

VOUCHER APPLICATION - Phase 1

All fields below are required unless otherwise indicated. Submitting an incomplete application will delay the processing of your application.

APPLICANT INFORMATION

First and Last Name

Mailing Address

City

State

Zip Code

Device Address (If different from above)

City

State

Zip Code

County of Device (check one)

- San Joaquin
 Stanislaus
 Merced
 Madera
 Fresno
 Kings
 Tulare
 Kern (Valley portion)

Primary Phone (required)

E-mail Address (optional)

Check here if you prefer to have your voucher emailed

Applicant Status (check one)

- I am the homeowner/property owner purchasing for "Device Address" above.
 I am a tenant purchasing for "Device Address" above. **(Rental Property Owner & Tenant Approval form Required)**

Applicant Type (check one)

- Standard Application
 Low-Income Application **(Low-Income Eligibility Form Required)**

OLD DEVICE INFO

Old Device Type (check one) *Note: Older gas burning devices and electric heating devices are ineligible for this program*

Wood	Pellet	Other
<input type="checkbox"/> Certified insert	<input type="checkbox"/> Certified insert	<input type="checkbox"/> Open-hearth fireplace
<input type="checkbox"/> Non-certified insert	<input type="checkbox"/> Non-certified insert	<input type="checkbox"/> Wood-burning firebox
<input type="checkbox"/> Freestanding certified stove	<input type="checkbox"/> Freestanding certified stove	
<input type="checkbox"/> Freestanding non-certified stove	<input type="checkbox"/> Freestanding non-certified stove	

Does the house have access to piped natural gas? Yes No

Your house has access to piped natural gas if your gas services are provided by a utility company, and does not rely solely on gas that is purchased and stored in a propane tank.

PROJECT OPTIONS

CHECK ONE OPTION ONLY

- OPTION 1: Fireplace Replacement, I want to replace or modify my old device with the purchase and installation of a new device**

New Device Type (check only one based on whether the house has access to piped natural gas)

Options for Houses WITH Piped Natural Gas

- | | |
|---|--|
| <p>Gas</p> <p><input type="checkbox"/> Insert</p> <p><input type="checkbox"/> Freestanding stove</p> <p><input type="checkbox"/> Fireplace
<i>(Make and Model Required)</i>
Make: _____
Model: _____</p> | <p>Electric</p> <p>Heat Pump <i>(Select Type)</i></p> <p><input type="checkbox"/> Ducted-Packaged Unit</p> <p><input type="checkbox"/> Ducted-Split System</p> <p><input type="checkbox"/> Ductless</p> |
|---|--|

Options for Houses WITHOUT Piped Natural Gas

- | | |
|--|---|
| <p>Wood</p> <p><input type="checkbox"/> Certified insert</p> <p><input type="checkbox"/> Freestanding certified stove</p> <p>Gas</p> <p><input type="checkbox"/> Insert</p> <p><input type="checkbox"/> Freestanding stove</p> <p><input type="checkbox"/> Fireplace
<i>(Make and Model Required)</i>
Make: _____
Model: _____</p> | <p>Pellet</p> <p><input type="checkbox"/> Certified insert</p> <p><input type="checkbox"/> Freestanding certified stove</p> <p>Electric</p> <p>Heat Pump <i>(Select Type)</i></p> <p><input type="checkbox"/> Ducted-Packaged Unit</p> <p><input type="checkbox"/> Ducted-Split System</p> <p><input type="checkbox"/> Ductless</p> |
|--|---|

- OPTION 2: Fireplace Decommissioning, I want to permanently render my existing old wood-burning device inoperable without purchasing a new device (Must Submit a Fireplace Decommissioning Form as part of this application)**

RETAILER Applicants may visit any retailer participating in the Fireplace & Woodstove Change-out program and are not required to choose a retailer at the time of application. If you are working with a retailer, please provide their information below. The District may contact the retailer you listed below regarding your application.

Retailer Name

Sales Representative

PHOTOS Two pre-installation photos are required with this application.

Photo 1 - Must show the inside of the unmodified device/hearth, with all doors/screens open.

Photo 2 - Must be taken from floor to ceiling to show the old device/hearth with all original parts intact, and surrounding structures that will clearly distinguish the location of the fireplace in the room.

Photo Samples (DO NOT FAX)



Photo 1



Photo 2

If you intend to purchase an electric heat pump, or participate in the fireplace decommissioning option, additional photos will be required. See Voucher Guidelines for more information.

AGREE & CERTIFY By signing this application, I certify that I have read, understand and will adhere to the Fireplace & Woodstove Change-out Program Voucher Guidelines and agree to all the following:

- I understand that the installation of a new device must be conducted by the contracted Retailer, where new device was purchased, or a third-party contractor affiliated with that Retailer and under their direct supervision. Self-installation, installation by non-licensed contractor or a third-party contractor not affiliated with that Retailer is not eligible under this program.
- I understand that submission of this voucher application **does not guarantee** incentive funding for the new device.
- I understand that it is my responsibility to verify that the new device is eligible under the program guidelines. New wood or pellet devices must be on the current list of EPA Certified Wood Heaters and new gas fireplaces must meet ANSI z21.88/CSA2.33.
- I will be removing an operable old device or modifying an open hearth fireplace at the device address specified on this voucher application.
- If applicable, I agree to surrender my old device to a licensed recycling/dismantling facility or to the participating retailer to dispose of at a licensed recycling/dismantling facility within **90 days** of installation of the new device. If I undertake the responsibility of disposing my old device, I agree to submit a dated receipt and certification from the dismantler/recycler that my old device will be permanently destroyed.
- I understand that if I install the new device in a location other than what is identified in the pre-installation photos at the device address, I must first contact District staff to receive approval and I must still render the old device permanently inoperable. At the time of claim, where I will be seeking reimbursement for the completion of my project, I will be required to provide additional documentation, such as additional photos, to confirm that the location of the old device can no longer accommodate a wood-burning device.
- I understand that the selection of a Fireplace & Woodstove Change-out retailer is completely my choice and the District does not endorse, or is not in partnership with any Fireplace & Woodstove Change-out program retailers or installers and any such issues arising from the purchase or installation of the new device is between the applicant and the retailer or installer. The District will not be held liable for any circumstances or events that occur between the applicant and retailer or installer. Participating retailers are independent contractors; they are not officers, representatives, agents, servants, employees, partners, associates, etc. of the District.
- I understand that this is a reimbursement program and I will not be reimbursed until the new unit is paid in full, completely installed, and a complete Claim for Payment packet is submitted to the District. For low-income applicants who are eligible for the Instant Reduction option, please see page 2 of the Voucher Guidelines for payment processing.
- I have not made any non-refundable payments towards the purchase of the new device or disassembled my old device, and will not install the new device until I have received an approved voucher from the District.

Printed Name of Applicant

Applicant Signature

Date

- CHECKLIST - Phase 1**
- Please make sure you submit the following:
- Two Pre-installation photos (choose one)
 - Attached to App. Emailed Sent by Retailer
 - If applicable, Low-Income Documents
 - If applicable, Standard Tenant Documents
 - If applicable, required photos for electric heat pump project (see Voucher Guidelines)
 - If applicable, Fireplace Decommissioning Form

Submit your complete application packet via mail, email or fax at:

Mail San Joaquin Valley Air Pollution Control District
Attention: Fireplace & Woodstove Change-out Staff
1990 East Gettysburg Ave., Fresno, Ca 93726-0244

E-mail grants@valleyair.org
(Subject line must identify your name and device address)

Fax (559) 230-6112 (Faxed photos are not accepted)

Questions? (559) 230-5800