

MAINEHOUSING HEAT PUMP PROGRAM  
**PROJECT COVER SHEET / DOCUMENT CHECKLIST**

**INSTRUCTIONS:** The HEAT PUMP Forms Bundle contains the MaineHousing forms required to process a project for payment. Adobe's bookmark feature provides a complete list of forms. Complete this Project Cover Sheet and the forms will auto-populate. Print completed forms for signatures.

PRIMARY APPLICANT			
Name		First	MI
		Last	
Mailing Address			
City State Zip			
Phone			
Email			

OWNER (if different than Applicant)			
Name		First	MI
		Last	
Mailing Address			
City State Zip			
Phone			
Email			

PROPERTY	
Property Street	
City State Zip	
Dwelling Type	<input type="checkbox"/> SF <input type="checkbox"/> Manufactured Home

AGENCY	
Agency Name	
Mailing Address	
City State Zip	
Phone	
Representative Name	
Representative Phone	
Representative Email	
Contact Name	
Contact Title	
Contact Phone	
Contact Email	
Agency Inspector Name	
Agency Inspector Phone	
Agency Inspector Email	

PROJECT	
HEAT Job #	
Work Order #	
Work Order Issue Date	
Completion Date	
<b>Project Cost</b>	<b>\$</b>

CONTRACTOR (Vendor)	
Vendor Name	
Mailing Address	
City State Zip	
Rep Name	
Rep Phone	
Rep Email	
Vendor Inspector Name	

COMMENTS

**DOCUMENT CHECKLIST**

**INSTRUCTIONS:** The following project documents are required by MaineHousing. Use this checklist to indicate which final/signed documents have been uploaded to HEAT Enterprise. Bundle documents and upload to "Bundle- HEAT PUMP Final Documents" in HEAT Enterprise > WAP Documents:

**Required Documents from Applicant**

- Consent
- Statement of Completion
- Proof of Ownership

**Required Documents from Agency**

- Agency Heat Pump Inspection Checklist (all Units)
- Photos of Units (interior and exterior) (inspected Units only)

**Required Documents from Vendor**

- Vendor Cost Estimate
- Vendor Heat Pump Inspection Checklist
- Vendor Invoice(s)
- Vendor Release of Liens

**Deferred Projects must include the following:**

- Deferral of Services Notice (if applicable)

MAINEHOUSING HEAT PUMP PROGRAM

CONSENT

Agency:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Agency Contact Name: \_\_\_\_\_

Agency Contact Title: \_\_\_\_\_

Agency Contact Phone: \_\_\_\_\_

Agency Contact Email: \_\_\_\_\_

Applicant:

\_\_\_\_\_

Phone:

\_\_\_\_\_

Property:

\_\_\_\_\_

\_\_\_\_\_

Owner (if different than Applicant):

\_\_\_\_\_

1. I understand and agree that above-named Agency may install a heat pump system in my home as deemed necessary in accordance with Maine State Housing Authority (MaineHousing) rules and procedures.
2. I understand and agree that if MaineHousing Heat Pump Program services are approved for my home, my signature below authorizes the Agency and any contractors employed by the Agency to perform recommended services.
3. I understand that the name and contact information of the contractor will be provided to me prior to the commencement of work.
4. I understand that details of any warranties for materials used in the home will be provided by the contractor.
5. I understand that my signature below authorizes the Agency and/or the U.S. Department of Health and Human Services to conduct inspections of the work; either in progress or after the work is completed. I understand these inspections may involve methods deemed necessary to verify the quality and integrity of the associated work.
6. I understand that materials were provided solely for the services provided at the above-named Property, and that the non-use, removal and/or sale, or misuse of these materials by me may result in the Agency reclaiming those materials or reclaiming the purchase and installation costs of those materials. I further understand that the non-use, removal and/or sale, or misuse of these materials by me may result in the MaineHousing prohibiting me from receiving any future benefit from the CHIP, WAP, Fuel Assistance or any other MaineHousing administered program.
7. I agree to allow my home to be photographed for pre- and post-work documentation.
8. I understand the following:
  - a. The system is being installed as a secondary heating source and not designed to replace my primary heating system.
  - b. The Agency has provided me with copies of pamphlets *Introduction to Heat Pumps* and *Heat Pump User Tips*.
  - c. The contractor is responsible for providing education about the system, including how to operate the system in conjunction with my primary heating system, and that I must contact the contractor directly regarding the operation of the heat pump system.
  - d. I am not eligible for a rebate from Efficiency Maine Trust (EMT) for the installation of a MaineHousing-funded heat pump.
  - e. My signature below authorizes the Agency to share information with EMT regarding the assessment, installation and inspection of the heat pump system at the above named Property.

By signing below, I certify that I have read the above statements and agree to the assurances. My signature also verifies this Property is not currently for sale, nor is it designated for foreclosure. I understand failure to provide complete, accurate information may result in my having to repay cost associated with the work.

I understand that the labor and materials for the work on the above Property will be provided to me at no cost. However, I further understand that if I sell the Property within one (1) year of the completion of the heat pump installation, I may be required to repay MaineHousing an amount equal to the cost of the heat pump installation within sixty (60) calendar days of the date of sale.

APPLICANT:

OWNER: (if different than Applicant)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

MAINEHOUSING HEAT PUMP PROGRAM  
**STATEMENT OF COMPLETION**

**Agency:** \_\_\_\_\_ Agency Contact Name: \_\_\_\_\_  
\_\_\_\_\_ Agency Contact Title: \_\_\_\_\_  
\_\_\_\_\_ Agency Contact Phone: \_\_\_\_\_  
\_\_\_\_\_ Agency Contact Email: \_\_\_\_\_

<b>Applicant:</b> _____ <b>Property:</b> _____ _____	<b>Owner</b> (if different than Applicant): _____
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1. I hereby certify that I am the owner/occupant of the above residence.
2. I understand that materials were provided solely for the MaineHousing Heat Pump Program services provided at the above-named Property, and that the non-use, removal and/or sale, or misuse of these materials by me may result in the above-named Agency reclaiming those materials or reclaiming the purchase and installation costs of those materials. I further understand that the non-use, removal and/or sale, or misuse of these materials by me may result in MaineHousing prohibiting me from receiving any future benefit from CHIP, Weatherization Assistance, Fuel Assistance or any other MaineHousing administered program.
3. Regarding the heat pump system installed with MaineHousing Heat Pump Program funds:
  - a. I acknowledge that I received education/information about the system, how to operate it in conjunction with my primary heating system, and I was provided with the vendor's contact information in the event that I have questions/concerns regarding the operation of the heat pump system.
  - b. I certify that I will not claim an EMT rebate for the heat pump system installed with MaineHousing Heat Pump Program funds.
4. I understand failure to provide complete, accurate information may result in me having to repay costs associated with the work.
5. I acknowledge that I received a Client Satisfaction Survey card, which provides an opportunity for me to provide MaineHousing with information about my experience with the MaineHousing Heat Pump Program.

By signing below, I certify that I have read the above statements and agree to the assurances. My signature also verifies this Property is not currently for sale, nor is it designated for foreclosure. If I sell the Property within one (1) year of the completion of the CHIP improvements, I understand I may be required to repay MaineHousing an amount equal to the cost of the MaineHousing Heat Pump Program installation within sixty (60) calendar days of the date of sale.

I am satisfied with the completed work, and to the best of my knowledge, all materials were completely and properly installed.

Applicant <i>(signature)</i> _____	Date _____
Owner <i>(signature)</i> _____	Date _____

<input type="checkbox"/> I (the Agency Inspector) did not conduct an onsite inspection.	
<input type="checkbox"/> I (the Agency Inspector) conducted an onsite inspection of the job and certify that the materials and measures were properly installed in accordance with applicable code and standards.	
_____ Agency Inspector <i>(signature)</i>	Date _____
_____ Agency Inspector Name <i>(print)</i>	Phone _____

MAINEHOUSING HEAT PUMP PROGRAM

RELEASE OF LIENS

Agency (CAA):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Agency Contact Name: \_\_\_\_\_

Agency Contact Title: \_\_\_\_\_

Agency Contact Phone: \_\_\_\_\_

Agency Contact Email: \_\_\_\_\_

Applicant:

\_\_\_\_\_

Owner (if different than Applicant):

\_\_\_\_\_

Property:

\_\_\_\_\_  
\_\_\_\_\_

Contractor:

\_\_\_\_\_

Work Order Date:

\_\_\_\_\_

Regarding the agreement entered into between the Agency and Vendor, for work performed on the above-referenced Property in accordance with the agreed upon Work Order, the Contractor certifies/states as follows:

1. There is due from and payable by the Agency to the Contractor, the amount of \$ \_\_\_\_\_ pursuant to the Work Order and duly approved Change Orders and modifications.
2. The undersigned certifies that all work required under the Work Order has been performed in accordance with the terms thereof and was completed on \_\_\_\_\_ and that there are no unpaid claims for materials, supplies or equipment and no claims of laborers or mechanics for unpaid wages arising out of the performance of the Work Order.
3. The undersigned releases any and all claims, other than for the final payment set forth above, arising under or by virtue of the Work Order and agrees to indemnify the Agency, MaineHousing and the property owner against any such claims.
4. The undersigned has provided directly to the Applicant or attached to this Release all manufacturers' and suppliers' written guarantees and warranties covering materials and equipment furnished under the Work Order.

\_\_\_\_\_  
Contractor Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contractor Representative Name

## HEAT PUMP VENDOR INSPECTION CHECKLIST

HEAT Job #: \_\_\_\_\_  
 Property Owner: \_\_\_\_\_  
 Property Address: \_\_\_\_\_  
 Dwelling Type:     SF     Manufactured Home

AGENCY: \_\_\_\_\_  
 Vendor: \_\_\_\_\_  
 Review Date: \_\_\_\_\_  
 Vendor Inspector: \_\_\_\_\_

**INSTRUCTIONS:** Check boxes to confirm that each requirement has been met. A signed copy must accompany the Vendor's invoice.

HEAT PUMP SYSTEM		
	Outside Component	Inside Component
<b>Make/Manufacturer</b>		
<b>Model</b>		
<b>Serial #</b>		
<b>Component Location</b>		
<b>Thermostat Location</b>		

REGISTERED VENDOR INSPECTION
------------------------------

**Outdoor Unit**

- |  |  |
|--|--|
| 1. <input type="checkbox"/> Greater than or equal to 24" above ground<br>2. <input type="checkbox"/> Unobstructed airflow<br>3. <input type="checkbox"/> Level<br>4. <input type="checkbox"/> Does not interfere with walkway, porch, window or door | 5. <input type="checkbox"/> Installed at serviceable height<br>6. <input type="checkbox"/> Secured to wall or stable base<br>7. <input type="checkbox"/> Protected by rain cap (if installed under roof drip line) |
|--|--|

**Line Set**

8.  Line set purged with nitrogen, pressure tested & evacuated with pump per mfg.'s instructions  
 9. Refrigerant added, if required by manufacturer:

<input type="checkbox"/> NA	Pounds	Ounces

10. Pressure Test

	MFG Guideline	Actual
Pressure (PSI)		
Duration (minutes)		
# of evacuations performed		
Vacuum level (microns)		

11. Line set lengths (feet)

	MFG Guideline		Actual
	Maximum	Minimum	
Standard length:			
For factory charge			

- |   |  |
|---|--|
| 12. <input type="checkbox"/> Floor/wall/ceiling penetrations sealed<br>14. <input type="checkbox"/> Flare connections tightened using manufacturer's torque specification<br>15. <input type="checkbox"/> Visible line sets run through line set covers with transition and termination fittings<br>16. <input type="checkbox"/> Insulation covers full length of line sets (no exposed copper) | 13. <input type="checkbox"/> Condensate line installed without dips or traps |
|---|--|

**Indoor Unit**

17.  Level  
 18.  Adequate clearances for services and operation  
 19.  System was run in both heating and cooling modes to ensure proper operation

**Electrical Work**

20.  Breaker service devise clearly labeled  
 21.  All electrical work performed by licensed electrician or as authorized by Electrician's Board  
 22.  Disconnect box wiring shock risk reduced by lock, strap tie and/or box that provides other means of protection

**Vendor must submit the completed Vendor Inspection Checklist to the CAA with invoice for payment.**

**Registered Vendor Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**HOMEOWNER**

23.  I have been supplied with an Owner's Manual for the heat pump and vendor's contact information.  
 24.  I have been taught how to turn the heat pump on and off, clean the filter, switch between heating and cooling modes, change the temperature set-point, adjust airflow direction and call for services.  
 25.  Noise and vibration levels are acceptable.                      25.  Line set covers are aesthetically acceptable.

**Homeowner Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

## AGENCY HEAT PUMP INSPECTION CHECKLIST

**HEAT Job #:** \_\_\_\_\_ **AGENCY:** \_\_\_\_\_  
**Property Owner:** \_\_\_\_\_ **Agency Inspector:** \_\_\_\_\_  
**Property Address:** \_\_\_\_\_ **Inspect Date:** \_\_\_\_\_  
**Dwelling Type:**     SF     Manufactured Home    **Vendor:** \_\_\_\_\_

Heat Pump System		
	Outside Component	Inside Component
<b>Make/Manufacturer</b>		
<b>Model</b>		
<b>Serial #</b>		
<b>Component Location</b>		
<b>Thermostat Location</b>		

**Unit Inspected**     Yes     No    If yes, complete Inspection Results

INSPECTION RESULTS					
	Pass	Fail	NA	Corrective Action Required	RESOLVED/ Date
<b>Installation Review</b>					
1. Only one heat pump system installed in dwelling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
2. In compliance with the vendor quote and work order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
3. Mounted in an unobstructed location on <input type="checkbox"/> brackets <input type="checkbox"/> stand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
4. Component location maximizes energy efficiency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
5. Rain cap	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
6. Duct covers sealed (prevents pest entry)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
7. Duct covers level or plumb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
8. Insulation full length of refrigerant lines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
9. No exposed copper lines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
10. No evidence of compressor oil from unit/line set	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
11. Exterior and interior components level and accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
12. Wireless remote control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
13. Electrical work complete (per work order)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
14. Electrical panel/service box labeled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
15. Thermostat in acceptable location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
16. Thermostat properly installed and working	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
17. System run in heating/cooling mode	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
<b>Homeowner Interview</b>					
18. Received heat pump manual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
19. Received Introduction to Heat Pumps and User Tips	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
20. Shown how to clean indoor filters, outdoor coils	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
21. Shown how to use heat pump controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
22. Shown how to address error messages / corrective actions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
23. Given vendor contact information for service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
24. Received Heat Pump Client Satisfaction Survey	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
<b>Comments</b>					

**I (the Agency Inspector) certify that the heat pump materials and measures were properly installed in accordance with the work order and that installation was completed in accordance with CHIP Guidance and Procedures.**

Agency Inspector (*signature*) \_\_\_\_\_ Date \_\_\_\_\_