

Utility Name  
Address  
City/State/Zip  
Email

## Ductless and Ducted Mini-Split Heat Pump (DHP) Project Installation Form

All sections must be filled out by the installer at the time of installation. A copy of this completed form and the purchase receipt or invoice must be promptly submitted to the homeowner's utility in accordance with utility policy.

All systems should:

1. Be installed according to the [Best Practices for Installing Ductless Heat Pumps Guide](#) in BPA's Energy Efficiency Document Library.
2. Be installed in accordance with manufacturer specifications, including adherence to proper refrigerant charging.
3. Meet local utility requirements.
4. Installed by a certified Technician

<b>Customer Name</b>		<b>Customer Electric Utility</b>	
<b>Installation Address</b>		<b>City</b>	<b>State</b>
<b>Year Built:</b>	<b>Total Heated Area of the Home:</b>	<b>Sq Ft</b>	<b>Customer Phone</b>
<i>Mailing Address, if different:</i>			

<b>What is Being Installed? (Select One)</b>	<b>Eligible Home Types (Select One)</b>	<b>Eligible Existing Heating System Being Displaced (Select One)</b>
<input type="checkbox"/> <b>Single Ductless Indoor Head</b> <input type="checkbox"/> <b>Single Ducted Mini-Split<sup>1</sup></b> <input type="checkbox"/> <b>Multiple Ductless Indoor Heads</b> <input type="checkbox"/> <b>Multiple Indoor Ducted Mini-Splits<sup>1</sup></b> <b>Combination Ductless/Ducted Mini-Splits</b>	<input type="checkbox"/> Existing Single-family <input type="checkbox"/> Existing Manufactured <input type="checkbox"/> New Manufactured (treated as manufactured existing once located on site for occupancy)	<input type="checkbox"/> Electric Forced Air Furnace  <input type="checkbox"/> Electric Zonal <sup>2</sup>

<sup>1</sup> The Ducted Mini-Split option does not include whole-home centrally ducted systems

<sup>2</sup> Zonal heating includes electric, non-ducted: Ceiling cable, wall, baseboard, plug-in space heaters, and an electric boiler/water heater attached to a hydronic floor heating system.

### Installation Information

<b>AHRI Certified Reference #:</b>		<b>HSPF2 Rating*:</b>	<b>Installation Date:</b>	
<b>Outdoor Unit Manufacturer:</b>		<b>Outdoor Unit Model(s) #:</b>		
<b>Associated Indoor Units</b>	<b>Indoor Unit Model Number(s)</b>	<b>Associated Indoor Units</b>	<b>Indoor Unit Model Number(s)</b>	
<b>Indoor Unit 1:</b>		<b>Indoor Unit 3 (if installed):</b>		
<b>Indoor Unit 2 (if installed):</b>		<b>Indoor Unit 4 (if installed):</b>		
<b>Total Installed Cost (before rebates): \$ _____</b>		<b>Additional repair cost (if low income): \$ _____</b>		

*\*If the unit only has a HSPF rating, please contact your utility for guidance on verification requirements*