

WOODSMOKE REDUCTION PROGRAM

Voucher Application Form



Applicant Information:

Applicant (Property Owner) Name:

Address of Change Out Location:

Mailing Address (if different):

Primary Contact Number: _____ Alternate Number: _____

*Email: _____

** Email used for Wood Stove Change Out Program communication only. MBARD does not share your information.*

Existing Wood Burning Device:

Make / Model: _____ Year Manufactured / Age: _____

My old device is a (check one):

- Non-certified freestanding Wood stove
- Non-certified wood stove insert
- Open hearth fireplace

New device to be installed (check one):

- EPA certified wood stove / insert (NTE 2 g/hr)
- Natural gas Propane Electric

Incentive Level:

- Standard Incentive for EPA Certified Wood Stove/Insert: \$1,000
- Standard Incentive for Natural Gas, Propane or Electric: \$1,500
- Additional Incentive for Low Income Applicants**: \$2,000

***Income qualification must be verified by CCES. Annual income range varies on household number.
PLEASE CALL: [\(888\) 728-3637](tel:8887283637) for LIHEAP application.*

Additional Information:

1. How did you hear about the Program?

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

Not satisfied with current device

To reduce pollution

To save money

Other: _____

3. Was the incentive a significant factor in replacing your stove? Yes No

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

5. Is your current device used as a primary source of heat? Yes No

6. Have you received complaints from the use of your wood stove or fireplace due to smoke or odor? Yes No

APPLICANT CERTIFICATION:

I certify the following:

- a. I understand that only a currently installed and operating non-EPA certified wood burning device used as a primary source of heat is eligible to be replaced under this program.
- b. I understand that participants are limited to receiving one voucher per address.
- c. I understand that applications are processed in the order they are received. Vouchers will be distributed on a first-come, first-served basis. Funding is limited; vouchers are not guaranteed. The voucher will only be valid for 35 days from the date of its issuance. No retroactive vouchers are available. Voucher expiration date may be extended at the discretion of the District.
- d. I understand that applications may only be accepted for wood heating devices located in Monterey, Santa Cruz and San Benito counties of California.
- e. I understand that if I qualify, I will receive a current list of participating installers who will honor the voucher if it is submitted by the expiration date written on the voucher. Retailers may only work with specific installers.
- f. The installer who installs the new device is responsible for properly dismantling and disposing of the old device.
- g. If I choose to replace a device with funds from this program, I will make a commitment to purchase a qualified device only from a participating retailer within the 35 day period and forward the purchase agreement, with verification that my existing wood burning device is not EPA-certified, to the District.
- h. I understand that devices purchased with funds from this program will be professionally installed by a participating licensed installer who is contracted with the District and that there may be additional costs for installation including a permit from my city or county for installation. Installations must comply with all local fire and building codes. The installation must be coordinated and certified by the participating retailer and must be completed within ninety (90) days of redeeming the rebate voucher. Installation expiration date may be extended at the discretion of the District.
- i. I understand that the retailer will apply the voucher amount, as a discount, to the purchase price of the replacement device and I am responsible to pay the retailer the remaining cost of the new device.
- j. I understand that I will forfeit my voucher if I provide the District with false information or fail to obtain any required permit or if the required information is not submitted to the District prior to the expiration of the voucher.
- k. The District does not warranty any devices purchased under this voucher program, including, but not limited to, the quality or functionality of the device.
- l. I understand that proper wood burning practices (e.g., burning only dry, seasoned wood) and proper stove installation and operation (e.g., maintaining a hot fire) are critical to the effectiveness of my new device. I further agree to receive training on proper wood storage and

wood burning practices (if applicable) and device operation and maintenance from the participating retailer and/or installer.

- m. I understand that the District, CAPCOA, and the State of California may inspect all work and associated records with 30-day advanced notice.
- n. Applications will be treated in accordance with Public Records Act requirements. Certain information, subject to those requirements, may be publicly disclosed.

Applicant/Owner Name (Print): _____

Applicant/Owner Signature: _____

Date: _____

Submit your completed application with attachments to the District at:

Email at: woodstove@mbard.org

Fax: (831) 647-8501

Mail or hand-deliver to:

24580 Silver Cloud Court, Monterey, CA 93940

Questions: (831) 647-9411