

Ductless Heat Pump – Retrofits and Upgrades

Project Information Form

For Commercial, Industrial, and Agricultural Applications



Instructions: Complete this form and submit it to the serving electric utility.

BUSINESS AND SITE INFORMATION

Customer Name				
Installation Address (Street, City, State, Zip)				
Customer Phone Number				
Building type (Please check one)	<input type="checkbox"/> Office	<input type="checkbox"/> Retail	<input type="checkbox"/> Grocery	<input type="checkbox"/> Lodging
	<input type="checkbox"/> Warehouse	<input type="checkbox"/> Food Service	<input type="checkbox"/> Hospital	<input type="checkbox"/> School
	<input type="checkbox"/> Residential Care	<input type="checkbox"/> Assembly	<input type="checkbox"/> Other (describe):	

PROJECT INFORMATION

For additional equipment, use an additional form.

Project Information	DHP 1	DHP 2
Project Type (Please check one)	<input type="checkbox"/> DHP Retrofit <input type="checkbox"/> DHP Upgrade	<input type="checkbox"/> DHP Retrofit <input type="checkbox"/> DHP Upgrade
For DHP Retrofits, what was primary heating system type? (Please check one)	<input type="checkbox"/> Electric zonal <input type="checkbox"/> Electric forced air furnace	<input type="checkbox"/> Electric zonal <input type="checkbox"/> Electric forced air furnace
For DHP Upgrades, what was primary heating system type? (Please check one)	<input type="checkbox"/> DHP <input type="checkbox"/> N/A (New construction or major renovation)	<input type="checkbox"/> DHP <input type="checkbox"/> N/A (New construction or major renovation)
Manufacturer		
Model		
Outdoor unit cooling capacity (tons)		
Installed cost (per attached invoice)		
Order/purchase date (per attached invoice)		

The installed DHP must:

1. Be on the BPA Qualified Products List (<https://www.tradeallnetworknw.com/program-offerings/hvac/ductless-heat-pumps/>)
2. Have an outdoor condenser rating that meets BPA's efficiency requirements outlined in the table below:

Indoor Unit Type	Efficiency Requirement
Non-Ducted	11.0 HSPF*
Ducted or Mixed	10.0 HSPF*

* The minimum HSPF applies to both single and multi-head systems.

Additional terms, conditions, and requirements may apply.

Effective date: October 1, 2019.

INSTALLER SIGNATURE

Signature	
Name	
Company	
Date	

By signing this form, I confirm that the above information is correct to the best of my knowledge.