

NORTHERN SIERRA AIR QUALITY MANAGEMENT DISTRICTwww.myairdistrict.com**Program Coordinator: 530-832-0102 Ext. 1**

GREATER PORTOLA WOOD STOVE CHANGE-OUT PROGRAM

APPLICATION FOR ZONE 1 – Nonattainment Area

The Northern Sierra Air Quality Management District (District) is offering a change-out program to qualified homeowners within the Greater Portola PM2.5 Non-attainment Area in Plumas County, California for replacement of old, qualified wood/pellet heating devices with new, efficient, clean burning EPA certified devices. This program is funded by the U.S. EPA's 2015, 2018 and 2020 Targeted Air Shed Grant Program, the District's AB2766 program and other agencies. Funding will be available until October 31, 2026, or until funds run out.

1. Zone 1 funding will be available only to applicants within the City of Portola Sphere of Influence (see attached map).
2. To qualify, the applicant must have a currently installed and operating heating device:
 - a. A non-EPA certified wood/pellet stove (typically manufactured prior to 1992); OR
 - b. An EPA certified wood/pellet stove manufactured 20+ years ago with the emission control technology in disrepair, OR
 - c. An EPA certified wood/pellet stove manufactured 20+ years ago, in any condition, to be replaced with a pellet, propane or kerosene heating device, OR
 - d. An open fireplace being used as a primary heating device.
3. If the old device is removed from the home prior to application approval, the applicant will be disqualified from this program.
4. If the new device is purchased before application approval, the applicant will be disqualified from this program.
5. Installation must be completed by a District-approved Retailer/Contractor (Retailer). Self-installation of the new device is NOT eligible.
6. Program covers the replacement of qualified heating devices in manufactured/mobile homes but addition paperwork is required.
7. Program includes renters. An Owner/Tenant agreement must be signed by both parties.
8. If your residence is INSIDE the Portola City Sphere of Influence (Zone 1), then you may be eligible for:
 - Up to \$5,000 to replace a qualified wood heating device with an EPA certified wood burning device that means current New Source Performance Standards (NSPS).
 - Up to \$6,500 to replace a qualified wood/pellet heating device with an EPA certified pellet, propane or kerosene heating device.
 - Up to \$13,500 to replace a qualified wood/pellet heating device with an ENERGY STAR® compliant air source heat pump (electric).
9. Heating device brands/models will be determined by Retailer and approved by the District.
10. Upgrades over and above the approved amount will be paid by the applicant.



11. The old, qualified stove must be surrendered to the Retailer for destruction and scrap recycling. The resale or transfer of the old stove in usable condition, for the purpose of its reuse as a stove, is a violation of the terms of this program and will result in forfeiture of the grant award.
12. A photo will be taken by the Retailer before the old device is removed, a photo will be taken to document destruction and a photo will be taken of the new, certified device after installation.
13. To qualify, each applicant must first complete the attached application. Completed applications must be mailed to the Program Coordinator at the address on the application form. The application will be reviewed to determine if the preliminary qualification requirements have been met. Once pre-qualified, the applicant will contact an approved Retailer to schedule an in-home estimate.

NEXT STEP: Applicants will hear from the District within 21 days of receiving a submitted application. *Submission of an application does not guarantee funding.*

The mission of this program is to reduce health impacts by reducing fine particulate (PM2.5) in the air from wood smoke. These microscopic particles go deep into the lungs where they may become trapped. PM2.5 is linked with premature death, work and school absences, and significant health problems including aggravated asthma, acute respiratory symptoms (such as chest pain and coughing), chronic bronchitis and decreased lung function. Sensitive individuals (those most at risk from exposure to smoke) are the elderly, children, asthmatics, adults with pre-existing heart and lung disease, pregnant women, and people engaging in strenuous outdoor activity.



APPLICANT CERTIFICATION

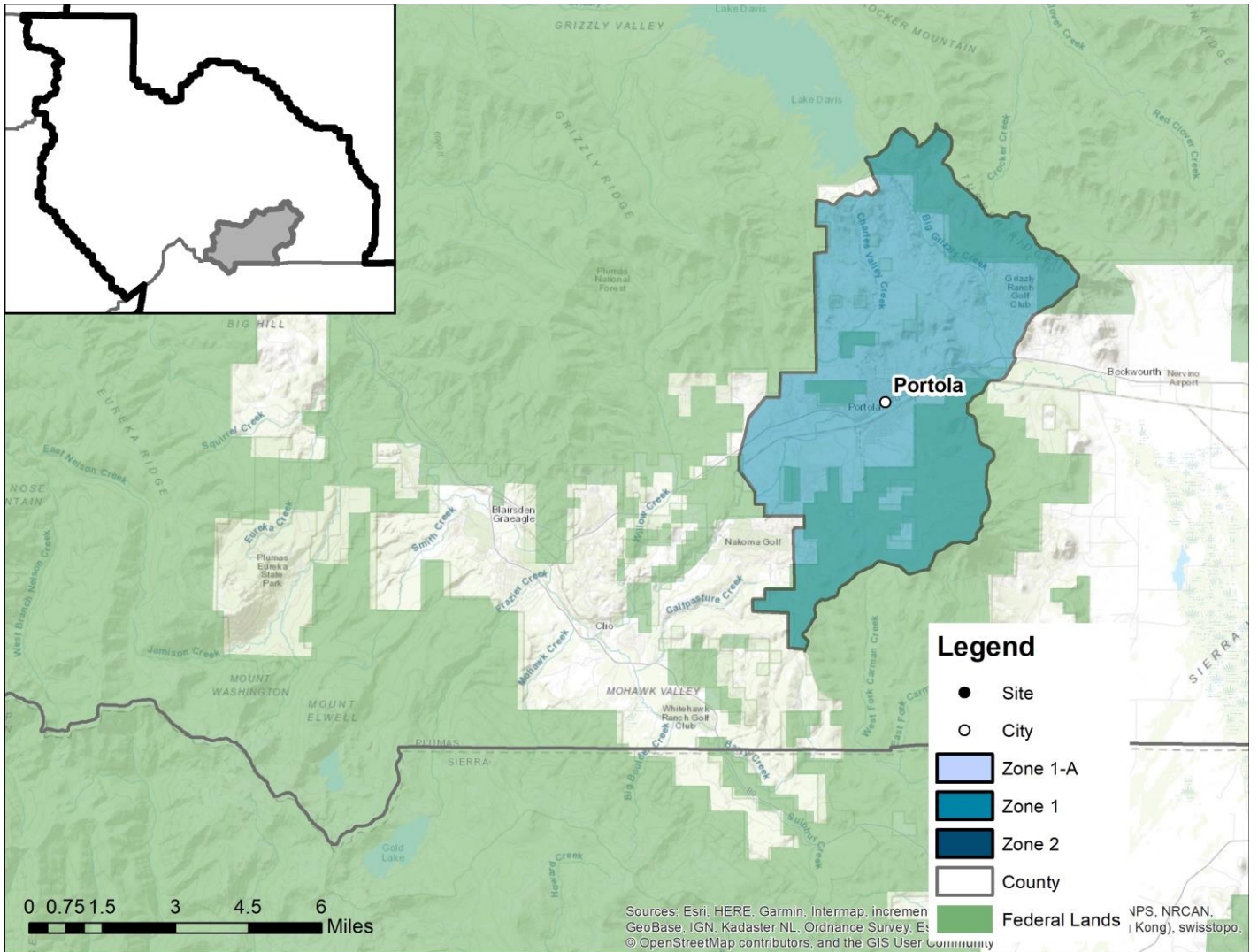
By submitting this application, I certify the following:

- a. I understand that only currently installed and operating qualified wood/pellet heating devices are eligible to be replaced under this program.
- b. No retroactive rebates are available.
- c. I understand I will schedule an estimate with a District-approved Retailer after receiving a letter of pre-qualification from the Northern Sierra Air Quality Management District (District).
- d. I understand that if I qualify, I will use only a District-approved Retailer (Retailer). Devices purchased with funds from this program will be professionally installed. Self-installation of the device is prohibited. Any additional construction or handyman services not done by the Retailer will not be covered under this program.
- e. I will be replacing an operable qualified wood heating device that is currently in use in my residence. The Retailer who installs the new device is responsible for removing the old device (or rendering a fireplace inoperable). The old device will be rendered permanently and irreversibly inoperable.
- f. I understand that I will be disqualified from this program if I provide the District with false information or if the old, qualified wood heating device is removed from the residence prior to application approval or if a new device is purchased prior to application approval.
- g. I understand the District does not warranty any devices purchased under this program, including, but not limited to, the quality, functionality or satisfaction of the device.
- h. I agree to hold harmless the District and its directors, employees and agents from any and all loss, damage, or liability that arises out of or is in any way connected with installation or use of the device purchased in connection with this program.
- i. I will follow proper burning practices as discussed by the Retailer and in accordance with EPA BurnWise educational materials. I will operate this device according to the manufacturer's instructions and I will not burn pressure treated wood, garbage/trash, plastic or any other prohibited materials.
- j. I understand that proper wood burning practices (e.g., burning only dry, natural wood that has been seasoned at least 6 months) and proper stove installation and operation (e.g., maintaining a hot fire) are critical to the effectiveness of my new device.
- k. I will only burn wood that is less than 20% moisture content. The District may provide moisture meter if I don't have one.
- l. I understand that annual cleaning and inspection by a professional chimney sweep is critical to maintaining a wood/pellet device.
- m. I understand that I will participate in follow up training and a survey conducted by the District.



MAP of Zone 1: Nonattainment Area

Please contact the air district for further assistance.



APPLICATION FORM For Zone 1 – Nonattainment Area

All sections of this application must be completed. A copy should be retained by the applicant for his or her records. The District is not responsible for materials lost by mail. Please review the Applicant Certification (page 3) before signing at the bottom. Submit the completed application by email, mail, or hand delivery to:

Mikki Brown, Program Coordinator, NSAQMD
mikkib@myairdistrict.com
P.O. Box 2227
257 E Sierra Ave. Unit E
Portola, CA 96122
530-832-0102 Ext. 1 (PHONE)
530-832-0101 (FAX)

Applicant Information:

Name: _____

Physical Home Address: _____

Mailing Address (if different): _____

Is this a mobile or manufactured home? Yes No

(If yes contact District for additional paperwork)

Phone Number: _____ Email (if available): _____

Existing Primary Wood Heating Device:

Wood Stove Pellet Fireplace

Make/Model: _____ Year Stove Manufactured: _____

My monthly income is: _____ (Optional)

The number of people living in the home (including adults and children under 18): _____ (Optional)

The EPA certified device I am interested in: Wood stove Pellet stove
 Propane stove Kerosene monitor Electric heat pump

The District strongly encourages upgrading to a non-wood heating device to further decrease emissions.

Additional Information:

How did you hear about the Change-out Program? _____

Why are you applying? (Please check all that apply.)

- Not satisfied with current device;
- To reduce pollution;
- To save money
- Other: _____

Was the grant funding a significant factor in replacing your stove? Yes No

How many wood burning stoves are on your property? 1 2 3

In a typical heating season, how many cords of wood do you typically burn? _____

Is your wood stove used as a primary source of heat? Yes No

What % of wood is used in your primary stove? 100% 75% 50%

In which room of your house is your wood stove located? _____

Do you own this home? Yes, Owner No, Renter

(If renter contact District for additional paperwork)



I understand and agree to all conditions of this program (pages 1-3): _____

(Applicant signature required) Date

Home Heating Survey

- 1. Status of home ownership: OWNER RENTER
- 2. Is your home a mobile/modular/manufactured home? YES NO
- 3. What year was this home built (approximately)? _____
- 4. What year did you purchase home or move into home? _____
- 5. Is this home your primary or secondary residence? PRIMARY SECONDARY
- 6. What is your monthly income? _____
- 7. How many people live in your household? _____
- 8. Does your residence have a :

- WOOD STOVE FIREPLACE PELLET STOVE FIREPLACE INSERT OUTDOOR WOOD BOILER

If your home has a second wood burning device, please indicate the type:

- WOOD STOVE FIREPLACE PELLET STOVE FIREPLACE INSERT OUTDOOR WOOD BOILER

- 9. If burning wood, where is it obtained? CUT BUY
- 10. If purchasing wood, what is the cost per cord? \$ _____
- 11. How many cords do you use annually? _____
- 12. What is the Secondary fuel you use for heating your home?
- WOOD PROPANE FUEL OIL ELECTRICITY SOLAR KEROSENE
- LPG GENERATOR DIESEL GENERATOR OTHER _____

- 13. If Zone 1 what is your primary source of heat:
- WOOD PROPANE FUEL OIL ELECTRICITY SOLAR KEROSENE
- LPG GENERATOR DIESEL GENERATOR OTHER _____

- 14. What is the secondary fuel you use for heating your home (if any)?
- WOOD PROPANE FUEL OIL ELECTRICITY SOLAR KEROSENE
- LPG GENERATOR DIESEL GENERATOR OTHER _____

- 15. If your residence has a heated outbuilding, what is the fuel used? (If no heated outbuilding, skip question)
- WOOD PROPANE FUEL OIL ELECTRICITY SOLAR KEROSENE
- LPG GENERATOR DIESEL GENERATOR OTHER _____

- Do you receive any assistance from an energy assistance program (i.e. LIHEAP)? YES NO
- Are there school-age children in the home (K-12)? YES NO
- Are there any individuals over the age of 62 in the home? YES NO
- Is anyone in the home diagnosed with asthma or any respiratory/breathing disorder? YES NO
- Have you upgraded windows or insulation since moving into the home? YES NO



Would you be willing to participate in a more in-depth survey by phone?

YES NO

Date Survey Completed: _____

