*Please properly review your application form and associated attachments prior to submitting an application to the Clean Burning Wood and Pellet Stove portion of the Residential Clean Energy Rebate Program offered by the Maryland Energy Administration (“MEA”). Be advised that any incomplete or missing information and/or documentation will prevent your application from being approved.*

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| **Checklist for Application** |
| ☐ | Applicant is a resident of the State of Maryland, and the installation address is the applicant’s primary residence. |
| ☐ | Application has been filled out completely and has been signed and dated by the Applicant. |
| ☐ | Installation Contractor and Project information, including hours worked, has been filled out completely. |
| ☐ | Permit and Inspection information has been included for all required permits. |
| ☐ | The Clean Burning Wood Stove Program Terms and Conditions have been reviewed. This document can be found on the MEA website[[1]](#footnote-1). |

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| **Required Supporting Documentation to be Submitted with Application** |
| ☐ | Copies of all permits required by all applicable local, State, and federal jurisdictions. |
| ☐ | Copies of all final inspections indicating a passed/approved status from all applicable local, State, and federal jurisdictions. |
| ☐ | Itemized $0.00 balance invoice from the Installation Contractor/Retailer indicating that all costs associated with the installation of the clean energy system have been paid-in-full. |
| ☐ | Photograph(s) of the completed clean energy system in operation depicting that the system has been fully installed. |

**Please mail the complete completion package to MEA at the following address:**

**Maryland Energy Administration
Attn: Residential Energy Rebate Program**

**1800 Washington Blvd, Suite 755
Baltimore, MD 21230**

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| **Section 1 – Applicant Information (System Owner)** |
| **First Name** (legal name, no abbreviations) | **Middle Initial**(If used on official submissions to the State of Maryland | **Last Name, Including any suffix”(i.e., Jr, III)** (If used on official submissions to the State of Maryland) |
| Click or tap here to enter text. | Click/tap | Click or tap here to enter text. |
| Applicant Email Address | Phone Number |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Installation Address | City | State | Zip Code |
| Click or tap here to enter text. | Click or tap here to enter text. | MD | Click/tap |
| County | Congressional District\* | MD Legislative District\* |
| Choose an item. | Choose an item. | Choose an item. |
| *\*Find Maryland Congressional and Legislative Districts at* [*https://www.mdelect.net*](https://www.mdelect.net) |
| Mailing Address (If different from Installation Address) | City | State | Zip Code |
| Click or tap here to enter text. | Click or tap here. | Choose | Click/tap |
| Primary Point of Contact | ☐ Applicant ☐ Contractor |
| **Section 2 – Clean Burning Stove Information**  |
| Clean Burning Stove Type | System Capacity (Btu/hr) | Total System Cost | Rebate Requirement\*\* |
| ☐ Pellet Burning Stove | Click/tap | Btu/hr | Click/tap | Choose |
| ☐ Wood Burning Stove | Click/tap | Btu/hr | Click/tap | Choose |
| Stove Manufacturer | Click or tap here to enter text. | Gram/hr of PM\*\*\* | Click/tap |
| Model | Click or tap here to enter text. | EPA Efficiency Rating | Click/tap % |
| *\*\* Stoves purchased on or after February 1, 2020* ***must have*** *an* ***EPA-published*** *efficiency rating of at least 70% to receive the award. \*\*\*Grams of particulate matter emitted per hour. Pellet stoves cannot emit more than 2.0 Grams/hr, and wood stoves cannot emit more than 3.0 Grams/hr.* |
| **Section 3 – Applicant Signature – CAREFULLY READ THE STATEMENTS BELOW BEFORE SIGNING** |
| I affirm under penalties of law that: 1. A qualified clean energy system has been installed at the installation address specified in Section 1 of this Residential Clean Energy Rebate Application for wood and pellet stoves. 2. I am a legal resident of the State of Maryland. 3. I own the property for which I am applying, and it is my primary residence. 4. The information in Section 5 concerning the installation contractor is true to the best of my knowledge. 5. If the property is held in trust: I attest that the trust is revocable, and I have the right to remove the property from the trust. 6. I have complied with all state laws, local ordinances, and other legally binding requirements. 7. The contents of this application are true to the best of my knowledge, information, and belief. 8. I have read and agree to the terms outlined in the Terms and Conditions document at https://energy.maryland.gov/residential/Pages/incentives/woodstoves.aspx. 9. MEA strongly encourages the Applicant to use a contractor who is National Fireplace Institute (NFI) certified.  |
| **Print Full Legal Name (as used on official submissions to the State of Maryland)** | OFFICIAL USE ONLY |
| D13 | 03 | 512SA | 1298 |  |
| Click or tap here to enter text. | AGENCY | FUND | PCA | SUB-OBJ | FY |
| **Social Security Number (REQUIRED to issue payment)** |  |  |
| Click or tap here to enter text. | SSN | AMOUNT |
|  | MEA- |  |
| **Handwritten Signature** | PM INIT | MEA INVOICE NUMBER | DATE RECEIVED |
| **X** |  |  |
| MEA APPROVAL | FINANCIAL ADM APPROVAL |
| **PLEASE NOTE:****Your application is not valid unless signed.** | DATE: |  |
| POSTED: |  |



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| **Section 4 – Permitting & Installation Information** |
| State the Permitting Authority (County or Municipality having jurisdiction) and applicable permit numbers and dates of final inspections below: |
| Circle Y or N: | **Final** Inspections: |
| Required? | Permitting Authority | **Building** Permit Number | Date **Passed** |
| Y / N | Click or tap here to enter text. | Click/tap to enter text. | Click/tap to enter text. |
| Required? | Permitting Authority | **Electrical** Permit Number | Date **Passed** |
| Y / N | Click or tap here to enter text. | Click/tap to enter text. | Click/tap to enter text. |
| Required? | Permitting Authority | **HVAC/Mech** Permit Number | Date **Passed** |
| Y / N | Click or tap here to enter text. | Click/tap to enter text. | Click/tap to enter text. |
| Required? | Permitting Authority | **Plumbing** Permit Number | Date **Passed** |
| Y / N | Click or tap here to enter text. | Click/tap to enter text. | Click/tap to enter text. |
|  |
| Project Installation Information |
| Project Start Date | Project Completion Date | Total Person Hours Worked |
| Click/tap to enter text. | Click/tap to enter text. | Click/tap to enter text. |
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| **Section 5 – Installation Contractor Information**  |
| ***MEA strongly encourages the Applicant to use a contractor who is National Fireplace Institute (NFI) certified. Installers must have a Maryland Home Improvement Commission (“MHIC”) license.***Please enter the information for the installation contractor that installed the clean energy system in the section below. The **Contractor** **must be registered to do business in the State of Maryland, possess all licenses and certifications required by applicable Federal, State, and local laws, regulations, and other legally-binding requirements, and be in Good Standing with the Maryland State Department of Assessments and Taxation.** By signing the Application in Section 3, you are attesting that the following information about the installation contractor is true and correct to the best of your knowledge, information, and belief. |
| Company Name | License Type | MHIC License Number |
| Click/tap to enter text. | Click/tap to enter text. | Click/tap to enter text. |
| Name of Contact Person | Title of Contact Person |
| Click/tap to enter text. | Click/tap to enter text. |
| Company Phone Number | Contact Person’s Email Address |
| Click/tap to enter text. | Click/tap to enter text. |
| Company Street Address | City | State | Zip Code |
| Click/tap to enter text. | Click/tap to enter text. | Choose | Click/tap |

Section 6—Electronic Communication

Electronic communication provides the fastest and most efficient method of interacting with MEA; therefore, MEA intends to use electronic communication as the primary way to communicate with each applicant. If you do not agree to using electronic communication, you must indicate your decision to opt out below:

**The Applicant opts out of using electronic communication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (initial here).**

1. <https://energy.maryland.gov/business/Pages/Incentives/CleanEnergyGrants.aspx> [↑](#footnote-ref-1)