

# Heat Pump Plan Work Completion Form

1. **Power Distributor:** \_\_\_\_\_

2. **Work ID Number:** \_\_\_\_\_ (Work ID Number is assigned by *energy right* Information System)

3. **Unit Installed Date:** \_\_\_\_\_ (mm/dd/yyyy)

4. **Number of Dwellings:** \_\_\_\_\_

5. **Legal 911 Address of Dwelling or Business:**

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*Street Address* *City, State, Zip Code*

6. **Structure Type:**       Single Family       Multi-Family       Business

7. **Type System Replaced:**     Electric Resistance       Fossil-Fuel       Heat Pump       New Load  
 Other \_\_\_\_\_

8. **Type of Heat Pump Installed:**     Advanced Refrigerants       Direct Exchange HP       Dual Fuel HP       Earth Coupled HP  
 Free Delivery HP       Ground Water Source HP       Packaged Terminal HP       Self Contained HP  
 Standard Air Source HP       Triple Function HP       Variable or Multi Speed       Window HP  
 Other \_\_\_\_\_

9. **Number of Dwellings or Businesses with:**

Split System Heat Pump, < 13 SEER: _____	Package System Heat Pump, < 13 SEER: _____
Split System Heat Pump, 13 to 13.99 SEER: _____	Package System Heat Pump, 13 to 13.99 SEER: _____
Split System Heat Pump, ≥ 14 SEER: _____	Package System Heat Pump, ≥ 14 SEER: _____
Split System Heat Pump, Advanced Units: _____	Package System Heat Pump, Advanced Units: _____

**Note:** Where a Dwelling or Business has more than one (heat pump) unit assigned to the load of a Dwelling or Business, the SEER rating is determined as either the efficiency of the primary system or a weighted-average efficiency of the units installed in the Dwelling or Business.

10. **Total Cooling Capacity Installed:** \_\_\_\_\_ (tons)

11. **Number of Dwellings or Businesses Inspected:** \_\_\_\_\_

12. **QCN Contractor:** \_\_\_\_\_

13. **Inspector Name:** \_\_\_\_\_

**For Distributor Records** (Complete the following where required by distributor):

1. **Customer Name:** \_\_\_\_\_

2. **Account (or Meter) Number:** \_\_\_\_\_

3. **Total Heating Capacity Installed:** \_\_\_\_\_ kbtu

4. **Heat Pump Brand 1:** \_\_\_\_\_ **Heat Pump Brand 2:** \_\_\_\_\_

5. **Average Heating Efficiency:** \_\_\_\_\_ HSPF or \_\_\_\_\_ COP

6. **Quality Validation Contractor:**     Yes       No

7. **Water Heater Type:** \_\_\_\_\_

8. **Security Filing Date:** \_\_\_\_\_ (mm/dd/yyyy)

9. **Other Measures:** \_\_\_\_\_

10. **Date Passed TVA Standards:** \_\_\_\_\_ (mm/dd/yyyy)

11. **Date Passed Local Standards:** \_\_\_\_\_ (mm/dd/yyyy)

12. **Incentive Paid:** \$ \_\_\_\_\_ **Retained MVP:** \$ \_\_\_\_\_

13. **Natural Gas Available?**     Yes       No

14. **Contractor Paid?**       Yes       No

15. **Comments:** \_\_\_\_\_

\_\_\_\_\_  
*Customer's Signature*

\_\_\_\_\_  
*Inspector's Signature*

\_\_\_\_\_  
*Date Completed*

Signatures may be collected on Contractor - Homeowner Affidavit