



An AEP Company

BOUNDLESS ENERGY™

# Standard Offer Program 2018 Field Data Collection Form

Multiple Measures

Residential  
Hard-to-Reach

**Date:** \_\_\_\_\_ **Customer ID #:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Project Sponsor:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Customer Name:** \_\_\_\_\_ **Apt #:** \_\_\_\_\_

**Service address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **County:** \_\_\_\_\_

**ESI ID:** \_\_\_\_\_

**Meter#:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell/Work Phone:** \_\_\_\_\_

**Building Type:** Single family detached      Duplex      Apartment:      Upper      Lower      Middle

**Type:** Mobile home

**Number of stories:** \_\_\_\_\_ **Sq. Ft. of Conditioned Space:** \_\_\_\_\_

**Number of bedrooms:** \_\_\_\_\_ **Number of occupants:** \_\_\_\_\_

**Heating type:** Gas/Propane      Electric Resistance      Heat Pump

**Cooling type:** Central AC      Heat Pump      Window units:      Evaporative cooling

**Water Heating Type:** Electric      Heat pump      Gas appliances:      Yes      No:

Duct and air leakage testing should **not** be conducted in homes where either evidence of asbestos, mold and/or other potentially hazardous material is present or suspected due to the age of the home. Blower door depressurization tests are **prohibited** if there is risk of asbestos becoming airborne and being drawn into conditioned space.

### Duct Sealing, Unit #1

**Pre-retrofit CFM<sub>25</sub>:** \_\_\_\_\_ **Post-retrofit CFM<sub>25</sub>:** \_\_\_\_\_

**Foundation Type:** Slab      Crawlspace/Basement      Conditioned Space (*upper Floor*)

**Floor Area** \_\_\_\_\_

**Air handler location:** Attic/Garage      Interior closet/furr-down      Semi-Conditioned Space

**# of Return Registers:** \_\_\_\_\_

**System cooling capacity TONS:**      5.0      4.5      4.0      3.5      3.0      2.5      2.0      1.5

**Duct type:** Sheet Metal Ducts      Flex Ducts or Fiberboard

**Duct leakage areas treated: (Check all that apply)**

Registers      Return      Plenum      Duct connections      Duct holes/tears

Other: \_\_\_\_\_

### Duct Sealing, Unit #2

**Pre-retrofit CFM<sub>25</sub>:** \_\_\_\_\_ **Post-retrofit CFM<sub>25</sub>:** \_\_\_\_\_

**Foundation Type:** Slab      Crawlspace/Basement      Conditioned Space (*upper Floor*)

**Floor Area** \_\_\_\_\_

**Air handler location:** Attic/Garage      Interior closet/furr-down      Semi-Conditioned Space

**# of Return Registers:** \_\_\_\_\_

**System cooling capacity TONS:**      5.0      4.5      4.0      3.5      3.0      2.5      2.0      1.5

**Duct type:** Sheet Metal Ducts      Flex Ducts or Fiberboard

**Duct leakage areas treated: (Check all that apply)**

Registers      Return      Plenum      Duct connections      Duct holes/tears

Other: \_\_\_\_\_

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**Air Infiltration**

Wind shielding:            Well-shielded                      Normal                      Exposed  
Pre-retrofit CFM<sub>50</sub>:    Post-retrofit CFM<sub>50</sub>:

Air infiltration measures installed: (Check all that apply)

*Number of Plumbing penetrations:*

Kitchen    Bathroom #3  
Bathroom #1                                      Utility Room  
Bathroom #2  
Other:

*Door weatherstripping:*

Exterior door(s). # of doors:  
Furnace closet door  
Water heater door  
Attic access door

*Caulking:*

Windows. # of windows:    Exterior door(s). # of doors:  
Other areas. Describe:  
Light switch/outlet gaskets:  
# of light switch gaskets:    # of outlet gaskets:  
# of sealed light & fan penetrations    Trim & Baseboards  
Other air sealing measures. Describe:

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**Attic Insulation**

*Project Sponsor affirms that an insulation installation certificate was permanently affixed near the attic opening*

Insulation Type :            None                      Loose-fill fiberglass                      Loose-fill cellulose  
   Loose-fill mineral fiber                      Fiberglass/rock wool batt  
Square feet of ceiling to be insulated (*above conditioned space*) :                      Number of bags installed:  
Insulation Condition :            Good            Fair            Poor  
Base R-value of existing insulation:    Pre install insulation depth ("):  
Post install R-value:    Post install insulation depth ("):

**Wall Insulation**

Construction Type:            2 X 4                      2 X 6

Net wall area (gross wall area less window and door area), sq.ft.:

**Floor Insulation**

Area above unconditioned space to be insulated, sq.ft.:

Home type:                      Site built                      Manufactured

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**LEDs**

Total # of LEDs installed:  
Wattage of installed LEDs:  
Lumen output of installed LEDs:  
Wattage of replaced lamp  
Rated lifetime of installed LEDs (hours)  
Location(s) of installed LEDs:  
    Kitchen                      Dining Rm  
    Bath #1                      Laundry Rm  
    Bath #2                      Other  
    Living Rm                      Bedroom #2  
    Bedroom #1                      Bedroom #3

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**Water Heating Measures (Electric Water Heating Only)****Low-flow showerheads**

# of showerheads:                      2 GPM            1.75 GPM            1.5 GPM

**Water heater jacket**

# of electric water heaters treated:  
Water heater size (gal.):            30            40            50            80  
WH location:            Conditioned space            Unconditioned space  
Insulation R-value:

**Pipe insulation**

# of electric WH treated:                      Insulation R-value:  
Pipe length insulated (feet):                      6 ft. maximum  
Pipe location:            Conditioned space            Unconditioned space