



Project Scope of Work Form

This form should be completed jointly between Homeowner and St. Louis County SAVES™ authorized contractor(s). **Do not begin any work until a Notice to Proceed has been emailed to the homeowner** . The Notice to Proceed will be issued once this form, the homeowner's loan, and general compliance issues have been reviewed and approved by the Program.

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. There is no need to submit Page 1.

Note: At the completion of work, a Certification of Completion will need to be submitted to release loan closing documents and issue payment to the contractors.

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 | phone/Fax 314-332-2156 | scope@StLouisCountySAVES.com

Required Attachments

As applicable, attach or separately submit the following:

- A separate digital photograph of the full street facing side of the home, named with homeowner's last name in JPG format (minimum 3"x5") (no faxed photos accepted)
- Map showing location of the home with minimum of one closest intersection shown (Google or Mapquest required)
- AHRI certificates for proposed HVAC equipment [(HVAC contractor from Section D, below, should provide this for you) Only required for HVAC Projects]

Section A: Homeowner Data

Last Name:		First Name:	
Email Address:		Phone Number:	
Project Street Address:			
City:		State:	
		Zip Code:	
Year House Constructed:		# People Living Here:	
Conditioned Square Feet:		Conditioned Basement?	[yes,no,n/a buttons]

Co-Homeowner Data

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

State Historic Preservation Office Review

<p>If project includes new windows, doors, roofing, solar, or other changes to the building exterior and is over 45 years old the following digital .jpg photos are required:</p> <p>Photo of house to the left of the client____Photo of house to the right of the client____</p> <p>Photo of house across the street_____</p> <p>Photo looking up the street____Photo looking down the street_____</p>	[checkbox]
<p>The homeowner understands that State Historic Preservation Office review and approval is required for all projects and must attach or separately submit a digital photograph of the full street facing side of the home, named with homeowner's last name in JPG format (minimum 3"x5") (no faxed photos accepted), and a map showing location of the home with minimum of one closest intersection shown (Google or Mapquest preferred).</p>	[checkbox]

Section B: Home Energy Assessment Data

Price (for Test-In/Out/CAZ and Blower Door): \$

Authorized Contractor: Representative:

Email Address: Phone Number:

Note: Homeowner and Assessment Provider must independently agree to price and payment terms prior to conducting assessment. This Scope of Work Form should be completed after completion of an assessment.

Test-In Data (prior to any improvements):

Date of Assessment must be no older than 12 months from date of this form in order to qualify.

Test Date: Ambient CO (ppm): Undiluted CO (ppm):

Blower Door (CFM50): Worst Case CAZ Depressurization (PA):

Ventilation Required (CFM50): CAZ Depressurization Limit (PA): [pull down]

Excess Air Leakage (CFM50): CAZ Depressurization (Pass/Fail): pass/fail

Duct Leakage (@25PA): Worst Case Spillage (Pass/Fail): pass/fail

Highest Press. Pan Reading (PA): Worst Case Draft (Pass/Fail): pass/fail

Assessment Recommendations:

Computer Modeling Program (if used):

<u>Recommended Improvement Description - Including Health and Safety Matters</u>	<u>Est. Fuel Savings (kWh/yr or Therms/yr)</u>	<u>Est. Cost Savings (\$/yr)</u>	<u>Est. Installation Costs (\$)</u>

Proposed Finance Summary - Home Energy Assessment

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

Certification of Accuracy: Contractor certifies the above data is accurate and real based on an assessment conducted in accordance with BPI standards. Savings estimates, if provided, are subject to weather, occupancy patterns and usage habits, and other variables beyond the control of the Assessment Provider and are not to be construed as guaranteed in any manner.

Authorized Signature:	
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Section C: Proposed Air/Duct Sealing and Insulation

Test-In Data must be provided in the Home Energy Assessment section above if air and/or duct sealing or insulation is selected as an improvement.

Authorized Contractor:		Representative:	
Email Address:		Phone Number:	
Sched./Est. Installation Date (allow 7 days for project and loan approval):			

<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:			

Overall Targeted Air Sealing Blower Door Results (CFM50):

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

Overall Targeted Duct Leakage (@25PA):

<u>Insulation Improvements</u>	<u>Exist. (R)</u>	<u>Prop. (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):		

Proposed Finance Summary - Insulation and Air/Duct Sealing

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

Section D: Proposed HVAC and Water Heating

For State Historic Preservation Office compliance reviews, proposed location of outside equipment must be described within 'Proposed Condition'

Authorized Contractor:

Representative:

Email Address:

Phone Number:

Sched./Est. Installation Date (allow 7 days for project and loan approval):

<u>Improvement</u>	<u>Description (Manufacturer, Model, Efficiency, Accessories)</u>		<u>Price</u>
	Existing Condition (incl. age):		
	Proposed Condition:		
	Existing Condition (incl. age):		
	Proposed Condition:		
	Existing Condition (incl. age):		
	Proposed Condition:		
	Existing Condition (incl. age):		
	Proposed Condition:		
Check here to indicate that Manual J load calculations have been performed for all HVAC replacements			[checkbox]

Check here to indicate that AHRI certificates for proposed HVAC equipment have been provided to homeowner (must be attached, or submitted separately, for approval of this Scope of Work Form)	[checkbox]				
Check here to indicate that exterior equipment will be in the same location as existing	[checkbox]				
<u>Duct Sealing</u>	<u>Description (material used and location)</u>	<u>Quantity (ft)</u>	<u>Price</u>		
Test-In Data must be provided in the Home Energy Assessment section above if duct sealing to existing ductwork is selected as an improvement.					
Duct Sealing:					
Duct Sealing:					
Overall Targeted Duct Leakage (@25PA):					
<u>Insulation Improvements</u>	<u>Exist. (R)</u>	<u>Prop. (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):					
Proposed Finance Summary - HVAC and Water Heating					
Sum of Proposed 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: Proposed Doors, Windows and Roofing

Please provide additional photos for homes over 45 years old

Note that for roofing scope, only the cost difference/premium between standard roof and ENERGY STAR roof is eligible for financing.

Authorized Contractor: **Representative:**

Email Address: **Phone Number:**

Sched./Est. Installation Date (allow 7 days for project and loan approval):

<u>Improvement</u>	<u>Description (Mfg, Model, Quantity, Size/Area, Performance)</u>	<u>Price</u>
	Existing Condition:	
	Proposed Condition:	
	Existing Condition:	
	Proposed Condition:	
	Existing Condition:	
	Proposed Condition:	

Proposed Finance Summary - Doors, Windows and Roofing

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

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

For improvements not explicitly allowed in the Eligible Improvements List, a rationale for the improvement (and/or exception request) must be described within 'Proposed Condition'

Authorized Contractor:		Representative:	
Email Address:		Phone Number:	
Sched./Est. Installation Date (allow 7 days for project and loan approval):			

<u>Improvement</u>		<u>Description</u>	<u>Price</u>
	Existing Condition:		
	Proposed Condition:		
	Existing Condition:		
	Proposed Condition:		
	Existing Condition:		
	Proposed Condition:		

Proposed Finance Summary - Health & Safety/Other Improvements

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

Section G: Proposed Total Project Finance Summary

Loan Amount to be Paid to Home Energy Assessment Contractor:	\$
Loan Amount to be Paid to Insulation and Air/Duct Sealing Contractor:	\$
Loan Amount to be Paid to HVAC and Water Heating Contractor:	\$
Loan Amount to be Paid to Doors, Windows and Roofing Contractor:	\$
Loan Amount to be Paid to Health & Safety/Solar/Other Improvements Contractor Listed in that Section:	\$
TOTAL LOAN AMOUNT (must be less than or equal to requested or approved amount in loan application):	\$
Desired Loan Term (3-10 years)	
Notes:	

Section H: Homeowner Certification

Homeowner has submitted a loan application through the online portal found under "Get Started" at www.StLouisCountySAVES.com and is aware of the time limit associated with it (90 days from date of approval) and will arrange to have all work completed and submit a Certification of Completion Form prior to that time.

[checkbox]

Date of Submission of Online Loan Application:

Homeowner hereby acknowledges and understands that **St. Louis County SAVES™** does not endorse any particular contractor, but maintains a directory of contractors that have applied and been authorized to participate in the program. While the contractors in the directory have met certain requirements for participation, Homeowner will be entering into a direct relationship with the contractor of their choice and it is important to review credentials, qualifications, and references to make an informed decision. Please also note that the Program does not warrant any of the work performed and that the Homeowner is responsible for working directly with the selected contractor(s) to ensure that all work is performed to the Homeowner's satisfaction.

[checkbox]

Indicate if the undersigned is a family member and/or employee of any of the contractors that will be providing work on your home (this is an allowable arrangement but must be disclosed for quality assurance purposes).

[yes/no]

Homeowner Signature:

Co-Homeowner Signature:

Date:

Section I: Utility Data Release

Utility Account Holders, by optionally signing below, are hereby authorizing the utility providers listed below to release billing history, utility consumption history, and other data associated with the listed account numbers. This data will be viewed by 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") for the purposes of technical and credit evaluation as pertaining to a potential loan being applied for by the listed Homeowner. By signing below, you are authorizing the Program to access data up to 2 years prior to the date on this form.

Further, if a loan is issued through **St. Louis County SAVES™** for energy efficiency upgrades on the property associated with the listed utility accounts, you are authorizing the Program to access the same data going forward for the full term of the loan. Accessing such data after a loan closes enables full circle feedback to the Assessment Provider, Installing Contractors, and Program Administrator to validate performance resultant of improvements financed through the Program.

Signature(s) of Authorized Utility Account Holders

Fuel Type #1:		Name on Account:	
Utility Provider:		Phone Number:	
Account Number:		Signature:	_____
Date:			
Fuel Type #2:		Name on Account:	
Utility Provider:		Phone Number:	
Account Number:		Signature:	_____
Date:			
Fuel Type #3:		Name on Account:	
Utility Provider:		Phone Number:	
Account Number:		Signature:	_____
Date:			

Section J: Program Certification

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

Initial

The undersigned certifies that all quotes prepared and represented on this Project Scope of Work Form have been submitted by **St. Louis County SAVES™** authorized contractor(s).

[checkbox]

The undersigned acknowledges, understands and commits to adhere to all Program guidelines set forth in the Contractor Guide and on the **St. Louis County SAVES™** website.

[checkbox]

The undersigned is aware of the time limit associated with the online loan application (30 days from date of loan approval) and will work with homeowner to arrange to have all work completed and help the homeowner submit a Certification of Completion Form prior to that time.

[checkbox]

Authorized Signature:

Name:

Date:

If authorized signature above is the Prime (Lead/General) Contractor, provide the following:

Company Name:

Email Address:

Phone Number: