be submitted with a Voucher Application.

Project plans must be submitted to the Vermont Division for Historic Preservation (VDHP) for review **prior to submitting the voucher application**. Applicants are encouraged to contact VDHP early in the planning process to avoid any unnecessary project delays. **To start the review process, please complete this form and submit electronic versions of your project review materials to** <u>ACCD.projectreview@vermont.gov</u>. **Our preference is for the form and supporting documents to be sent as .pdf files**. Upon receipt of all necessary information, VDHP shall have 15 (fifteen) days to complete the review.

Installation Site/Address

Site/Property Owner Name

Participating	Installer	Name

Participating Installer Email

Please email the following information, along with this form (Section E), to the email address at the bottom of the page:

Project Description

□ Project Location Map and Site Map showing installation location. This can be as simple as a Google map annotated by hand.

- Project Plans (if available)
- Archaeological and/or historic building reports (if available)
- Dependence of the project area and the structures involved. Photographs can be annotated by hand to show the location and

approximate scale of the installation.

For Internal Use Only

Please email this form and supporting materials to <u>ACCD.projectreview@vermont.gov</u>

If you have questions, contact: Elizabeth Peebles at 802-505-1147 or mailto:Elizabeth.Peebles@vermont.gov

Phone

CUSTOMER CERTIFICATION & ARPA ASSURANCES

I certify that I intend to purchase a pellet heating system, to be installed at the location indicated above. I understand that any deliberate attempt to misrepresent information in this application will disqualify me from all claims to incentives offered through Vermont's Small Scale Renewable Energy Incentive Program I understand that information regarding the SSREIP incentive may be released publicly and will not be held confidential. I understand that the incentive will be **paid directly to the Participating Installer**, *only after* the Participating Installer has submitted the voucher final documentation and received final approval, including any necessary site visits, and is subject change based on final installation cost (including any repairs, if applicable) and fund availability. I also understand that the benefit of the incentive is mine and must be transferred from the Participating Installer to me in a manner that is agreeable to both parties. I understand that I will receive a post-installation survey from SSREIP and that I am expected to complete it and return to SSREIP.

I attest that the statements below are true by checking the box next to the statement and signing this document:

- I attest that I have provided complete and accurate information in applying for this assistance, including financial information. I understand the potential consequences, including the recapture of this benefit, as well as civil or criminal liability, of providing false statements or information in order to secure this benefit from the State.
- I attest that I faced economic harm resulting from or exacerbated by the COVID-19 pandemic, and applied for funding from the Federal Emergency Management Agency (FEMA) for all FEMA-eligible expenses that could be covered by this assistance before applying for this benefit.
- I attest that this benefit is not duplicative of any other benefit I may have received. In the event that the State, in its sole discretion, determines that some or all of this benefit is duplicative, I agree to repay the State the duplicative amount in question.
- I attest that I am not presently debarred, suspended, proposed for debarment, declared ineligible, or excluded from participation in Federal programs, or programs supported in whole or in part by Federal funds.
- I agree to retain and maintain the records submitted as part of the application for a period of five (5) years after my application is submitted. The State and its agents shall, upon reasonable notice, have the right of access those records and documents to conduct audits, compliance monitoring, or other investigations in order to verify 1) any information I provided during the application; 2) my eligibility for this assistance; and 3) my compliance with applicable Federal guidance and regulations.
- I agree to comply with all other applicable Federal and state laws and regulations concerning this benefit. I am responsible for consulting any tax or legal professionals I decide are necessary to ensure its compliance with these requirements.

CUSTOMER'S SIGNATURE

DATE

SECTION G: INSTALLER SIGNATURES/CERTIFICATIONS

INSTALLER CERTIFICATION

I certify that my company is a currently enrolled Efficiency Excellence Network pellet furnace/boiler installer and is working with the customer referenced above to install a pellet heating system at the location indicated above; this includes designing the heating system to be installed, being substantially involved with the customer, and employing a qualified installer (either employed by my company or under direct contract) to provide an on-site review of the installation and be on-site to complete the final inspection. The system will be installed in accordance with the Vermont Fire and Building Safety Codes. I understand that the benefit of the incentive is the customers and must be transferred from the Participating Installer to them in a manner that is agreeable to both parties. I understand that any deliberate attempt to misrepresent information in this application will disqualify my company from participation in the program and all claims to incentives offered through Vermont's Small-Scale Renewable Energy Incentive Program. I understand that information regarding the SSREIP incentive may be released publicly and will not be held confidential. I further certify that (**initial each statement below**):

Installation has not begun on the project described in this application.

_____ My company is in compliance with all Terms and Conditions of this income-eligible program (Terms and Conditions are available here: ssreip-wood-2023-advanced-wood-heating-terms-conditions-and-requirements.pdf (rerc-vt.org)

Installing Company Authorized Representative Signature

Installing Company Authorized Representative Name (Print)

MAIL OR EMAIL VOUCHER APPLICATION TO:

MAIL:

Vermont Small Scale Renewable Energy Incentive Program c/o Renewable Energy Resource Center 20 Winooski Falls Way, Suite 501 Winooski, VT 05404

EMAIL: info@rerc-vt.org

QUESTIONS? 877-888-7372 or info@rerc-vt.org

Date