

Heat Pump Conversion

Project Information Form

For Commercial, Industrial, and Agricultural Applications



Instructions: Complete this form and submit it to the serving electric utility. Retrofits are eligible for incentives. New construction applications are not eligible.

BUSINESS AND SITE INFORMATION

Customer Name	
Installation Address (Street, City, State, Zip)	
Customer Phone Number	

EXISTING EQUIPMENT INFORMATION

Existing Equipment Information	
Was area conditioned by heat pump previously heated with electric resistance heat?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If "No", project is not eligible for incentives)

NEW EQUIPMENT INFORMATION

New Equipment Information	Heat Pump 1	Heat Pump 2	Heat Pump 3
The heat pump installed meets BPA's Heat Pump Tier 1 or Tier 2 Specification available at: https://www.bpa.gov/EE/Policy/Manual/Pages/IM-Document-Library.aspx	<input type="checkbox"/> Yes <input type="checkbox"/> No (If "No", project is not eligible for incentives)	<input type="checkbox"/> Yes <input type="checkbox"/> No (If "No", project is not eligible for incentives)	<input type="checkbox"/> Yes <input type="checkbox"/> No (If "No", project is not eligible for incentives)
The heat pump installed is an air-to-air heat pump system, 20 tons or less of cooling capacity	<input type="checkbox"/> Yes <input type="checkbox"/> No (If "No", project is not eligible for incentives)	<input type="checkbox"/> Yes <input type="checkbox"/> No (If "No", project is not eligible for incentives)	<input type="checkbox"/> Yes <input type="checkbox"/> No (If "No", project is not eligible for incentives)
Heat pump manufacturer			
Heat pump model			
Tons of cooling capacity			

INSTALLER INFORMATION

Is Company or Installer a member of the Air Northwest HVAC Trade Ally Network or Northwest Trade Ally Network? For more information, please visit: https://www.airnorthwestvac.com/ and https://nwlightingnetwork.com/trade-ally-networks/	<input type="checkbox"/> Air Northwest <input type="checkbox"/> NW Trade Ally Network
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Company Name	
Installer Signature	
Total Installed Cost (before rebate) including equipment, labor, and purchase date. Please include invoice with this project form.	
Date	

By signing this form, I confirm that the above information is correct to the best of my knowledge.

Please Return This Form To:

Inland Power & Light
 Attn: Energy Services
 PO Box A
 Spokane, WA 99219

(509) 789-1801
 conservation@inlandpower.com