



# 2010 Residential Energy Audit Application Form

Fill in all the fields below completely. Please note, rebate funds are limited, only apply to Minnesota customers, and will be paid on a first-come, first-served basis. This program ends December 31. (Rev. 1/10)

## Customer Information (Please Print)

Name: \_\_\_\_\_ GPNG Account No. \_\_\_\_\_

Address: \_\_\_\_\_ City / State / Zip: \_\_\_\_\_  
(Property at which audit is requested)

Mailing Address (if different): \_\_\_\_\_ City / State / Zip: \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

### (Residential Household information required by MN DOC)

Is this a rental property? Yes  No  If rental, name of owner \_\_\_\_\_

Number of persons in household: \_\_\_\_\_ Owner's address \_\_\_\_\_

Total <u>yearly</u> household income:	[ ] \$0 - \$21,695	[ ] \$21,696 - \$29,140	[ ] \$29,141 - \$36,620
	[ ] \$36,621 - \$44,100	[ ] \$44,101 - \$51,580	[ ] \$51,581 - \$59,060
	[ ] \$59,061 - \$66,540	[ ] \$66,541 - \$74,020	[ ] \$74,021 & over

## Audit Request Agreement

I wish to have an energy audit performed on my home. I understand that Great Plains Natural Gas Co. (Great Plains), through its Conservation Improvement Program (CIP), has a limited number of audits available in my community. The audit will be performed by a state certified auditor contracted by Great Plains. This plan is on a first-come – first-served basis. Upon receipt of the application it will be determined if there are audits available in your community. You will be notified whether or not an audit will be performed on your home. If you are selected to have an audit performed, the contractor will contact you to schedule the audit. Signing below gives Great Plains permission to provide one year's of natural gas usage information to the contractor.

**I would like an Energy Audit performed on my home.**  
**I understand that I will be billed \$50.00 for the Energy Audit.**

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Send Completed Application to:

**Great Plains Natural Gas Co.**  
**Attn: Market & Sales Support**  
**400 North 4<sup>th</sup> Street**  
**Bismarck, ND 58501**

## For Great Plains Internal Use Only

Date Audit Form Received \_\_\_\_\_ Date Audit Completed \_\_\_\_\_

Low-Income Qualified \_\_\_\_\_ Account Distribution 116620.1.1861.5700

Approved by \_\_\_\_\_ Date \_\_\_\_\_

*Please attach a copy of the audit report*

***This program is subject to change and approval by the Minnesota Department of Commerce.***