energy right® Program

Manufactured Homes (Residential) Work Completion Form

OMB No. 3316-0019 Expires: 3/31/2007

1.	TVA Distributor ID Number:
	TVA Distributor's Name:
2.	Work ID Number:
3.	Date:
	(mm/dd/yyyy)
4.	VHPC ID Number (or Name)
5.	Customer's Name:
	Telephone Number: ()
6.	Customer's Address:
	Street Address
	City, State, Zip Code
7.	Structure: Single Section
	Multi-Section
8.	Dealer's Name:
	Dealer Number:
9.	Dealer's Address:
	Street Address
	City, State, Zip Code
LO.	Total Cooling Capacity: (tons)
L1.	HP Indoor Coil Model Number:
L2.	HP Outdoor Unit Model Number:
L3.	Total Square Footage of Home:
L4.	Heat Pump Brand: