



Richard Schaffer, Supervisor

Dear Fellow Babylon Resident:

We are delighted by your interest in the Town of Babylon's *Long Island Green Homes Program* ("LIGH"). To get started with the program, please complete the following THREE EASY STEPS:

**STEP 1:** Please complete the enclosed **Green Homes Self-Check Home Inventory form**, or visit our website at: [www.ligreenhomes.com](http://www.ligreenhomes.com) to submit the form online. The information you provide gives the Energy Auditor important data on the conditions of your home prior to the in-home energy audit. **Please submit the form to the LIGH Office via fax, mail, or e-mail.**

**STEP 2:** Please send your **2 most recent years of monthly usage data for electricity** (LIPA) and **heating**. If you do not have these records, you can request your usage information from your utility providers.

- For your *electrical* usage data, you can visit LIPA's website: [www.lipower.org](http://www.lipower.org) For a step-by-step guide you can visit the LIGH homepage, or request help from a LIPA customer service representative: (800) 490-0025
- For your *natural gas* usage data, visit National Grid's website: [www.nationalgridus.com](http://www.nationalgridus.com) For a step-by-step guide you can visit the LIGH homepage, or request help from a National Grid customer service representative: (800) 642-4272
- For your *oil/propane usage* data, please contact your provider to request a customer history record print out which should include information regarding the gallons of oil/propane delivered with delivery dates.

**NOTE: We do not need your billing information but your actual usage data ex. Kwh/month, CCF/month, or gallons/month.**

**STEP 3:** Once we've processed this information, our program staff will be contacting you to schedule a no-cost energy audit. The audit will be performed by a Town licensed, BPI\* (Building Performance Institute) certified Energy Auditor. Once the audit has been completed you will be presented with a customized plan to make your home energy efficient.



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## Why Participate?

The Long Island Green Homes program allows you to fund your energy-saving home improvements with a benefit assessment applied to your home. You'll pay for the improvements over time, from the money you save on your energy bills. In most cases, the energy audit is provided free of charge, with no obligation to you. Through the Town of Babylon's Long Island Green Homes program, you'll be taking the money you usually give to the utility companies, and using it to improve your home's energy efficiency. By improving your home's energy efficiency, you will be saving money, making your home more healthy and comfortable, and improving our environment.

## What is a Home Performance Evaluation?

A Home Performance Evaluation is a complete assessment of your household's energy use that finds out where you are using and losing energy. We will help you stop wasting energy and money. A typical evaluation lasts only two to three hours. During the evaluation, the program's licensed and BPI certified home energy auditor will perform a number of Diagnostic tests including:

- **Assessment of your existing insulation:** Visual inspection and/or thermal imaging is used to determine the amount of existing insulation in your home's building envelope.
- **Perform a Blower Door Test:** This test provides a measure of how much air is infiltrating and escaping your house through cracks and crevices.
- **Evaluate the efficiency of your heating, cooling and hot water systems**
- **Check appliance and lighting efficiency**
- **Perform a health and safety inspection:** Carbon monoxide (CO) testing is performed on all appliances that can cause dangerous levels.

## The Next Step: A Comprehensive Home Assessment

After the evaluation, you will receive a Comprehensive Assessment of your home's energy use, including the results of the testing that was performed. The contractor will list the specific energy-saving improvements, along with the cost of each improvement and a breakdown of the estimated savings associated with each improvement. The contractor will explain the benefits of each item in detail, and answer any questions you have.

## Pay Back Over Time Using Your Energy Savings

You will pay off the benefit assessment based on your projected energy savings. The monthly payment amount will be structured according to how much energy savings you are likely to see each year.

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\*More info can be found at: [www.BPI.org/content/consumers/index.html](http://www.BPI.org/content/consumers/index.html)



# LONG ISLAND GREEN HOMES

## SELF-CHECK HOME INVENTORY

281 Phelps Lane, Room 16  
 North Babylon, NY 11703  
 (631) 422-4411 FAX (631) 893-1008  
 www.LIGreenHomes.com

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Instructions:** Please take some time to look through this home inventory checklist and fill out, as best as you are able, any or all information that pertains to your home. You might not be able to access all areas of the home to give this information. You also might not be able to understand and answer all of the checklist items. We are seeking to get a basic understanding of the conditions of your home prior to the energy assessment. **After the completion of this form, please in addition submit to us your two most recent years of utility usage data (electric and heating).**

OFFICE USE ONLY:	
RECEIVED:	/ / 20 ____
AUDIT:	
/ / 20 ____	: ____ AM / PM
Auditor: _____	
<input type="checkbox"/>	ELECTRIC YT: _____
<input type="checkbox"/>	OIL YT: _____ WS: _____
<input type="checkbox"/>	GAS YT: _____ WS: _____
L/M: _____	
A: _____	

Where did you hear about the Long Island Green Homes program? (Circle all that apply):  
 Town Sponsored Event || LIGH Literature || LIGH Employee || Town of Babylon Employee || ligreenhomes.com  
 Newspaper Article || Lawn Sign || Word of Mouth || Private Contractor || Other: \_\_\_\_\_

If you had to choose one, which of the following actually convinced you to participate in the program? (Circle One):  
 LIGH Literature || LIGH Employee || Town of Babylon Employee || ligreenhomes.com || Newspaper Article  
 Word of Mouth || Private Contractor || Other: \_\_\_\_\_

### House Information

House Type (Ex. Ranch, Split-Level, etc.)	# Levels (Excluding Basement and Attic)	# Rooms	Square Footage	Year Built	# Residents in Home	# of Years at Residence

Are you a homeowner for the home at the address specified above? Yes || No

Is this a two family home? Yes || No

Approximately how old is your roof? \_\_\_\_\_

How many bedrooms are in your home? \_\_\_\_\_

How many bathrooms are in your home? \_\_\_\_\_

How many kitchens are in your home? \_\_\_\_\_

**Lighting:** Please describe the lighting usage in and around your home (Circle one option shown below):  
 Less lighting, mostly efficient bulbs || Average Lighting, some efficient bulbs || Lots of lights, no efficient bulbs

**Heating:**  
 How many thermostats are in your home? \_\_\_\_\_ Are they programmable? \_\_\_\_\_  
 Where are the thermostats located in your home? \_\_\_\_\_  
 What temperature do you typically keep your thermostat(s) set to? \_\_\_\_\_  
 Do you have more than one boiler or furnace? \_\_\_\_\_  
 Where are these units located in the home? \_\_\_\_\_  
 What kind of distribution system heats your home? (Please circle): Hot Water Baseboard || Radiant Heat || Forced Air  
 Are there currently any radiators, baseboards, or ducts not operating? \_\_\_\_\_  
 If you have a furnace, do you regularly change the filters? \_\_\_\_\_  
 How old is the heating unit in your home? \_\_\_\_\_  
 What type of fuel does your heating system use (Circle one): Oil || Gas || Electric || Propane  
 How old is your water heater? \_\_\_\_\_

What type of water heater do you have? (Circle one option shown below):

Tankless Coil || Stand Alone Tank || Indirect || Instantaneous Water Heater

Where is the unit(s) located in your home? \_\_\_\_\_

What kind of fuel does your water heater use? (Circle one): Oil || Gas || Electric || N/A

Do you ever run out of hot water? Yes Frequently || Yes Occasionally || No

Is the hot water piping attached to the boiler/water heater insulated? \_\_\_\_\_

**Cooling:**

Which kind of cooling device do you use for your home?

Number of Wall Air Conditioners \_\_\_\_\_

Tonnage of Central Air Conditioner Unit \_\_\_\_\_ Location of Duct(s) \_\_\_\_\_

How old is the air conditioner(s)/central air unit? \_\_\_\_\_

**Exhaust Fans/Vents:** (Exhaust fans and vents are designed to remove hot air and moisture from the interior of the home)

How many of the following exhaust fans/vents in your home?

Bathroom Exhaust Fan	Kitchen Exhaust Fan	Attic Exhaust Fan

Is your dryer vented to the outside? Yes || No

**Appliances/Electronics**

**Appliances:**

Please circle and fill in all of the following that pertains to the appliances that are in your home:

Which of the following best describes your stove? Electric || Gas || Propane || Other: \_\_\_\_\_

Approximately how old is your stove? \_\_\_\_\_

Which of the following best describes your oven: Electric || Gas || Propane      How old is the unit? \_\_\_\_\_

Is your refrigerator Energy STAR Qualified? Yes || No

How many refrigerators do you have in your home? \_\_\_\_\_

Clothes Washer: How old is the unit? \_\_\_\_\_ Is the unit Energy STAR Qualified? Yes || No

Clothes Dryer: Is the unit gas or electric powered? \_\_\_\_\_ How old is the unit? \_\_\_\_\_

**Electronics:**

Are there a lot of electronic and entertainment devices in your home (Circle one option shown below):

Not a lot || About average for the size of this home || Lots of electronic and entertainment devices

**Windows:**

Please circle and fill in all of the following that pertains to the windows that are in your home:

What type of windows do you have in your home? (Circle one): Standard, single pane || Thermo pane

Approximately how many windows do you have in your home? \_\_\_\_\_

What is the frame material of these windows? (Circle one): Wood || Metal || Vinyl || Not sure

How would you describe your windows' condition? (Circle one): Excellent || Good || Fair || Poor

**Entrances:**

How many entrances do you have going in and out of your home? \_\_\_\_\_

Where are these entrances located in your home? \_\_\_\_\_

**Basement Space:** (if this applies to your home)

What is your home's foundation type? (Circle one): Slab || Basement || Crawlspace

What kind of basement do you have? Finished || Unfinished

Is your basement a heated space? Yes || No

Is there a door at the basement stairs? Yes || No

Is your basement insulated? Yes || No

**Attic Space:**

How thick is the insulation in your attic? \_\_\_\_\_

How well is the insulation distributed in your attic? \_\_\_\_\_

How do you get access to the attic? \_\_\_\_\_

Do you use your attic for storage? \_\_\_\_\_

**Fireplaces:**

Do you have any fireplace(s) in your home? Yes || No    If Yes, how many? \_\_\_\_\_

Do you have any wood/coal/biomass burning stove(s) in your home? Yes || No    If Yes, how many? \_\_\_\_\_

Does the damper seal properly? Yes || No

Have you had the flue cleaned? Yes || No

**Dehumidifier/Humidifier:**

Do you use a dehumidifier? Yes  No

Do you use a humidifier? Yes  No

**Drafts/Problem Areas:** Please answer the following questions pertaining to potential drafts in your home.

Do you have any rooms that are often too hot or too cold? Yes  No

If Yes, please describe \_\_\_\_\_

Does your home have a tendency to cycle from too hot to too cold? Yes  No

If Yes, please describe \_\_\_\_\_

Are there any known moisture or condensation problems in your home? Yes  No

If Yes, please describe \_\_\_\_\_

Does the basement get wet at any time? Yes  No

If Yes, please describe \_\_\_\_\_

Does the basement ever smell musty? Yes  No

If Yes, please describe \_\_\_\_\_

Do icicles ever form on the eaves or gutters during the winter? Yes  No

If Yes, please describe \_\_\_\_\_

Does your roof ever leak? Yes  No

If Yes, please describe \_\_\_\_\_

Do you know of any mold or mildew in your home? Yes  No

If Yes, please describe appearance and location \_\_\_\_\_

**Health Issues:** Please answer the following questions pertaining to health issues you may be experiencing in your home:

Do any occupants of the home suffer from chronic headaches, colds, flu or nausea? Yes  No

If Yes, please describe \_\_\_\_\_

Do any of the occupants suffer from Asthma? Yes  No

If Yes, please describe \_\_\_\_\_

Do any of the occupants suffer from dry skin in the winter? Yes  No

If Yes, please describe \_\_\_\_\_

Is there any sheetrock missing from your home's walls? (Even if there is a small patch missing, please note). Yes  No

If yes, please describe \_\_\_\_\_

Does your home currently have any asbestos insulation? Yes  No

If Yes, please describe type and location \_\_\_\_\_

Are you currently undergoing or planning to undertake home renovations? Yes  No

If yes, briefly describe \_\_\_\_\_

What is your primary reason for seeking a home energy assessment? (Circle one option shown below):

Energy Bill Reduction  Home Comfort Issues  Home Health Issues  Reduce Carbon Footprint

Solar  Increase Home's Value  If Other, please explain \_\_\_\_\_

**Additional Concerns:** Please describe any other concerns or problem areas that are affecting your home that weren't asked on this form. (Please be detailed.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_