

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

GREATER PORTOLA WOOD STOVE CHANGE-OUT PROGRAM

**WOODSTOVE CHANGE-OUT PROGRAM**
APPLICATION FOR ZONE 1-A – Portola City Limits
FOR AN ELECTRIC HEAT PUMP

The Northern Sierra Air Quality Management District (District or NSAQMD) is offering a wood stove change-out program to qualified homeowners within the Greater Portola PM2.5 Non-attainment Area in Plumas County, California. This program is designed to replace old qualifying wood heating devices with new, efficient, clean burning EPA-compliant devices. Once an EPA-compliant woodstove is installed in the home, the resident may qualify for an additional heating device known as an electric heat pump. This pilot program is funded by the U.S. EPA's 2015, 2018 and 2020 Targeted Air Shed Grant Program, the District's AB2766 program, and funding from other agencies. Funding will be available until October 31, 2026, or until funds run out.

1. Zone 1-A funding will be available to applicants within the City of Portola who are affected by City Ordinance 359 that limits wood stove use during curtailment periods as declared by NSAQMD.
2. If you reside in Zone 1-A and you have an EPA-compliant woodstove you may be eligible for up to \$13,500 for an ENERGY STAR® compliant air source heat pump (electric).
3. Households in Zone 1-A are not required to remove the wood burning device if the following conditions are met: To qualify, the applicant must have a currently installed and operating heating device that is:
 - a. The U.S. EPA certified wood burning device was installed under the District's Woodstove change-out program or has been registered with NSAQMD.
4. If a heat pump is purchased prior to 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 a heat pump is NOT allowed.
6. The program will cover the placement of qualifying heat pump devices in manufactured/mobile homes at the discretion of the installer. Additional paperwork will be required.
7. The program includes renters. An Owner/Tenant agreement must be signed by both parties.
8. Heat pump brands/models will be determined by the Retailer and approved by the District.
9. Upgrades over and above the approved amount will be paid by the applicant.
10. The resident will agree to utilize the heat pump as their primary heat source to the best of their ability. NSAQMD Wood burning curtailment advisories will be advertised on the website and curtailment line (530-832-4067).
11. To qualify, each applicant must first complete the attached application. Completed applications must be submitted to the Project Coordinator at the address on the application. The application will be reviewed to determine if the preliminary qualification requirements have been met. Once the applicant has received verification that they have pre-qualified for the additional



electric heat pump, the applicant may contact an approved Retailer to schedule an in-home estimate.

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

The mission of this program is to reduce health impacts by reducing fine Particulate Matter (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

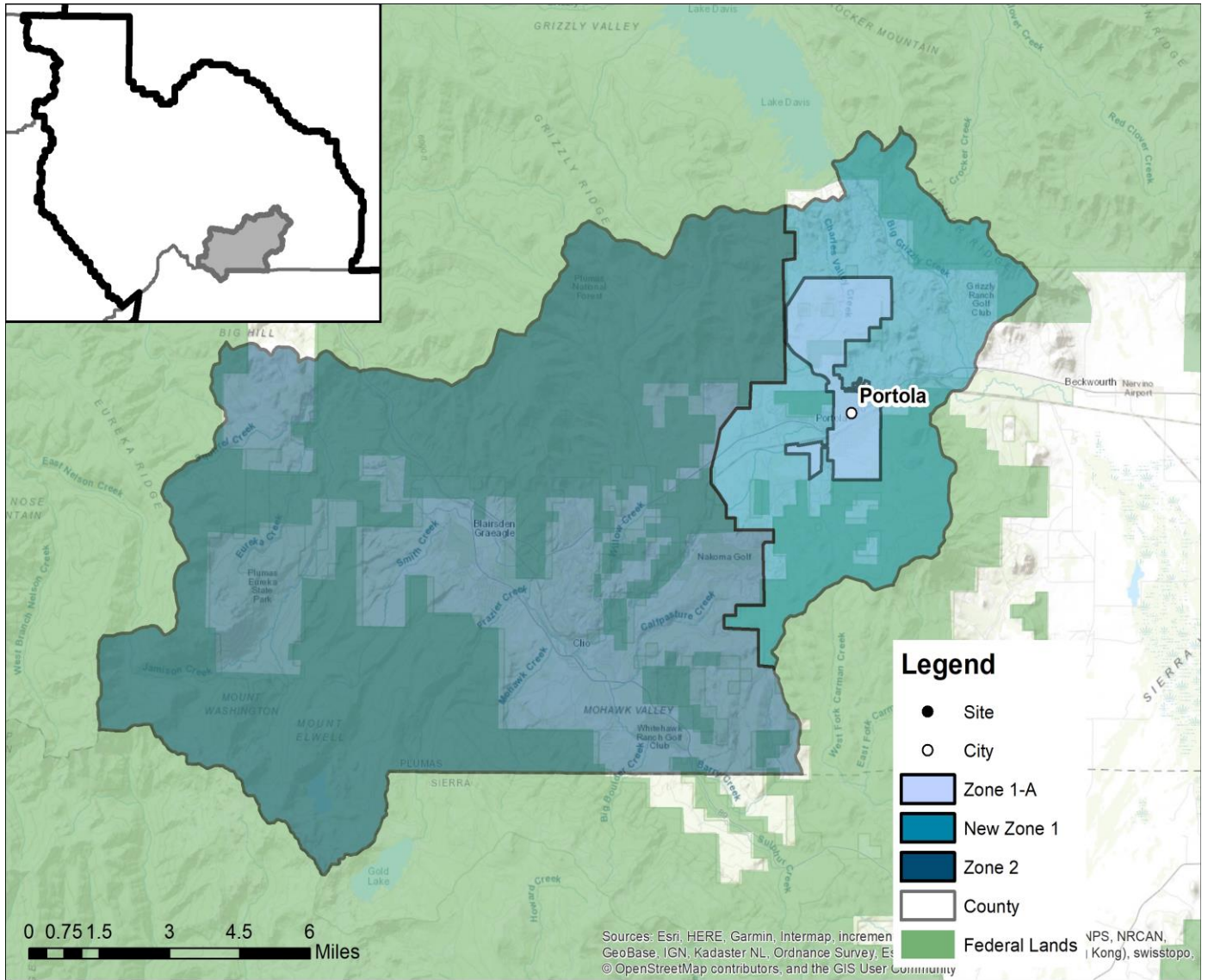
By submitting this application, I certify the following:

- a. I understand that an installed and qualifying EPA-compliant wood heating device is required in the home in order to be eligible to have a heat pump installed in the home.
- b. No retroactive rebates are available.
- c. I understand I will be responsible for scheduling an in-home estimate with a District-approved Retailer after receiving a letter of pre-qualification from the Northern Sierra Air Quality Management District (District or NSAQMD).
- d. I understand that if I qualify, I will use only a District-approved Retailer (Retailer). A heat pump purchased with funds from this program will be professionally installed. Self-installation of a heat pump is prohibited. Any additional construction or handyman services not done by the Retailer will not be covered under this program and will be my responsibility.
- e. Removal of wood heating devices is not required if the following conditions are met:
 - a. The heat pump installer Retailer who installs the heat pump verified that the wood burning device is EPA certified, was installed as part of the Woodstove Change-out Program or registered with the NSAQMD. If the wood heating device is damaged or not EPA-compliant then it must be removed or before moving forward with the electric heat pump installation.
- f. I understand that I will be disqualified from this program if I provide the District with false information or if a heat pump is purchased prior to application approval.
- g. I understand that the District does not warranty any heat pump 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 operate this device according to the manufacturer's instructions and
- 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 when using my back-up wood heating device.
- k. I understand that the electric heat pump will be my primary heat source to the best of my ability.
- l. I agree that I will participate in follow-up training and assessments conducted by the District.



MAP of Zone 1-A: Portola City Limits

Please contact the air district for further assistance.



WOODSTOVE CHANGE-OUT APPLICATION FORM FOR ZONE 1-A PORTOLA CITY LIMITS
RESIDENTS APPLYING FOR AN ELECTRIC HEAT PUMP

All sections of this application must be completed. A copy should be retained by the applicant for their 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, Project 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: _____

Is this a mobile or manufactured home? Yes No

Mailing Address (if different): _____

(If yes contact District for additional paperwork)

Phone Number: _____ Email (if available): _____

Existing Primary Wood Heating Device:

Wood Stove Wood Stove Insert Fireplace

Make/Model: _____ Year Stove Manufactured: _____

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

Additional Information:

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

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

- To reduce workload involved with firewood To reduce pollution.
- Difficulty acquiring seasoned wood Other: _____

Was the grant funding a significant factor in adding a heat pump as your primary heating device in lieu of your EPA certified wood stove? Yes No

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

Did you participate in the Wood Stove Change Out program with your current wood heating device?

If not, is your EPA-compliant wood heating device registered with the District? _____

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

In which room of your house is your primary 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): _____



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. How many rooms do you need to heat in your home? _____
- 7. What company supplies your home with electricity? _____
- 8. Does your residence have:

- AIR CONDITIONING CENTRAL HEATING PELLET STOVE PROPANE MONITOR KEROSENE MONITOR

If your home has an additional 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 approximate cost per cord? \$ _____
- 11. How many cords do you use annually? _____
- 12. Do you have a woodshed for storing dry, seasoned wood? _____
- 13. What is the secondary fuel you use for heating your home?
 WOOD PROPANE FUEL OIL ELECTRICITY SOLAR KEROSENE
 LPG GENERATOR DIESEL GENERATOR OTHER _____

- 14. 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: _____

