



2026 Residential Energy Assessment 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. 01/26)

Customer Information

Customer Name:

GPNG Account No.:

E-mail Address:

Service Address:

City

State

Zip

Mailing Address (If Different):

City

State

Zip

Home Phone:

Daytime Phone:

Residential household information required by MN DOC

Is this a rental property? Yes No

If Rental Property-Name of Owner:

Owner's Address:

How many people live at this residence?

Total yearly household income:

\$ 0 - \$37,439

\$37,440 - \$48,959

\$48,960 - \$60,479

\$60,480 - \$71,999

\$72,000 - \$83,518

\$83,519 - \$95,038

\$95,039 - \$97,198

\$97,199 - \$99,358

\$99,359 & Over

Energy Assessment Request Agreement

I wish to have an energy assessment performed on my home. I understand that Great Plains Natural Gas Co. (Great Plains), through its Energy Conservation Optimization (ECO) Program, has a limited number of assessments available. The assessment will be performed by a state certified auditor contracted by Great Plains.

Upon receipt of the application it will be determined if there are assessments available and you will be notified whether or not an assessment will be performed on your home. If you are selected to have an assessment performed, the contractor will contact you to schedule the assessment. Assessments are awarded on a first come first served basis. Signing below gives Great Plains permission to provide one year of natural gas usage information to the contractor*.

I would like an Energy Assessment performed on my home, and I understand that I will be billed \$50 for the Energy Assessment once completed. Missed appointments with the auditor may result in an additional \$50 charge for each occurrence.

Signature

Customer Signature:

Date:

* Great Plains will have no control over the information disclosed pursuant to this consent, and will not be responsible for monitoring or taking any steps to ensure that the recipient maintains the confidentiality of the information or uses the information as authorized by you. Please be advised that you may not be able to control the use or misuse of your information once it has been released.

Send completed application to:

Great Plains Natural Gas Co.

Attn: Energy Programs

400 North 4th Street

Bismarck, ND 58501

In addition to the energy usage information described above, the records received by the organization may include other information such as your name; account number; meter number; utility type; service address; billing date(s); number of days in the billing period; or bill amount. Great Plains will not provide any other information, including Personally Identifiable Information such as your Social Security Number or any financial account number to the organization through this consent form.

For Great plains Internal Use Only

Date Application Received: _____

Date Assessment Completed: _____

Cost of Energy Assessment: _____

Is this a rental property? Yes No

Account Distribution: 73106.8731.29080.116620

Approved by: _____

Date Processed: _____

Please attach a copy of the energy assessment report

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