EWEB

Eugene Water & Electric Board

Ducted Heat Pump Program Completion Form

4200 Roosevelt Blvd. Eugene, OR 97402-6520 541-685-7000 www.eweb.org

Address:	Customer Name			
The Ducted Heat Pump system described below has been installed at the above address, is complete, and meets all requirements of EWEB's Ducted Heat Pump Program. As the installing contractor, I have reviewed the system checklist for full program compliance. In addition, I have provided the customer with the operation/instruction manual and a system usage walk-through. I, the undersigned, certify that this information is true and correct.				
Signature (please type in your name for electronic signatures)			Company Name	
Printed Name (Not necessary if signing electronically)			Date	
System Information:				
Heat Pump Manufacturer:				
Heat Pump Model #: Heat Pump Serial #:				
AHU Model #: AHU Serial #:				
Thermostat Manufacturer: Thermostat Model #:				
Tstat setting for Auxiliary Heat lockout (deg F): (must be no higher than 35 deg F)				
Duct Information:				
Were pre-existing ducts used for this installation?			☐ Yes	□ No
If Yes, was the	ere evidence of duct leakage? ☐ I don	n't know	☐ Yes	□ No
If Yes, please describe evidence of duct leakage, such as visual observations or test results. If ducts were tested, please provide duct leakage to exterior test results (CFM50), and if supply-side only test was used.				
Was the duct system sealed as part of this installation?		lation?	☐ Yes	□ No
If Yes, did the duct seal meet specifications?			☐ Yes	□ No
If Yes, the duct sealing may qualify for an additional EWEB rebate. Please also provide a completed duct sealing data collection tool, found here: https://eweb.org/documents/energy-efficiency/prescriptive-duct-sealing-data-collection-tool.pdf				