Approved: 01/01/2024

Date



2024 INSULATION APPLICATION

All sections must be filled out, signed, and dated by a WA State registered contractor and the building owner as applicable. An incomplete form will not be processed. A copy of your final paid invoice(s) and/or receipt(s) need to be included with this form. Qualifying Insulation must be properly installed in an existing site-built dwelling unit with a primary electrical heat source to qualify. Programs are subject to change or cancellation without notice.

Site Information (please print clearly)

Print Name

Customer Name	Meter Number	Installation Date	
Installation Site Address	City	Contact Phone #	
Mailing Address	City	State	Zip
Primary Building Heat Source □ Baseboard/ Zonal Heat □ Electric Furnace W/O AC □ Electric Furnace W/ AC □ Heat Pump □ Other:			
Existing Insulation Level: Attic R	R, Crawl Space R	, Square Feet	
Insulation Installed Level: Attic	R, Crawl Space R	, Square Feet	
☐ Invoice Provided ☐ Bag Cou	nt Left in Attic and Provided to	PUD , if ap	plicable.
Contractor: By signing below you are existing insulation level, the building completed the measure(s) per BPA W project were completed as of the sign documentation are complete and accomplete.	is a site-built dwelling(s) of existin /eatherization Specifications, all m nature date below and this form a	g construction	on, you have ociated with this
Print Name	Signature		Date
Owner: By signing below, you are ce requested, will allow a representative			

For more information, please see www.grantpud.org/rebates.

For questions regarding Grant PUD's Residential Rebate Programs, please email us at EnergyServices@gcpud.org or call 509/766-2512.

Signature