energy right® Program

Water Heater Plan Work Completion Form

1.	Power Distributor:				
2.	Work ID Number:	(Work ID Numb	(Work ID Number is assigned by energy right Information System)		
3.	Inspection Open Date:	(mm/dd/yyyy)			
4.	Legal 911 Address of Property:				
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	Street Address		City, State, Zip Code		
5.	Structure: Single Family Multi-Family	Business			
6.	Number of Dwellings/Businesses at this Address:				
7.	Type System Replaced: Electric Resistance	Fossil-Fuel	New Load Other		
8.	Enter Number of Water Heaters Invoiced For: Standard Water Heaters Advanced Water Heaters Water Heaters for DLC Switch				
9.	Total Storage Capacity: (gallons)				

For Distributor Records (Complete the following where required by distributor):

1.	Date Passed TVA Requirements:		(mm/dd/yyyy)	
2.	Subdivision or Customer Name:			-
3.	Account (or Meter) Number:			
4.	Total Heating Capacity:	(kW)		
5.	Water Heater Brand 1:		Water He	ater Brand 2:
6.	Retailer Name:			_
7.	Lifetime Warranty: Yes	No		
8.	Average Energy Factor Rating:			_
9.	Installed by:			<u>.</u>
10.	Inspector:			<u>.</u>
11.	Date Passed Local Standards:			
12.	Incentive Paid: \$	Retained MVP:	\$	
13.	Natural Gas Available? Yes	No		
14.	Contractor Paid?	No		
15.	Comments:			