### **Woodsmoke Reduction Program VOUCHER APPLICATION PACKET**



### **Tuolumne County Air Pollution Control District**

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### **IMPORTANT CHECKLIST**

You	must provide the following in order for your application to be accepted:
	Photographs (front, right, left, rear) of your old wood-burning device including UL tag— the one being replaced (currently installed in the home and operational)
	Complete all entries on application
	Sign application
	Return application to the Air Pollution Control District
	To qualify for an Enhanced Voucher, choose one
	(backup documentation required):
	Project is located in a <u>Low Income or Disadvantaged Community</u> <sup>1</sup> Applicant participates in a Low-Income program (WIC, CARE, LIHEAP) Other Low Income Household Verification
	Additional form required if the wood-burning device is located within a rental home:  Owner / Tenant Agreement

<sup>1</sup> https://webmaps.arb.ca.gov/PriorityPopulations/

## WOODSMOKE REDUCTION PROGRAM VOUCHER APPLICATION FORM



#### **HOW THE VOUCHER PROGRAM WORKS**

- 1. The Tuolumne County Air Pollution Control District is offering vouchers to replace non-EPA certified wood stoves, fireplace inserts, or open-hearth fireplaces **used as a primary source of heat** with new, cleaner burning devices. The new device may be an EPA certified woodstove or insert, pellet stove, a natural gas or propane heating device, or an electric heating device.
  - Applications for rebate vouchers will be accepted until project dollars are depleted. **Please include a photo of the currently installed older stove, fireplace insert, or fireplace.** The completed applications must be signed by the homeowner (and tenant if applicable) and submitted to the District.
- 2. The Standard Voucher is valued at \$1,000. Please be aware that the Standard Voucher amount will not cover the entire cost of the new EPA certified device, installation, required permits and any code upgrades that may be required.
- 3. The Enhanced Voucher is valued at up to \$3,500. Applicants are eligible for an Enhanced Voucher if the project is in a Low Income or Disadvantaged Community<sup>1</sup>, if the applicant participates in a Low Income program (WIC, CARE, LIHEAP), or if the household qualifies as low-income. The applicant can bring supporting documents for District review when submitting the application.
- 4. The program is available to both primary homeowners and full-time tenants. In the case of rental properties, formal approval from the property owner will be required as part of the Application
- 5. The applicant may redeem the voucher from participating retailers only. The voucher must be redeemed within four (4) weeks from the date of issuance. The voucher expiration date may be extended at the discretion of the District. Standard Vouchers will be applied as an instant rebate off the total price of the stove. The applicant will schedule an in-home estimate with a participating retailer. The retailer will verify the stove's eligibility and present an estimate to the Applicant. No retroactive rebates are allowed.
- 6. New devices must be professionally installed by a licensed installer in accordance with local fire and building codes. A building permit must be obtained prior to installation of the new device if required by the City of Sonora (209.532.3508) or Tuolumne County Building Department (209.533.5633). No do-it-yourself installations are allowed under this program. Installations must occur within ninety (90) days of voucher redemption. The installation expiration date may be extended at the discretion of the District.
- 7. Older stoves that were replaced through the program must be permanently removed from service and surrendered to the participating retailer, who will render them inoperable and coordinate their disposal and recycling. The participating retailer will take a photo of the older stove prior to removing it and upon its destruction and will also take a photo of the replacement stove after it is installed.
- 8. Participating retailers and/or their licensed installers will provide training on proper wood storage and wood burning practices (if applicable) and device operation and maintenance.
- 9. This voucher program was supported by the California Climate Investments (CCI) Program. This voucher program is subject to state requirements and agreements with the California Air Resources Board (CARB) and the California Air Pollution Control Officer's Association (CAPCOA).

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<sup>&</sup>lt;sup>1</sup> https://webmaps.arb.ca.gov/PriorityPopulations/

#### **HOW TO APPLY**

All sections of the Voucher Application Form (pages 3 and 4) must be completed. A copy should be retained by the Applicant for their records. The voucher program is not responsible for materials lost by mail. Please review the program terms prior to signing below. Submit your completed application with attachments by email, mail, or hand delivery (see below).

Air District	Mailing Address	City, ZIP	Physical Address	Email
Tuolumne County APCD	2 South Green St.	Sonora,	22365 S. Airport, Sonora	AirPollution@tuolumnecounty.ca.gov
(M-F 8am -1pm)		95370		
Participating Retailer	Address	City, ZIP	Phone #	
Foothill Fireplace	18677 Eagle	Sonora,	(209) 533-5005	Ccs1services@gmail.com
Pool & Spa	Ridge Road	95370		
Winters Stove Works	14235 Tuolumne	Sonora,	(209) 532-5700	info@wintersstoveworks.com
	Road	95370		
Hibernations Stove & Spa	2641 CA-4	Arnold,	(209) 795-4339	info@hibernation.com
		95223		
Ambrosia's Chimney	No Physical		(209)532-4883	ambrosiaschimneysweep@gmail.com
Sweep	Address			

Voucher Application Page 3	For District Use Only:  Census Tract #:  Voucher #:
VOUCHER APPLICATION FOR	
Applicant Information:	Community / Disadvantage Community  Verification Method:
Name:	
Physical Home Address:	
Primary Residence	ong-term Rental Other
Mailing Address (if different):	·
Phone Number:	Email (if available):
Existing Wood Burning Device:	
Make/Model:	Year Manufactured/Age:
☐ I have included a photograph of my old	device to be replaced
My old device is a (check one):  ** Open hearth fireplaces rear	<ul> <li>□ Non-certified freestanding woodstove</li> <li>□ Non-certified woodstove insert</li> <li>□ Open hearth fireplace**</li> </ul> uire additional documentation. Please contact the District.
New device to be installed (check one):	
<ul><li>☐ Located in a Low Income or Disa</li><li>☐ Proof of participation in a federal</li></ul>	cate qualification below – backup documentation required) advantaged Community (see link to map on page 1) or state income assistance program (WIC, CARE, LIHEAP) 350 annually (Low 80% Income Limit) per the <a href="https://example.com/HUD FY 2023"><u>HUD FY 2023</u></a> <a href="https://example.com/ystem"><u>ystem</u></a> for Tuolumne County.
Additional Information:  1. How did you hear about the Program	n?
<ul> <li>Why are you applying? (Please checons)</li> <li>□ Not satisfied with current device</li> <li>□ To reduce pollution</li> <li>□ To save money</li> <li>□ Other:</li> </ul>	ck all that apply.)
4. In a typical heating season, how ma	n replacing your stove?   Yes   No  ny cords of wood do you typically burn?
5. Is your current device used as a <b>PR</b>	<b>IMARY</b> source of heat (>50% winter use)? $\Box$ Yes $\Box$ No

#### **VOUCHER APPLICATION FORM (continued)**

#### **APPLICANT CERTIFICATION:**

I certify the following:

- a. I understand that only a currently installed and operating non-EPA certified wood burning devices 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 rebate voucher per address.
- c. I understand that applications are processed in the order they are received. Rebates will be distributed on a first-come, first-served basis. Funding is limited; rebates are not guaranteed. The voucher will only be valid for four (4) weeks from the date of its issuance. No retroactive rebates are available. Voucher expiration date may be extended at the discretion of the District.
- d. I understand that applications may only be accepted for devices located in Tuolumne County by full time residents.
- e. I understand that if I qualify, I will receive a voucher and a current list of participating retailers who will honor the voucher if it is submitted by the expiration date written on the voucher.
- f. The participating retailer 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 device from a participating retailer within the four (4) week period and authorize the retailer to forward to the District a notification of the purchase agreement, with verification that my existing wood burning device is not EPA-certified.
- h. I understand that devices purchased with funds from this program will be professionally installed by a licensed installer and that there may be additional costs for installation including a permit from my community 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 voucher. Installation expiration date may be extended at the discretion of the District.
- i. I understand that I am responsible to pay the retailer for the purchase price of my new device, less the voucher amount.
- 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 date listed on 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.
- 1. 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 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:			

# **Woodsmoke Reduction Program VOUCHER**



Voucher Type: ☐ Standard Voucher (\$1,000) ☐ Enhanced Voucher (not to exceed \$3,500 unless amended by District							
	For District Use Only						
	Voucher #		Date Issu				
	Amount		Expirati	on Date*			
Cus	tomer Name						
					/ /		
Cus	tomer Signat	ture			Date		
*Vo	oucher must b	be redeemed within ten	(10) week	s of date of	fissue.		
Coı	npleted by th	ne retailer and returned to	o Tuolum	ne County	Air Pollution Control District		
Reta	iler Name:			Phone Number:			
Cust	tomer Name:			Phone Number:			
Customer Address:					3		
City	, State, Zip:			etheliumitergenin hali oʻz yayat ist sanyat ya tayban ist yayat oʻz sanyat oʻz			
Date	e of Sale:						
Reta Sign	ailer ature:			Date:			
Existing Device Information (Make, Model, Serial Number, and type such as uncertified wood stove or insert)							
Manufacture Date of Device Replaced (year)							
					For District Use Only		

#### **Voucher Disclaimer**

- The value of the Standard Voucher is \$1,000 or up to \$3,500 (unless amended by District) for the Enhanced Voucher to cover eligible project costs.
- Eligible project costs include the cost of the new device including sales tax, installation including any parts, materials, permits, or labor required for the safe and legal installation of the device, and disposal of the old stove or insert.
- This Voucher is valid for the following:
  - Replacement of a non-certified wood stove/insert or open hearth fireplace used as a primary source of heat with an EPA certified wood stove/insert, natural gas or propane stove/insert, or electric stove/insert.
- The primary residence must be located within Tuolumne County.
- This Voucher cannot be redeemed by the applicant for cash. It only can be used in conjunction with the purchase of a new qualified device from a *Participating Retailer*. A Voucher given to a non-participating retailer shall not be accepted and the Voucher amount will not be honored by Tuolumne County.
- The Voucher is not valid until signed by the customer.
- This Voucher must be given to the *Participating Retailer* at the time of purchase of the new appliance. If you do not provide the original voucher to the Participating Retailer at the time of purchase, the Participating Retailer will not be obligated to give you the discount at the time of purchase or at a later time.
- Funding for the Voucher is first come, first served. The voucher will only be valid for four weeks from date of issuance.
- The device must be installed by a licensed Installer, **not** the Home Owner.
- This Voucher will be forfeited if false information is provided to the District or if the required information is not submitted to the Tuolumne County Air Pollution Control District prior to the expiration date listed on the Voucher.
- This voucher program is supported by the California Climate Investments (CCI) Program.

Air District	Mailing Address	City, ZIP	Physical Address	Email
Tuolumne County APCD	2 South Green St.	Sonora, 95370	22365 S. Airport, Sonora	AirPollution@tuolumnecounty.ca.gov
(M-F 8am -1pm)	50.	, , , , ,		
Participating Retailer	Address	City, ZIP	Phone #	
Foothill Fireplace Pool & Spa	18677 Eagle Ridge Road	Sonora, 95370	(209) 533-5005	Ccs1services@gmail.com
Winters Stove Works	14235 Tuolumne Road	Sonora, 95370	(209) 532-5700	info@wintersstoveworks.com
Hibernations Stove & Spa	2641 CA-4	Arnold, 95223	(209) 795-4339	info@hibernation.com
Ambrosia's Chimney Sweep	No Physical Address		(209)532-4883	ambrosiaschimneysweep@gmail.com

## **Woodsmoke Reduction Program RETAILER PACKET**

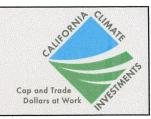


# **Woodsmoke Reduction Program Retailer Packet**

Tuolumne County Air Pollution Control District Staff contact: <u>AirPollution@tuolumnecounty.ca.gov</u> (209) 533-5693

#### **IMPORTANT CHECKLIST**

# WOODSMOKE REDUCTION PROGRAM VOUCHER TRACKING FORM



This form is to be completed by participating retailers and sent to:

Tuolumne County Air Pollution Control District

Date:	Voucher #:		Building Permit	#:	
Customer's Name:					
New Device					
Manufacturer:			Emissions	Rate (g/h):_	
	□Wood (catalytic)				
	□Natural Gas			□Pellet	
Retailer Name:			Phone		
					_
	S				_
		,			
<b>Installation</b>					
	Installer:		License #:		
	eted:				
	rtified Wood Stove				
	d / Approximate Age (ye				
Please initial the fo	ollowing statements:				
I certify that the old	d device was <b>not</b> EPA-c	ertified			_Yes □
I certify that the ol	d device was in working	g condition pr	rior to replacement	t:	_Yes □
I certify that the in	stalled device was new	and EPA-cer	tified (if wood):		_Yes □
I certify that the ap	plicant received training	g on proper w	wood storage and w	vood burning	g practices
(if applicable) and	device operation and m	aintenance.			Yes □

#### **Recycling (for Replacement Projects):** Residence where stove was removed from: Owner: Address: Name of person delivering old stove to recycler: Please initial the following statements: I certify that the old wood stove has been removed from the residence: Yes 🗆 I certify that the old wood stove's doors have been removed and hinges destroyed prior to the Yes □ stove's release to a recycling facility: I certify that the old wood stove has been released to a recycling facility and that the stove is to be destroyed (recycler to sign Recycler Certification Form): Yes 🗆 \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* I certify that the information contained on this tracking form is accurate and the form is completely filled out. I also agree that I must meet the program requirements and be a participating retailer in order to receive reimbursement from the Tuolumne County Air Pollution Control District, in Sonora, California. This form must be submitted with ALL sections completed along with the completed voucher, a copy of the in-home estimate and final invoice, recycler certification form, acknowledgement of training form, building permit, and photograph of stove prior to removing it AND of newly installed hearth appliance in order to receive reimbursement. Name of Participating Retailer Representative: Signature: \_\_\_\_\_ Date: \_\_\_\_ To assure quick processing, please make sure you send all items listed. **Checklist:** Mail or drop off original documents to: Voucher signed and enclosed Tuolumne County Air Pollution Control District ☐ Pre and post installation photos Physical Location: 22365 S Airport Rd, Sonora Copy of in-home estimate Mailing Address: 2 S Green St, Sonora CA 95370 Copy of final invoice Recycler Certification Form Acknowledgement of training form Your signature (on this form) **Building Permit**

# WOODSMOKE REDUCTION PROGRAM RECYCLER CERTIFICATION FORM



Name of Homeowner or Voucher Number					
For Completion by Recycler:					
Date:					
Make and Model # of Stove delivered for recycling:					
I certify that this stove was delivered to:					
Name of Recycler					
and will be destroyed, rendered usable only as scrap, as	nd recycled.				
Printed Name:					

### WOODSMOKE REDUCTION PROGRAM ACKNOWLEDGEMENT OF TRAINING



The Program requires an educational component to ensure that the new home heating devices, particularly wood stoves, are properly operated and maintained to maximize energy efficiency and achieve the lowest possible emission rates. With proper burning techniques and properly seasoned wood, the amount of wood used could be significantly reduced. While a new wood stove typically pollutes less than an old one, user operation is important for achieving emission reductions. Districts are required to obtain verification of training.

Homeowner's or Tenant's Name:	
Address where new device was installed:	,
************	
I certify that I received the owner's manual for my new device (please initial):	Yes
I certify that I received training from the Retailer/Installer on the operation of my new d	evice per
manufacturer instructions (please initial):	Yes
I certify that I received training from the Retailer/Installer on proper wood storage and v	vood
burning practices (if applicable, please initial):	_Yes
Signature(Homeowner/Tenant):Date:	
Print Name:	
Title (Homeowner/Tenant):	

### WOODSMOKE REDUCTION PROGRAM OWNER/TENANT AGREEMENT



Parties: This Owner/Tenant A	greement (Agreement) is for serv	ices between
Current Tenant		
	and the	
Owner		
concerning	the real property located at	
Address	City State	zip Code

**Grant Award:** The subject matter of this Agreement is the Woodsmoke Reduction Program. This voucher is available to Owner/Tenants for the replacement of a non-EPA certified wood burning device that is currently in operation and used as a primary source of heat with an EPA certified wood stove, woodstove insert, gas heating device, or electric heating device. The Tuolumne County Air Pollution Control District ("District") administers the Woodsmoke Reduction Program within the County of Tuolumne.

Whereas Owner and Tenant recognize the need for replacing a non-EPA certified wood burning devices with an EPA certified device to provide more efficient heating and less emissions into the home and the community.

Whereas Owner and Tenant desire to participate in the Woodsmoke Reduction Program using funds from the California Climate Investments.

Now, therefore, Owner and Tenant agree as follows:

- 1. To allow District-approved Participating Retailers and their licensed Installers into the Property noted above for inspection, estimate, installation and permitting. This includes allowing photos to be taken of the old, non-EPA certified device before removal and photos of the new EPA certified device after installation.
- 2. Either Owner or Tenant may complete an application for the Woodsmoke Reduction Program. Both parties must review the application and agree to the items on page 3 "Applicant Certification." Submission of an application does not guarantee funding.
- 3. Upon installation, the new EPA certified device becomes the property of the Owner.

4. The Tenant agrees to receive training on proper wood storage and wood burning practices (if applicable) and device operation and maintenance from the Participating Retailer or licensed Installer.

I hereby certify that I understand the conditions and requirements for participation in the District's Woodsmoke Reduction Program and agree to fulfill the requirements and comply with the conditions in this Agreement. I understand that if any documents are incomplete or falsified, I will be disqualified from the Program.

I hereby fully waive, release and discharge the District, its elected and appointed officials, officers, employees, agents and volunteers for any and all claims and damages for personal injury, disability, death or property damage or losses suffered as a result of my participation in the District's Woodsmoke Reduction Program. This release of liability shall be effective and binding upon myself and my heirs, next of kin, family, relatives, guardians, conservators, executors, administrators, trustees and assigns.

The undersigned represent that they have the authority of their respective parties to execute this Agreement.

Signature Tenant:		Da	ate:	
	Printed Name/Title			•
Signature Owner:			Date:	
	Printed Name/Title			-
Owner's Mailing Ad	dress:			
Address		City	State	Zip Code