



Residential Rebate Application
Clean Burning Wood and Pellet Stoves
Maryland Clean Energy Rebate Program

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.

Checklist for Application	
<input type="checkbox"/>	Applicant is a resident of the State of Maryland, and the installation address is the applicant’s primary residence.
<input type="checkbox"/>	Application has been filled out completely and has been signed and dated by the Applicant.
<input type="checkbox"/>	Installation Contractor and Project information, including hours worked, has been filled out completely.
<input type="checkbox"/>	Permit and Inspection information has been included for all required permits.
<input type="checkbox"/>	The Clean Burning Wood Stove Program Terms and Conditions have been reviewed. This document can be found on the MEA website ¹ .

Required Supporting Documentation to be Submitted with Application	
<input type="checkbox"/>	Copies of all permits required by all applicable local, State, and federal jurisdictions.
<input type="checkbox"/>	Copies of all final inspections indicating a passed/approved status from all applicable local, State, and federal jurisdictions.
<input type="checkbox"/>	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.
<input type="checkbox"/>	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

¹ <https://energy.maryland.gov/business/Pages/Incentives/CleanEnergyGrants.aspx>



**Residential Rebate Application
Clean Burning Wood and Pellet Stoves
Maryland Clean Energy Rebate Program**

Section 1 – Applicant Information (System Owner)					
First Name (As shown on MD income tax return)		Middle Initial (Only if used on your MD tax return)		Last Name, Including any suffix (i.e., Jr, III) (As shown on your MD income tax return)	
Applicant Email Address			Phone Number		
Installation Address		City		State	Zip Code
				MD	
County		Congressional District*		MD Legislative District*	
*Find Maryland Congressional and Legislative Districts at https://www.mdelect.net					
Mailing Address (If different from Installation Address)		City		State	Zip Code
Primary Point of Contact		<input type="checkbox"/> Applicant <input type="checkbox"/> Contractor			
Section 2 – Clean Burning Stove Information					
Clean Burning Stove Type		System Capacity (Btu/hr)		Total System Cost	Rebate Requirement**
<input type="checkbox"/> Pellet Burning Stove		Btu/hr			
<input type="checkbox"/> Wood Burning Stove		Btu/hr			
Stove Manufacturer				Gram/hr of PM***	
Model				EPA Efficiency Rating	%
** Stoves 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. Applicants may confirm stove information at https://cfpub.epa.gov/oarweb/woodstove/index.cfm?					
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. <u>If the property is held in trust</u> : 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 shown on your MD Income Tax)		OFFICIAL USE ONLY			
		D13	03	512SA	1298
		AGENCY	FUND	PCA	SUB-OBJ FY
Social Security Number (REQUIRED to issue payment)		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:			

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			
Required?	Permitting Authority	Electrical Permit Number	Date Passed
Y N			
Required?	Permitting Authority	HVAC/Mech Permit Number	Date Passed
Y N			
Required?	Permitting Authority	Plumbing Permit Number	Date Passed
Y N			
Project Installation Information			
Project Start Date	Project Completion Date	Total Person Hours Worked	
Section 5 – Installation Contractor Information			
<i>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.</i>			
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	
Name of Contact Person		Title of Contact Person	
Company Phone Number		Contact Person's Email Address	
Company Street Address	City	State	Zip Code

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).