

# Installation Completion Certificate

Complete & sign upon completion of installation. Please submit the completed document to: [me2lenders@summitcreditunion.com](mailto:me2lenders@summitcreditunion.com)

## PARTICIPATING CONTRACTOR STATEMENT

The undersigned below hereby certifies that we installed the following items at the residence of

Homeowner: \_\_\_\_\_, located at

Street: \_\_\_\_\_

City: Milwaukee State: WI Zip: \_\_\_\_\_

Proposed (Check all that apply)	Completed (Check all that apply)	Improvement	Installation Date	Permit Number (if applicable)	Permit Status
<input type="checkbox"/>	<input type="checkbox"/>	ENERGY STAR Qualified Air Sealing (Energy assessment required)			
<input type="checkbox"/>	<input type="checkbox"/>	Attic Insulation			
<input type="checkbox"/>	<input type="checkbox"/>	Foundation Insulation			
<input type="checkbox"/>	<input type="checkbox"/>	Wall Insulation			
<input type="checkbox"/>	<input type="checkbox"/>	Duct Sealing & Insulation			
<input type="checkbox"/>	<input type="checkbox"/>	95% AFUE Single- or Multi-Stage Natural Gas			
<input type="checkbox"/>	<input type="checkbox"/>	96% AFUE Single- or Multi-Stage Natural Gas			
<input type="checkbox"/>	<input type="checkbox"/>	97%+ AFUE Multi-Stage Natural Gas			
<input type="checkbox"/>	<input type="checkbox"/>	15+ SEER Air Conditioner			
<input type="checkbox"/>	<input type="checkbox"/>	15+ SEER Air Source Heat Pump, 8.5+ HSPF (propane, oil, natural gas or electric furnace only, cannot be a mini-split or ductless system) <a href="#">*See Focus on Energy</a>			
<input type="checkbox"/>	<input type="checkbox"/>	ECM Replacement (must replace existing PSC Motor)			
<input type="checkbox"/>	<input type="checkbox"/>	95%+ AFUE Natural Gas Home Heating Boiler			
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Water Heater installed at the same time as a qualifying boiler			
<input type="checkbox"/>	<input type="checkbox"/>	95%+ AFUE Natural Gas Combination Boiler			
<input type="checkbox"/>	<input type="checkbox"/>	Smart Thermostat installed by a qualified HVAC contractor. For use with natural gas furnace, natural gas boiler or air source heat pump only.			
<input type="checkbox"/>	<input type="checkbox"/>	Single Package Vertical Unit, $\geq 90\%$ Thermal Efficiency, NG, $\geq 10.0$ EER Cooling			
<input type="checkbox"/>	<input type="checkbox"/>	Single Package Vertical Unit, $\geq 90\%$ Thermal Efficiency, NG			
<input type="checkbox"/>	<input type="checkbox"/>	Focus on Energy approved Packaged Terminal Heat Pump. Enter Efficiency Rating: _____			
<input type="checkbox"/>	<input type="checkbox"/>	ENERGY STAR® Certified Geothermal or Ground Source Heat Pump			
<input type="checkbox"/>	<input type="checkbox"/>	ENERGY STAR® rated windows (# of windows:); Attic insulation or Air Sealing required			

A. TOTAL PROJECT COST: \_\_\_\_\_

B. FOCUS ON ENERGY INCENTIVE: \_\_\_\_\_

C. Me<sup>2</sup> BONUS INCENTIVES: \_\_\_\_\_

D. OUT OF POCKET COST: (Paid by Customer) \_\_\_\_\_

E. REQUESTED SUMMIT LOAN AMOUNT (If applicable): \_\_\_\_\_

(\$15,000 max; subtract lines B & C from line A above)

I AM NOT APPLYING FOR A SUMMIT LOAN

# Installation Completion Certificate

Contractor Name: \_\_\_\_\_

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

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please confirm all of the following statements by checking the following boxes:

- I am a Me<sup>2</sup> Participating Contractor currently in good standing with the program.
- To the best of my knowledge, the proposed improvements (except for support measures) are eligible for Focus on Energy incentives as noted in Section 3 of the Project Detail Form and I will submit the incentive request to Focus on Energy within ten (10) business days of project completion. I will utilize the Instant Discount option so that the customer only pays the net project cost after incentives.
- I have pulled the required City of Milwaukee permits for the proposed improvements and will cure any deficiencies that do not pass permit inspection at no additional cost to the homeowner.
- I will cure any installation deficiencies identified by the Me<sup>2</sup> program staff or Focus on Energy program staff at no additional cost to the homeowner.
- I have properly disposed of or recycled all waste generated as a result of this project.
- I will provide the homeowner with a lien waiver upon payment by Summit Credit Union.
- I have provided the homeowner with all warranty information on the equipment I have installed and explained these warranties to them.
- It is my responsibility to submit this Completion Certificate to Summit Credit Union. I understand that I will be paid within two weeks by Summit Credit Union from the time I have completed this form for previously approved Me<sup>2</sup> homeowners.

To the best of my knowledge, the statements above are complete, true, and correct. I hereby certify that I am authorized to submit this Completion Certificate and affix my signature below.

Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## HOMEOWNER STATEMENT

The undersigned hereby certify personal ownership of the home specified above, that all materials and equipment included in the construction contract (work order, job order, bid summary, proposal, invoice, etc.) have been furnished and installed, that the work has been completed, and I am satisfied with the completed work. If using an ME<sup>2</sup> loan, I have been previously approved by Summit Credit Union for an Me<sup>2</sup> loan. I authorize Summit Credit Union to pay the above contractor for the above services and I will begin making loan payments according to the terms of my Summit Credit Union loan.

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_