



Standard Offer Program 2026 Field Data Collection Form

Multiple Measures

Residential
Hard-to-Reach

Date:

Project Sponsor:

Phone:

Customer Name &

Email Address:

Service Address:

ESI ID #:

Meter #:

Home Phone:

Cell Phone:

Building Type:	Single-Family	Mobile Home	Duplex	Multi-Family:	Upper	Lower	Middle
Number of Stories:	Sq. Ft. of Conditioned Space:			Gas appliances: Y N			
Number of Bedrooms:	Number of Occupants:						
Home Heating Type:	Gas/Propane	Electric Resistance	Heat Pump	Space Heating			
Home Cooling Type:	Central AC	Window Units:	Evaporative cooling				
Water Heating Type:	Electric	Gas	Heat Pump Water Heater				

Duct and air leakage testing should **not** be conducted in homes where either evidence of asbestos, mold and/or other potentially hazardous material is present or suspected due to the age of the home. Blower door depressurization tests are **prohibited** if there is risk of asbestos becoming airborne and being drawn into conditioned space.

Duct Sealing, Unit #1

Pre-retrofit CFM₂₅: Post-retrofit CFM₂₅:

System cooling capacity TONS:

Air handler location:

Floor Area:

Duct type:

Foundation Type:

of Return Registers:

Duct leakage areas treated:(Check all that apply)

Registers	Return	Plenum	Duct connections
-----------	--------	--------	------------------

Duct holes/tears Other:

Duct Sealing, Unit #2

Pre-retrofit CFM₂₅: Post-retrofit CFM₂₅:

System cooling capacity TONS:

Air handler location:

Floor Area:

Duct type:

Foundation Type:

of Return Registers:

Duct leakage areas treated:(Check all that apply)

Registers	Return	Plenum	Duct connections
-----------	--------	--------	------------------

Duct holes/tears Other:

Air Infiltration

Wind shielding: Well-shielded Normal Exposed

Air infiltration measures installed: (Check all that apply)

Number of Plumbing penetrations:

Kitchen	Bathroom #3
Bathroom #1	Utility Room
Bathroom #2	Other:

Pre-retrofit CFM₅₀: Post-retrofit CFM₅₀:

Door weatherstripping:

Exterior door(s). # of doors:	Attic access door
Furnace closet door	
Water heater door	

Caulking:

Windows. # of windows: Exterior door(s). # of doors:

Other areas. Describe:

Light switch/outlet gaskets. # of light switch gaskets: # of outlet gaskets:

Trim & Baseboards Other air sealing measures. Describe:

Ceiling Insulation

Project Sponsor affirms an insulation installation certificate was permanently affixed near the attic opening

Insulation Type :	None	Cellulose	Fiberglass	Mineral fiber	Rock wool batt	
Square feet of ceiling to be insulated (<i>above conditioned space</i>):	Insulation Condition :			Good	Fair	Poor
Existing R-value:	Existing insulation depth("):		Number of bags installed:			
Final R-value:	Final insulation depth ("):					

Wall Insulation

Wall cavity size: 2x4	2x6	Base insulation R-value:	Final R-value:
Net wall area (gross wall area less window and door area), sq.ft.:		Installed insulation type:	

Floor Insulation

Area above unconditioned space to be insulated, sq.ft.:

Home type: Site built Manufactured

<p>LEDs</p> <p>Total # of LEDs installed:</p> <p>Wattage of installed LEDs:</p> <p>Lumen output of installed LEDs:</p> <p>Wattage of replaced lamp:</p> <p>Rated lifetime of installed LEDs (hrs):</p> <p>Location(s) of installed LEDs:</p> <table border="0"> <tr> <td>Kitchen</td> <td>Dining Rm</td> </tr> <tr> <td>Bath #1</td> <td>Laundry Rm</td> </tr> <tr> <td>Bath #2</td> <td>Other</td> </tr> <tr> <td>Living Rm</td> <td>Bedroom #2</td> </tr> <tr> <td>Bedroom #1</td> <td>Bedroom #3</td> </tr> </table>	Kitchen	Dining Rm	Bath #1	Laundry Rm	Bath #2	Other	Living Rm	Bedroom #2	Bedroom #1	Bedroom #3	<p>Water Heating Measures (Electric Water Heating Only)</p> <p>Low-Flow Showerheads</p> <p># of showerheads: Flow rate (GPM):</p> <p>Water Heater Tank Insulation</p> <p># of water heaters treated: Water heater size (gal.):</p> <p>Insulation R-value:</p> <p>Faucet Aerators</p> <p># of aerators: Flow rate (GPM):</p> <p>Pipe Insulation</p> <p># of electric WH treated Insulation R-value:</p> <p>Wrapped length (ft.): 6 ft. max.</p> <p>Pipe diameter: 1/2" 3/4" 1"</p>
Kitchen	Dining Rm										
Bath #1	Laundry Rm										
Bath #2	Other										
Living Rm	Bedroom #2										
Bedroom #1	Bedroom #3										

ENERGY STAR® Windows		U-Factor:	Solar Heat Gain Coefficient:
Existing window type:	Single pane Double pane	Window orientation: (mark all that apply)	
Window area sq.ft:		N or NE	S or SW E or SE W or NW

ENERGY STAR® Air Purifiers	
Clean Air Delivery Rate (CADR in cu ft/min):	Quantity installed:

Advanced Power Strips (APS)					
System type:	Home entertainment	Home office	APS tier: 1	2	Quantity installed:
System type:	Home entertainment	Home office	APS tier: 1	2	Quantity installed:

Notes: (Please note any other relevant details that may assist with validating reported installations)