



## Certification of Completion Form

This form should be completed jointly between Homeowner and St. Louis County SAVES™ authorized contractor(s). ***This form is required to have loan closing documents released to the homeowner and issue payment to the contractors.*** In most cases, the majority of information provided on this form should match the Project Scope of Work Form submitted earlier.

The electronic version of this form, as an Adobe PDF, can be completely filled out electronically, including e-signatures. The form is set up to allow e-signatures by multiple parties if necessary. Unapplicable sections can be ignored.

Once completed, return this form by mail, email or fax to:  
St. Louis County SAVES, c/o Energy Manager, The Missouri Botanical Garden's EarthWays Center  
4651 Shaw Blvd. St. Louis, MO 63110  
Email: [completion@StLouisCountySAVES.com](mailto:completion@StLouisCountySAVES.com)

### Required Attachments

Attach or separately submit the following:

- Invoices associated with all improvements that are being financed

### Section A: Homeowner Data

|                         |  |               |  |
|-------------------------|--|---------------|--|
| Last Name:              |  | First Name:   |  |
| Email Address:          |  | Phone Number: |  |
| Project Street Address: |  |               |  |
| City:                   |  | State:        |  |
|                         |  | Zip Code:     |  |

### Co-Homeowner Data

|                |  |               |  |
|----------------|--|---------------|--|
| Last Name:     |  | First Name:   |  |
| Email Address: |  | Phone Number: |  |

## Section B: Home Energy Assessment Test-Out Data

\*Air sealing improvements, duct sealing improvements, and combustion equipment installations require all or limited test-out data be provided, per BPI standards.

|                               |  |                            |  |
|-------------------------------|--|----------------------------|--|
| <b>Authorized Contractor:</b> |  | <b>Representative:</b>     |  |
| <b>Email Address:</b>         |  | <b>Phone Number:</b>       |  |
| <b>Test Date:</b>             |  | <b>Ambient CO (ppm):</b>   |  |
|                               |  | <b>Undiluted CO (ppm):</b> |  |

|  |             |             |              |             |
|--|-------------|-------------|--------------|-------------|
| <b>Blower Door (CFM50):</b>                  | <b>Pre:</b> |             | <b>Post:</b> |             |
| <b>Ventilation Required (CFM50):</b>         |             |             |              |             |
| <b>Excess (+/-) Air Leakage (CFM50):</b>     |             |             |              |             |
| <b>Duct Leakage (@25PA):</b>                 | <b>Pre:</b> |             | <b>Post:</b> |             |
| <b>Highest Press. Pan Reading (PA):</b>      |             |             |              |             |
| <b>Worst Case CAZ Depressurization (PA):</b> | <b>Pre:</b> |             | <b>Post:</b> |             |
| <b>CAZ Depressurization Limit (PA):</b>      | <b>Pre:</b> | [pull down] | <b>Post:</b> | [pull down] |
| <b>CAZ Depressurization (Pass/Fail):</b>     | <b>Pre:</b> | pass/fail   | <b>Post:</b> | pass/fail   |
| <b>Worst Case Spillage (Pass/Fail):</b>      | <b>Pre:</b> | pass/fail   | <b>Post:</b> | pass/fail   |
| <b>Worst Case Draft (Pass/Fail):</b>         | <b>Pre:</b> | pass/fail   | <b>Post:</b> | pass/fail   |

### Final Finance Summary - Home Energy Assessment

|   |     |
|---|-----|
| <b>Price (Test-In/Out/CAZ):</b>   | \$  |
| <b>Less Homeowner Contribution/Commitment:</b>                            | -\$ |
| <b>Less Dealer/Contractor Incentives:</b>                                 | -\$ |
| <b>Less Instant Utility Incentives or Rebates:</b>                        | -\$ |
| <b>Total Loan Amount to be Paid to Home Energy Assessment Contractor:</b> | \$  |

**Certification of Accuracy:** Contractor certifies the above data is accurate and real based on testing conducted in accordance with BPI standards.

|                              |       |
|------------------------------|-------|
| <b>Authorized Signature:</b> | _____ |
|------------------------------|-------|

## Section C: Final Insulation and Air/Duct Sealing Scope

Authorized Contractor: \_\_\_\_\_ Representative: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Actual Installation Date(s): \_\_\_\_\_

Test-Out Data must be provided in the Home Energy Assessment section above if air and/or duct sealing was included as an improvement.

| <u>Air Sealing</u> | <u>Description (material used and location)</u> | <u>Quantity (ft)</u> | <u>Price</u> |
|--------------------|---|----------------------|--------------|
| Air Sealing:       |   |                      |              |
| Air Sealing:       |   |                      |              |
| Air Sealing:       |   |                      |              |
| Air Sealing:       |   |                      |              |
| Other:             |   |                      |              |

Blower Door Results (CFM50), Pre: \_\_\_\_\_ Post: \_\_\_\_\_

| <u>Duct Sealing</u> | <u>Description (material used and location)</u> | <u>Quantity (ft)</u> | <u>Price</u> |
|---------------------|---|----------------------|--------------|
| Duct Sealing:       |   |                      |              |
| Duct Sealing:       |   |                      |              |
| Other:              |   |                      |              |

Final Duct Leakage (@25PA), Pre: \_\_\_\_\_ Post: \_\_\_\_\_

| <u>Insulation Improvements</u> | <u>Pre (R)</u> | <u>Post (R)</u> | <u>Material</u> | <u>Quantity (ft)</u> | <u>Price</u> |
|--------------------------------|----------------|-----------------|-----------------|----------------------|--------------|
| Attic Insulation:              |                |                 |                 |                      |              |
| Wall Insulation:               |                |                 |                 |                      |              |
| Crawl Space Insulation:        |                |                 |                 |                      |              |
| Duct Insulation:               |                |                 |                 |                      |              |
| Pipe Insulation                |                |                 |                 |                      |              |

| <u>Other Improvements</u>   | <u>Description (material used and location)</u> | <u>Price</u> |
|-----------------------------|---|--------------|
| Duct Replacement:           |   |              |
| Attic Door Insulated Cover: |   |              |
| Other (inc. Health/Safety): |   |              |

### Final Finance Summary - Insulation and Air/Duct Sealing

|  |            |
|--|------------|
| <b>Sum of Final Insulation and Air/Duct Sealing Costs:</b>                         | <b>\$</b>  |
| <b>Less Homeowner Contribution/Commitment:</b>                                     | <b>-\$</b> |
| <b>Less Dealer/Contractor Incentives:</b>  | <b>-\$</b> |
| <b>Less Instant Utility Incentives or Rebates:</b>                                 | <b>-\$</b> |
| <b>Total Loan Amount to be Paid to Insulation and Air/Duct Sealing Contractor:</b> | <b>\$</b>  |

## Section D: Final HVAC and Water Heating Scope

Authorized Contractor: \_\_\_\_\_ Representative: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Actual Installation Date(s): \_\_\_\_\_

| <u>Improvement</u> | <u>Description (Manufacturer, Model, Efficiency, Accessories)</u> | <u>Price</u> |
|--------------------|---|--------------|
|--------------------|---|--------------|

For State Historic Preservation Office compliance reviews, post-retrofit location of outside equipment must be described within 'Post-Retrofit Condition'

|  |                           |  |
|--|---------------------------|--|
|  | Pre-Retrofit (incl. age): |  |
|  | Post-Retrofit Condition:  |  |
|  | Pre-Retrofit (incl. age): |  |
|  | Post-Retrofit Condition:  |  |
|  | Pre-Retrofit (incl. age): |  |
|  | Post-Retrofit Condition:  |  |
|  | Pre-Retrofit (incl. age): |  |
|  | Post-Retrofit Condition:  |  |

|   |            |
|---|------------|
| Check here to indicate that Manual J load calculations were performed for all HVAC replacements | [checkbox] |
|---|------------|

| <u>Duct Sealing</u>  | <u>Description (material used and location)</u> |                 | <u>Quantity (ft)</u> | <u>Price</u>         |              |
|--|---|-----------------|----------------------|----------------------|--------------|
| Test-In/Out Data must be provided in the Home Energy Assessment section above if duct sealing to existing ductwork was provided. |   |                 |                      |                      |              |
| Duct Sealing:  |   |                 |                      |                      |              |
| Duct Sealing:  |   |                 |                      |                      |              |
| Final Duct Leakage (@25PA), Pre:   |   | Post:           |                      |                      |              |
| <u>Insulation Improvements</u>   | <u>Pre (R)</u>                                  | <u>Post (R)</u> | <u>Material</u>      | <u>Quantity (ft)</u> | <u>Price</u> |
| Duct Insulation:   |   |                 |                      |                      |              |
| Pipe Insulation  |   |                 |                      |                      |              |
| <u>Other Improvements</u>  | <u>Description (material used and location)</u> |                 |                      | <u>Price</u>         |              |
| Duct Replacement:  |   |                 |                      |                      |              |
| Other (inc. Health/Safety):  |   |                 |                      |                      |              |
| Final Finance Summary - HVAC and Water Heating   |   |                 |                      |                      |              |
| Sum of Final HVAC and Water Heating Costs:   |   |                 | \$                   |                      |              |
| Less Homeowner Contribution/Commitment:  |   |                 | -\$                  |                      |              |
| Less Dealer/Contractor Incentives:   |   |                 | -\$                  |                      |              |
| Less Instant Utility Incentives or Rebates:  |   |                 | -\$                  |                      |              |
| Total Loan Amount to be Paid to HVAC and Water Heating Contractor:   |   |                 | \$                   |                      |              |

## Section E: Final Doors, Windows and Roofing Scope

|                                     |  |                        |  |
|-------------------------------------|--|------------------------|--|
| <b>Authorized Contractor:</b>       |  | <b>Representative:</b> |  |
| <b>Email Address:</b>               |  | <b>Phone Number:</b>   |  |
| <b>Actual Installation Date(s):</b> |  |                        |  |

| <u>Improvement</u> |                          | <u>Description (Mfg, Model, Quantity, Size/Area, Performance)</u> | <u>Price</u> |
|--------------------|--------------------------|---|--------------|
|                    | Pre-Retrofit Condition:  |   |              |
|                    | Post-Retrofit Condition: |   |              |
|                    | Pre-Retrofit Condition:  |   |              |
|                    | Post-Retrofit Condition: |   |              |
|                    | Pre-Retrofit Condition:  |   |              |
|                    | Post-Retrofit Condition: |   |              |

### Final Finance Summary - Doors, Windows and Roofing

|   |            |
|---|------------|
| <b>Sum of Final Doors, Windows and Roofing Costs:</b>                         | <b>\$</b>  |
| <b>Less Homeowner Contribution/Commitment:</b>                                | <b>-\$</b> |
| <b>Less Dealer/Contractor Incentives:</b>                                     | <b>-\$</b> |
| <b>Less Instant Utility Incentives or Rebates:</b>                            | <b>-\$</b> |
| <b>Total Loan Amount to be Paid to Doors, Windows and Roofing Contractor:</b> | <b>\$</b>  |



## Section F: Final Health & Safety, Solar, Other Improvements or Exception Requests

|                                     |  |                        |  |
|-------------------------------------|--|------------------------|--|
| <b>Authorized Contractor:</b>       |  | <b>Representative:</b> |  |
| <b>Email Address:</b>               |  | <b>Phone Number:</b>   |  |
| <b>Actual Installation Date(s):</b> |  |                        |  |

| <u>Improvement</u>   | <u>Description</u> | <u>Price</u> |
|--|--------------------|--------------|
| For improvements not explicitly allowed in the Eligible Improvements List, a rationale for the improvement (and/or exception request) must be described within 'Post-Retrofit Condition' |                    |              |

|  |                                 |  |  |
|--|---------------------------------|--|--|
|  | <b>Pre-Retrofit Condition:</b>  |  |  |
|  | <b>Post-Retrofit Condition:</b> |  |  |
|  | <b>Pre-Retrofit Condition:</b>  |  |  |
|  | <b>Post-Retrofit Condition:</b> |  |  |
|  | <b>Pre-Retrofit Condition:</b>  |  |  |
|  | <b>Post-Retrofit Condition:</b> |  |  |

### Final Finance Summary - Health & Safety/Other Improvements

|  |     |
|--|-----|
| <b>Sum of Final Health &amp; Safety, Solar, Other Improvements Costs:</b>  | \$  |
| <b>Less Homeowner Contribution/Commitment:</b>   | -\$ |
| <b>Less Dealer/Contractor Incentives:</b>  | -\$ |
| <b>Less Instant Utility Incentives or Rebates:</b>   | -\$ |
| <b>Total Loan Amount to be Paid to Health &amp; Safety, Solar, Other Improvements Contractor Listed in this Section:</b> | \$  |

## Section G: Final Total Project Finance Summary

|  |    |
|--|----|
| <b>Loan Amount to be Paid to Home Energy Assessment Contractor:</b>  | \$ |
| <b>Loan Amount to be Paid to Insulation and Air/Duct Sealing Contractor:</b>                                       | \$ |
| <b>Loan Amount to be Paid to HVAC and Water Heating Contractor:</b>  | \$ |
| <b>Loan Amount to be Paid to Doors, Windows and Roofing Contractor:</b>  | \$ |
| <b>Loan Amount to be Paid to Health &amp; Safety, Solar, Other Improvements Contractor Listed in that Section:</b> | \$ |
| <b>TOTAL LOAN-FUNDED PROJECT COST (3% program fee will be automatically added to final loan amount):</b>           | \$ |
| <b>Desired Loan Term (3-10 years)</b>  |    |
| <b>Notes:</b>  |    |

## Section H: Homeowner Certification of Acceptance

The Homeowner understands that St. Louis County, Missouri, its Program Administrator Abundant Power Solutions, LLC, the EarthWays Center of Missouri Botanical Garden and its third party service providers (collectively, the "Program") does not warrant any of the work performed by Program Authorized Contractors and that the Homeowner is responsible for ensuring that all work is performed to their satisfaction.

[checkbox]

Homeowner, by signing below, agrees that all improvements indicated within this Certification of Completion Form has been completed to the Borrower's satisfaction and further authorizes the Program to issue payment to the installing contractors as tabulated above.

[checkbox]

Homeowner, by signing below, authorizes the Program to modify an active loan application to reflect Total Loan Amount and Desired Loan Term as indicated in final amounts on this form. A final loan package will typically be issued to the Homeowner for signing within 7 days of this submittal.

[checkbox]

**Homeowner Signature:**

\_\_\_\_\_

**Co-Homeowner Signature:**

\_\_\_\_\_

**Date:**

\_\_\_\_\_

## Section I: Program Certification

This sheet should be filled out and signed by either the Homeowner or a 'Lead Contractor', if one has agreed to serve in that role (ie, general contractor).

|   |                      |
|---|----------------------|
| The undersigned certifies that all improvements indicated within this Certification of Completion Form has been completed professionally and thoroughly.  | [checkbox]           |
| The undersigned has attached invoices for all improvements.   | [checkbox]           |
| The undersigned certifies that the Homeowner has received owner's manuals and warranty certificates for all equipment and/or products that were installed.  | [checkbox]           |
| The undersigned certifies that any equipment that was replaced has been taken completely out of service and that proper waste disposal procedures in accordance with local, state, and federal regulations were followed. | [checkbox]           |
| <b>Authorized Signature:</b>  | _____                |
| <b>Name:</b>  |                      |
| <b>Date:</b>  |                      |
| If authorized signature above is the Prime (Lead/General) Contractor, provide the following:  |                      |
| <b>Company Name:</b>  |                      |
| <b>Email Address:</b>   | <b>Phone Number:</b> |