



EmPOWERing Clean Energy Communities Grant Program Monthly Energy Metrics Worksheet

ATTACHMENT C

This document collects information on the specific energy measures installed using grant funds, allowing MEA to calculate the energy savings achieved through the grant.

PART I: GRANTEE REPORTING INFORMATION

D. Reporting Period:		E. Organization Information:			
Month:	Year:	Organization Name:	Grant Number	Organization Point of Contact	Daytime Phone Number:

PART II: ENERGY METRICS REPORTING- RESIDENTIAL ENERGY MEASURES

Please select (by checking the box) and complete the fields for the measures that have been **completed during this reporting month only**.

A. LIGHTING

<input type="checkbox"/>	CFL	Residential interior screw-in "bulbs"	Please provide the wattage and amount of installed units pertaining to each wattage:						
				# OF UNITS	WATTAGE	# OF UNITS	WATTAGE	# OF UNITS	WATTAGE
<input type="checkbox"/>	CFL	Residential interior hard-wire fixtures	Please provide the wattage and amount of installed units pertaining to each wattage:						
				# OF UNITS	WATTAGE	# OF UNITS	WATTAGE	# OF UNITS	WATTAGE
<input type="checkbox"/>	CFL	Residential exterior hard-wire fixtures	Please provide the wattage and amount of installed units pertaining to each wattage:						
				# OF UNITS	WATTAGE	# OF UNITS	WATTAGE	# OF UNITS	WATTAGE
<input type="checkbox"/>	LED	Residential interior or exterior lighting	Please provide the wattage and amount of installed units pertaining to each wattage:						
				# OF UNITS	WATTAGE	# OF UNITS	WATTAGE	# OF UNITS	WATTAGE

B. APPLIANCES

<input type="checkbox"/>	REFRIGERATOR	ENERGY STAR	Number of ENERGY STAR rated refrigerators replaced during reporting month: →		Of the ENERGY STAR refrigerators installed during the reporting month, please indicate the number of refrigerators that are also CEE Tier 2 rated: →	
		CEE Tier 2 Status				
<input type="checkbox"/>	CLOTHES WASHER (in a home with An electric water heater)	ENERGY STAR	Number of washers replaced during reporting month: →		Of the ENERGY STAR clothes washers installed during the reporting month, please indicate the number of units that are also CEE TIER 3 rated: →	
		CEE TIER 3 Status				
<input type="checkbox"/>	CLOTHES WASHER (in a home with a fossil fuel water heater)	ENERGY STAR	Number of washers replaced during reporting month: →		Of the ENERGY STAR clothes washers installed during the reporting month, please indicate the number of units that are also CEE TIER 3 rated: →	
		CEE TIER 3 Status				
<input type="checkbox"/>	DISHWASHER (in a home with an electric water heater)	ENERGY STAR Certified	Number of dishwashers replaced during reporting month: →			
<input type="checkbox"/>	DISHWASHER (in a home with a fossil fuel water heater)	ENERGY STAR Certified	Number of dishwashers replaced during reporting month: →			

C. HEATING, VENTILATION, & AIR CONDITIONING (HVAC)

<input type="checkbox"/>	WINDOW AIR CONDITIONING UNIT	ENERGY STAR Certified	Number of units installed during reporting month: →					
Please provide the unit size (BTU/Hour) and amount of installed units pertaining to each size: [Note: 1 ton = 12,000 BTU/Hour]								
			# OF UNITS	BTU/HOUR	# OF UNITS	BTU/HOUR	# OF UNITS	BTU/HOUR
			# OF UNITS	BTU/HOUR	# OF UNITS	BTU/HOUR	# OF UNITS	BTU/HOUR
<input type="checkbox"/>	CENTRAL AIR CONDITIONING (CAC)	ENERGY STAR Certified	NOTE: During projects of this nature, several different types of units with different ratings can be installed within the same reporting period. In the spaces below, please provide system capacity (in BTH/Hour) , Seasonal Energy Efficiency Rating (SEER) , and amount of installed units pertaining to each capacity/rating : [Note: 1 ton = 12,000 BTU/Hour]					

# OF UNITS	BTU/HOUR	SEER	# OF UNITS	BTU/HOUR	SEER	# OF UNITS	BTU/HOUR	SEER
# OF UNITS	BTU/HOUR	SEER	# OF UNITS	BTU/HOUR	SEER	# OF UNITS	BTU/HOUR	SEER

<input type="checkbox"/>	AIR SOURCE HEAT PUMP	ENERGY STAR Certified	NOTE: During projects of this nature, several different types of units with different ratings can be installed within the same reporting period. In the spaces below, please provide system capacity (in Tons) , Seasonal Energy Efficiency Rating (SEER) , Regular Energy Efficiency Rating (EER) , Heating Seasonal Performance Factor (HSPF) and amount of installed units pertaining to each capacity/rating: [Note: 1 ton = 12,000 BTU/Hour]							
# OF UNITS	TONS	SEER	EER	HSPF	# OF UNITS	TONS	SEER	EER	HSPF	
# OF UNITS	TONS	SEER	EER	HSPF	# OF UNITS	TONS	SEER	EER	HSPF	

<input type="checkbox"/>	GAS FURNACE	ENERGY STAR Certified	NOTE: During projects of this nature, several different types of units with different ratings can be installed within the same reporting period. In the spaces below, please provide system heat capacity (BTU/Hour) , the Annual Fuel Utilization Efficiency (AFUE) , and the amount of installed units pertaining to each capacity/rating:								
# OF UNITS	BTU/HOUR	AFUE	# OF UNITS	BTU/HOUR	AFUE	# OF UNITS	BTU/HOUR	AFUE	# OF UNITS	BTU/HOUR	AFUE

<input type="checkbox"/>	BOILER (GAS & OIL)	ENERGY STAR Certified	NOTE: During projects of this nature, several different types of units with different ratings can be installed within the same reporting period. In the spaces below, please provide system heat capacity (BTU/Hour) , the Annual Fuel Utilization Efficiency (AFUE) , and the amount of installed units pertaining to each capacity/rating. Please also verify (by selecting the appropriate box), if the boiler is gas or oil fueled:							
			<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	
# OF UNITS	BTU/HOUR	AFUE	GAS	OIL	# OF UNITS	BTU/HOUR	AFUE	GAS	OIL	
			<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	
# OF UNITS	BTU/HOUR	AFUE	GAS	OIL	# OF UNITS	BTU/HOUR	AFUE	GAS	OIL	

<input type="checkbox"/>	PROGRAMMABLE THERMOSTATS (homes with fossil fuel heating only)	Total number of thermostats installed during reporting month in homes with <u>fossil fuel heating only</u> :	
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D. Water Heating

<input type="checkbox"/>	HEAT PUMP WATER HEATERS	ENERGY STAR Certified	Number of water heaters installed during reporting month:	
For the locations with replaced/installed heat pump electric water heaters, please <i>indicate the number of homes by each heating type</i> :		Electric Resistance Heating	Heat Pump Heating	Fossil Fuel Heating

<input type="checkbox"/>	NATURAL GAS WATER HEATERS	ENERGY STAR Certified	NOTE: During projects of this nature, several different types of units with different values can be installed within the same reporting period. In the spaces below, please provide the energy factor (EF) and the amount of units pertaining to each factor. Make sure to add the correct information to the appropriate type of water heating system indicated below (tank, condensing, or tank-less):								
Tank Natural Gas Water Heater (NOTE: minimum EF = 0.67)						Instantaneous Natural Gas Water Heater (NOTE: minimum EF = 0.80)					
# OF UNITS	EF	# OF UNITS	EF	# OF UNITS	EF	# OF UNITS	EF	# OF UNITS	EF	# OF UNITS	EF
# OF UNITS	EF	# OF UNITS	EF	# OF UNITS	EF	# OF UNITS	EF	# OF UNITS	EF	# OF UNITS	EF

<input type="checkbox"/>	WATER HEATER INSULATION BLANKETS	NOTE: During projects of this nature, different types of blankets with different costs can be installed within the same reporting period. In the spaces below, please provide the actual installation cost , the type of water heater within the home , and the amount of units pertaining to each cost/water heater.									
		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>		
# OF UNITS		ELECTRIC TANK	NATURAL GAS TANK	# OF UNITS				ELECTRIC TANK	NATURAL GAS TANK		

<input type="checkbox"/>	HOT WATER PIPE INSULATION	NOTE: During projects of this nature, the amount of installed pipe insulation may vary between locations within the same reporting period. In the spaces below, please provide the R-Value of the insulation , the circumference of piping being insulated (1/2 inch, 3/4inch, or 1 inch), the type of water heater within the home , and the length of pipe insulation (in feet) .									
		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>		

LENGTH (FT)	R-VALUE	PIPE CIRCUMFERENCE (1/2 inch, 3/4 inch or 1 inch)	ELECTRIC	NATURAL GAS	LENGTH (FT)	R-VALUE	PIPE CIRCUMFERENCE (1/2 inch, 3/4 inch or 1 inch)	ELECTRIC	NATURAL GAS
			<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>
LENGTH (FT)	R-VALUE	PIPE CIRCUMFERENCE (1/2 inch, 3/4 inch or 1 inch)	ELECTRIC	NATURAL GAS	LENGTH (FT)	R-VALUE	PIPE CIRCUMFERENCE (1/2 inch, 3/4 inch or 1 inch)	ELECTRIC	NATURAL GAS

<input type="checkbox"/>	LOW FLOW SHOWERHEADS	Total number of showerheads installed during reporting month in homes with electric water heaters :	➔	
		Total number of showerheads installed during reporting month in homes with natural gas water heaters :	➔	

<input type="checkbox"/>	FAUCET AERATORS (LOW FLOW FAUCETS)	Total number of faucets installed during reporting month in homes with electric water heaters :	➔	
		Total number of faucets installed during reporting month in homes with natural gas water heaters :	➔	

E. Home Envelope

<input type="checkbox"/>	WINDOWS	ENERGY STAR Certified	NOTE: During projects of this nature, installed windows may vary from location to location within the same reporting period. In the spaces below, please provide the type of heating used in the home, total square feet of windows installed, type of heating system (if electric heating), and verifying if the home has central air conditioning , pertaining to each residence.			
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RESIDENCE 1 (WINDOWS):		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SQ. FEET OF WINDOWS INSTALLED	NAT. GAS HEATING	HEAT PUMP (IF ELECTRIC)	RESISTANCE (IF ELECTRIC)	AIR CONDITIONING? YES NO	

RESIDENCE 2 (WINDOWS):		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SQ. FEET OF WINDOWS INSTALLED	NAT. GAS HEATING	HEAT PUMP (IF ELECTRIC)	RESISTANCE (IF ELECTRIC)	AIR CONDITIONING? YES NO	

<input type="checkbox"/>	RESIDENTIAL AIR SEALING	NOTE: During projects of this nature, air sealing projects may vary in scope from location to location within the same reporting period. In the spaces below, please provide the appropriate blower door, air conditioning, heating, and building height information pertaining to each residence that received air sealing.			
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RESIDENCE 1 (AIR SEALING):											
BEFORE AND AFTER BLOWER DOOR RESULTS:		AIR CONDITIONING?		AGE OF AC EQUIPMENT (Leave blank if no AC):		TYPE OF HEATING			FOR FOSSIL FUEL AND HEAT PUMP, AGE OF EQUIPMENT		HOME HEIGHT:
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BEFORE SEALING (CFM ₅₀)	AFTER SEALING (CFM ₅₀)	YES	NO	PRE-2006	2006 & LATER	ELECTRIC (HEAT PUMP)	ELECTRIC RESISTANCE HEAT	FOSSIL FUEL	PRE-2006	2006 & LATER	# OF STORIES

RESIDENCE 2 (AIR SEALING):											
BEFORE AND AFTER BLOWER DOOR RESULTS::		AIR CONDITIONING?		AGE OF AC EQUIPMENT (Leave blank if no AC):		TYPE OF HEATING			FOR FOSSIL FUEL AND HEAT PUMP, AGE OF EQUIPMENT		HOME HEIGHT:
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BEFORE SEALING (CFM ₅₀)	AFTER SEALING (CFM ₅₀)	YES	NO	PRE-2006	2006 & LATER	ELECTRIC (HEAT PUMP)	ELECTRIC RESISTANCE HEAT	FOSSIL FUEL	PRE-2006	2006 & LATER	# OF STORIES

RESIDENCE 3 (AIR SEALING):											
BEFORE AND AFTER BLOWER DOOR RESULTS:		AIR CONDITIONING?		AGE OF AC EQUIPMENT (Leave blank if no AC):		TYPE OF HEATING			FOR FOSSIL FUEL AND HEAT PUMP, AGE OF EQUIPMENT		HOME HEIGHT:
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BEFORE SEALING (CFM ₅₀)	AFTER SEALING (CFM ₅₀)	YES	NO	PRE-2006	2006 & LATER	ELECTRIC (HEAT PUMP)	ELECTRIC RESISTANCE HEAT	FOSSIL FUEL	PRE-2006	2006 & LATER	# OF STORIES

<input type="checkbox"/>	ATTIC & CEILING INSULATION	<p>NOTE: During projects of this nature, insulation projects may vary in scope from location to location within the same reporting period. In the spaces below, please provide the appropriate R-value, air conditioning, heating, and coverage area pertaining to each residence that received attic/ceiling insulation.</p>
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RESIDENCE 1 (ATTIC/CEILING INSULATION):											
FIBERGLASS (BATT) INSULATION INFORMATION (if applicable):						CELLULOSE/FOAM (BLOWN/SPRAYED) INSULATION INFORMATION (if applicable):					
INSULATION R-VALUE			AREA COVERED BY NEW INSULATION:			INSULATION R-VALUE			AREA COVERED BY NEW INSULATION:		
PRE-EXISTING (R-VALUE)	INSULATION R-VALUE AFTER RETROFIT		SQUARE FEET			PRE-EXISTING (R-VALUE)	INSULATION R-VALUE AFTER RETROFIT		SQUARE FEET		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
YES	NO	PRE-2006	2006 & LATER	YES	NO	FOSSIL FUEL	RESISTANCE	ELECTRIC	PRE-2006	2006 & LATER	

RESIDENCE 2 (ATTIC/CEILING INSULATION):										
FIBERGLASS (BATT) INSULATION INFORMATION (if applicable):						CELLULOSE/FOAM (BLOWN/SPRAYED) INSULATION INFORMATION (if applicable):				
INSULATION R-VALUE			AREA COVERED BY NEW INSULATION:			INSULATION R-VALUE			AREA COVERED BY NEW INSULATION:	
PRE-EXISTING (R-VALUE)		INSULATION R-VALUE AFTER RETROFIT		SQUARE FEET		PRE-EXISTING (R-VALUE)		INSULATION R-VALUE AFTER RETROFIT		SQUARE FEET
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
YES	NO	PRE-2006	2006 & LATER	YES	NO	FOSSIL FUEL	RESISTANCE	ELECTRIC	PRE-2006	2006 & LATER

RESIDENCE 3 (ATTIC/CEILING INSULATION):										
FIBERGLASS (BATT) INSULATION INFORMATION (if applicable):						CELLULOSE/FOAM (BLOWN/SPRAYED) INSULATION INFORMATION (if applicable):				
INSULATION R-VALUE			AREA COVERED BY NEW INSULATION:			INSULATION R-VALUE			AREA COVERED BY NEW INSULATION:	
PRE-EXISTING (R-VALUE)		INSULATION R-VALUE AFTER RETROFIT		SQUARE FEET		PRE-EXISTING (R-VALUE)		INSULATION R-VALUE AFTER RETROFIT		SQUARE or LINEAR FEET
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
YES	NO	PRE-2006	2006 & LATER	YES	NO	FOSSIL FUEL	RESISTANCE	ELECTRIC	PRE-2006	2006 & LATER

<input type="checkbox"/>	RESIDENTIAL DUCT SEALING	<p>NOTE: During projects of this nature, duct sealing projects may vary in scope from location to location within the same reporting period. In the spaces below, please provide the appropriate distribution efficiency, air conditioning, and heating pertaining to each residence that received air sealing.</p> <p>Distribution efficiency ratings can be obtained from the Building Performance Institute's Distribution Efficiency Lookup Table available at: http://www.bpi.org/web%20Download/BPI%20Standards/Heating%20Professional_11-20-07.pdf on page 7.</p>	<p>Note: 1 ton = 12,000 BTU/HR</p>
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RESIDENCE 1 (DUCT SEALING):														
DISTRIBUTION EFFICIENCY (%) ¹ :		AIR CONDITIONING?		AGE OF AC EQUIPMENT:		SIZE OF AC EQUIPMENT:		HEATING?		TYPE OF HEATING		AGE OF HEATING EQUIPMENT:		CAPACITY OF HEATING EQUIPMENT:
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

BEFORE SEALING	AFTER SEALING	YES	NO	PRE-2006	2006 & LATER	BTU/HOUR	YES	NO	NATURAL GAS	ELECTRIC (HEAT PUMP)	PRE-2006	2006 & LATER	BTU/HOUR
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RESIDENCE 2 (DUCT SEALING):

DISTRIBUTION EFFICIENCY (%) ¹ :		AIR CONDITIONING?		AGE OF AC EQUIPMENT:		SIZE OF AC EQUIPMENT:	HEATING?		TYPE OF HEATING		AGE OF HEATING EQUIPMENT:		CAPACITY OF HEATING EQUIPMENT:
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
BEFORE SEALING	AFTER SEALING	YES	NO	PRE-2006	2006 & LATER	BTU/HOUR	YES	NO	NATURAL GAS	ELECTRIC (HEAT PUMP)	PRE-2006	2006 & LATER	BTU/HOUR

RESIDENCE 3 (DUCT SEALING):

DISTRIBUTION EFFICIENCY (%) ¹ :		AIR CONDITIONING?		AGE OF AC EQUIPMENT:		SIZE OF AC EQUIPMENT:	HEATING?		TYPE OF HEATING		AGE OF HEATING EQUIPMENT:		CAPACITY OF HEATING EQUIPMENT:
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
BEFORE SEALING	AFTER SEALING	YES	NO	PRE-2006	2006 & LATER	BTU/HOUR	YES	NO	NATURAL GAS	ELECTRIC (HEAT PUMP)	PRE-2006	2006 & LATER	BTU/HOUR

<input type="checkbox"/>	WALL & FLOOR INSULATION	WALL INSULATION INFORMATION:				FLOOR INSULATION INFORMATION:			
		Number of homes (<i>electric heat</i>) that received wall insulation		Number of homes (<i>gas heat</i>) that received wall insulation		Number of homes (<i>electric heat</i>) that received floor insulation		Number of homes (<i>gas heat</i>) that received floor insulation	

PART III: ENERGY METRICS REPORTING- COMMERCIAL ENERGY MEASURES

Due to the wide range of possible commercial energy projects, the energy reporting metrics for commercial EmPOWERing Clean Energy Communities low-to-moderate grant projects will be determined on a case by case basis.

MEASURE CATEGORY 1: TBD

<input type="checkbox"/>	MEASURE 1	
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MEASURE CATEGORY 2: TBD

<input type="checkbox"/>	MEASURE 2	
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