Homeowner Application

All sections of this application must be completed by the homeowner. A copy should be retained by the homeowner for their records. The Idaho Department of Environmental Quality is not responsible for materials lost by mail. Fill out and review the entire application before signing. Submit the completed application to:

Emily Flores, Airshed Coordinator
Idaho Department of Environmental Quality
2110 Ironwood Drive
Coeur d'Alene, ID 83843

For questions about the application, contact
Emily.Flores@deq.idaho.gov.
(208) 666-4635

Homeowner Information

Homeowner's Name:

Physical Home Address:

City: **Zip Code:**

Mailing Address (if different):

Phone: **Email:**

Is this a mobile or manufactured home? ☐ Yes ☐ No

Do you own this property? ☐ Yes, Owner ☐ No, Tenant

(Tenants cannot apply directly for a stove replacement; all applications must be completed by the homeowner).

If you are the owner, do you rent out this property? ☐ Yes ☐ No

If yes, you must complete the Homeowner/Tenant Agreement specifying that you will be responsible for training and supervising your tenants in the proper operation of the replacement appliance. **Submit a signed Homeowner/Tenant Agreement with this application.**

Why are you applying? (Check all that apply.)

☐ Not satisfied with current device ☐ To save money
☐ To reduce pollution ☐ Other

Was the grant funding a significant factor in deciding to replace your stove? ☐ Yes ☐ No

Existing Residential Woodstove

Make: Model:

Year manufactured (if known):

How many woodstoves are on your property? ☐ 1 ☐ 2 ☐ 3 ☐ Other

If you have more than one woodstove at your property, are any used to heat outbuildings?

☐ Yes ☐ No How many?

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

What percent of wood burned in a typical season is currently used in the stove to be replaced?

☐ 100% ☐ 75% ☐ 50%

If burning wood, how is it obtained? ☐ Cut ☐ Purchased

If cut, how many months do you season your wood before burning?

Is your residential woodstove used as a primary source of heat? ☐ Yes ☐ No

What sources of fuel are available for heating your home? (Check all that apply).

☐ Woodstove or insert ☐ Gas stove or insert

☐ Pellet stove or insert ☐ Electric central heat

☐ Heat pump

DEQ strongly encourages upgrading to a nonwood burning heating device to further decease emissions.

Income Verification*

How many people are currently living in your household?

Mark the box that best represents your household's total annual income. (Include all income for all adults living in this home.)

☐ $0-29,160
☐ $29,161-39,440
☐ $39,441-49,720
☐ $49,721-60,000
☐ $60,001-70,280
☐ $70,281-80,560
☐ $80,561-90,840
☐ $90,841-101,120
☐ $101,121 and above

* The St. Maries PM Advance Program that funds this program assists economically distressed residents of St. Maries by replacing their existing woodstoves. While income level does not affect program eligibility, it is used to establish priorities for installation. Low-income verification through Community Action Partnerships is required for low-income priority to kick in.

Photo Documentation—Existing Wood-Heating Stove

Provide clear photos of the following:

1. Current EPA certification tag (if present)
2. Name plate (model) (if present)
3. Front view of woodstove or insert (installed in home)

Homeowner Certification

By submitting this application, you agree to the following certification statements:

- Only currently installed and operating eligible residential woodstoves will be replaced under this program.
- No retroactive rebates are available.
- Only one stove will be replaced with a qualified heating device with funding from this program for primary heating of my residence.
- If I qualify for the program, the new appliance must be professionally installed by a Participating Vendor. Self-installation of the device is prohibited.
- I will be replacing an operable stove that is currently in use in my residence. The Participating Vendor who installs the new qualified heating device is responsible for removing the old stove and documenting its disposal. The old stove will be rendered permanently and irreversibly inoperable. I may not keep the old stove and it may not be sold.
- I will be disqualified from this program if I provide false information, if the old stove is removed from the residence prior to Participating Vendor removal, or if a new heating device is purchased prior to DEQ review of the Participating Vendor's estimate.
- DEQ and our partners do not warranty any qualified heating devices purchased under this program, including, but not limited to, the quality, functionality, or satisfaction with the device. Any and all warranties are through the device manufacturer and Participating Vendor.
- I agree to hold harmless DEQ and its director, 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 installed under this program.
- I will follow proper burning practices as discussed by the Participating Vendor and in accordance with EPA BurnWise educational materials, and I will not burn pressure-treated wood, garbage/trash, plastic, or any other EPA-prohibited materials. I will operate this qualified heating device according to the manufacturer's instructions, and I understand that proper wood-burning practices (e.g., burning only dry, natural wood that has been seasoned at least 6 months or commercially designed firelogs approved for woodstove use) and proper stove installation and operation (e.g., maintaining a hot fire) are critical to the effectiveness of my new device.
- If I rent this property to others, I will be required to enter into a Homeowner/Tenant agreement holding me responsible for training and supervising the tenant on proper appliance operation and for all maintenance of the new device.
- I agree to not sell or replace the new EPA-approved device with a noncertified wood or other solid fuel device during the expected lifetime of the new EPA-approved device.

I certify the statements and information in this Homeowner Application are true, accurate, and complete (IDAPA 58.01.01.123).

Homeowner Signature (required)

Date