

ThermWise® Home Energy Plan

Mail-In Plan



ThermWise.com

Thank you for taking advantage of Enbridge Gas' ThermWise® Home Energy Plan to help you identify ways to improve the efficiency of your home. Energy efficiency is important to us and we are pleased to provide you with a self-guided Home Energy Plan. This plan will help us learn about your home and enable us to give you recommendations that could save you energy and money.

After you complete and return the plan, we will give you a customized report containing home-improvement recommendations that could help to reduce natural gas usage. Customers who complete the mail-in plan will receive, at no charge, a package containing appropriate low-cost, energy-efficiency measures to install.

A typical plan takes about 30 to 45 minutes to complete, depending on the size of your home. Please note that the more questions you answer, the more accurately the report will reflect the conditions in your home. To simplify completion of the plan, you may want to keep the following items on hand:

- ☐ Tape measure/ruler
- ☐ Flashlight
- ☐ 2-cup, half or one-gallon container
- ☐ Calculator
- ☐ Clipboard
- ☐ Stopwatch or timer

Please email your completed Home Energy Plan to:

ThermWise.EnergyPlan@DominionEnergy.com

or, mail to:

ThermWise Home Energy Plans
P.O. Box 45360
Salt Lake City, Utah 84145-0360

FOR ENBRIDGE GAS USE ONLY

Home Energy Plan Number:

Date:

Customer information

Account number: Service agreement number:

Name(s) on customer account: Phone:

Customer address: City: State: Zip:

*Account and Service Agreement numbers are located on your monthly statement. See example on Page 8.

Home usage information

Please tell us about your home.

1. Including yourself, how many people live in your home?
2. Is someone usually home during the day?
☐ Yes ☐ No
3. What year was your home built?
4. Do you own or rent your home?
☐ Own ☐ Rent
5. a) What kind of thermostat do you have in your home?
☐ Programmable ☐ Smart dial
- b) If you have a programmable or smart thermostat, do you regularly set back or lower the temperature each night?
☐ Yes ☐ No

Home construction information

The following questions pertain to your home and its construction.

6. What best describes your home?

☐ Single-family dwelling

☐ Townhouse/condominium

☐ Apartment/duplex

☐ Mobile home

7. How many stories does your house have above ground level (including main level)?

If you live on an upper level of an apartment, townhouse, or condominium, write "one story" (and select "slab on grade" for question 12).

If houses built into a hillside, (e.g. one floor above ground level on one side, two floors above ground level on the other side) write "two stories" (and select "slab on grade" for question 12).

8. How many total heated rooms do you have in your home?

9. What is the total heated square footage of your home?

square feet

10. Which direction does the front of your house face?

☐ North

☐ Northwest

☐ West

☐ Southwest

☐ South

☐ Southeast

☐ East

☐ Northeast

11. How would you describe your home's floor/foundation type? If more than one type, specify the predominant type.

☐ Slab on grade (poured concrete foundation that rests on the soil surface)

☐ Heated basement

☐ Unconditioned basement (no heating is provided to the space)

☐ Unvented crawl space

The house is on a raised foundation, with 2 to 3 feet of airspace under the floor. Unvented crawl spaces do not have open vents to the outside and are typically warmer than vented crawl spaces.

☐ Vented crawl space

The house is on a raised foundation, with 2 to 3 feet of airspace under the floor. Vented crawl spaces have open vents to the outside, so the air under the house is close to the same temperature as outside air.

Insulation

12. a) Do you have insulation in your floor/foundation?

☐ Yes

☐ No

b) If yes, please estimate the type and amount of insulation (in inches) in your floor/foundation.

If you have more than one type of insulation in your home, please indicate the predominant type.

If you have an unheated basement or a crawl space, enter the insulation of the floor above the basement or crawl space.

Foundation insulation is added to the foundation's sides to reduce the amount of heat transferred through it. Most houses do not have foundation insulation.

Insulation type	Description	Amount of insulation in floor/foundation (inches)
Fiberglass	Fiberglass is the most familiar type of insulation. Fiberglass comes in rolls, batts, and as loose insulation that can be blown into place.	
Rockwool	Rockwool looks like old wool with dark flecks. It is generally dirty gray or brown in color.	
Cellulose	Cellulose insulation is made from shredded wastepaper, such as used newspaper and boxes.	
Perlite	Perlite resembles small, white, round, foam pebbles. It is the same white material found in potting mixtures.	
Vermiculite	Vermiculite is similar to Perlite, except it is usually light brown or gold in color.	
Rigid Boards	Rigid boards are fibrous or plastic foam pressed or extruded into board-like forms	

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Insulation (continued)

13. a) Do you have insulation in your attic/roof? ☐ Yes ☐ No

b) If yes, please estimate the **type** and **amount** of insulation (in inches) in your floor/foundation.

*If you have more than one type of insulation in your home, please indicate the predominant type.
If you have an unheated basement or a crawl space, enter the insulation of the floor above the basement or crawl space.
Foundation insulation is added to the foundation's sides to reduce the amount of heat transferred through it. Most houses do not have foundation insulation.*

Insulation type	Description	Amount of insulation in attic/roof (inches)
Fiberglass	Fiberglass is the most familiar type of insulation. Fiberglass comes in rolls, batts, and as loose insulation that can be blown into place.	<input type="text"/>
Rockwool	Rockwool looks like old wool with dark flecks. It is generally dirty gray or brown in color.	<input type="text"/>
Cellulose	Cellulose insulation is made from shredded wastepaper, such as used newspaper and boxes.	<input type="text"/>
Perlite	Perlite resembles small, white, round, foam pebbles. It is the same white material found in potting mixtures.	<input type="text"/>
Vermiculite	Vermiculite is similar to Perlite, except it is usually light brown or gold in color.	<input type="text"/>
Rigid Boards	Rigid boards are fibrous or plastic foam pressed or extruded into board-like forms	<input type="text"/>

14. a) Do you have insulation in your walls? ☐ Yes ☐ No

b) If yes, what is the thickness (in inches) of your walls? inches
You can measure your wall thickness at a windowsill.

Windows

15. Which best describes the type of windows in your home?
If more than one type, choose the predominant selection.

☐ Single pane (one pane of glass)
☐ Double pane (two panes of glass)
☐ Triple pane (three panes of glass)

16. What type of window frame construction do you have?

Enter the material that makes up the frame that surrounds the glass panes in your window. If different parts of your home have different window construction types, select the type with the largest area.

☐ Aluminum
☐ Wood or Vinyl

17. What is the total window square footage on the **front** of our home? square feet
*Multiply the height of each window by its width, such as 3.00 feet x 2.00 feet, and add these individual areas to obtain the total window area on each side of your home.
Note: Include window frames in your calculation.
Count glass doors as windows.
Only include windows that are located in heated spaces.*

18. What is the total window square footage on the **left** side of your home? square feet
The left side refers to when you are facing the front of your home from the street.

19. What is the total window square footage on the **right** side of your home? square feet
The right side refers to when you are facing the front of your home from the street.

20. What is the total window square footage on the **back** side of your home? square feet

21. How “drafty” are your windows? ☐ Not drafty at all ☐ Average ☐ Very drafty

22. How “drafty” are your doors? ☐ Not drafty at all ☐ Average ☐ Very drafty

Appliance information

The following questions pertain to the appliances you use at your home.

23. a) Do you have a gas stove top?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) If yes, does the gas stove have a pilot light?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c) If yes, how many minutes per day on average is the gas stove operated?	<input type="text"/>
24. a) Do you have a gas oven?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) If yes, does the gas stove have a pilot light?	<input type="checkbox"/> Yes <input type="checkbox"/> No
25. What is the average number of minutes per day that the gas oven is operated?	<input type="text"/>
26. a) Do you have a washing machine at home?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) If yes, does your washing machine have an ENERGY STAR® label on it	<input type="checkbox"/> Yes <input type="checkbox"/> No
c) How many of your weekly loads are washed/rinsed as hot/warm?	<input type="text"/>
d) How many of your weekly loads are washed/rinsed as hot/cold?	<input type="text"/>
e) How many of your weekly loads are washed/rinsed as warm/warm?	<input type="text"/>
f) How many of your weekly loads are washed/rinsed as warm/cold?	<input type="text"/>
27. a) Do you have a gas dryer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) If yes, how many loads per week do you dry?	<input type="text"/>
c) If yes, does your dryer have a moisture sensor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
28. a) Do you have a dishwasher?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) If yes, does your dishwasher have an ENERGY STAR® label on it?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c) How many loads per week do you wash?	<input type="text"/>
29. a) Do you have operational outdoor gas lights?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) If yes, how many outdoor gas lights do you have?	<input type="text"/>
c) Are the gas lights on:	<input type="checkbox"/> Always <input type="checkbox"/> Dusk to dawn
30. a) Do you have a gas fireplace?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) How many hours per week on average is the fireplace used during the winter?	<input type="text"/>
c) Describe how you operate your gas fireplace:	<input type="checkbox"/> There is no pilot light <input type="checkbox"/> The pilot light is always on <input type="checkbox"/> I turn off the pilot light during the spring and summer <input type="checkbox"/> I always turn off the pilot light when not in use

Heating system information

The following section lists questions related to your home's heating system(s). If you have only one heating system, do not enter values for column "Secondary Heating System."

Question	Primary heating system	Secondary heating system
31. a) What is the fuel source for your heating system?	<input type="checkbox"/> Gas <input type="checkbox"/> Wood <input type="checkbox"/> Oil <input type="checkbox"/> Other <input type="checkbox"/> None	<input type="checkbox"/> Gas <input type="checkbox"/> Wood <input type="checkbox"/> Oil <input type="checkbox"/> Other <input type="checkbox"/> None
b) What type of heating system do you have? <i>Forced-air furnace: Forced-air furnace draws room air through ductwork into a furnace, where it's heated. Boiler: Natural gas or oil heats the water, which is pumped through radiators or pipes in the foundation, heating the house. Choose "Other" if your heating system is neither of the above types.</i>	<input type="checkbox"/> Forced-air furnace <input type="checkbox"/> Boiler <input type="checkbox"/> Other	<input type="checkbox"/> Forced-air furnace <input type="checkbox"/> Boiler <input type="checkbox"/> Other
c) What is the name of the heating system manufacturer? <i>This information can usually be found on the heating equipment label.</i>	<input type="text"/>	<input type="text"/>
d) What is the model number of the heating system? <i>This information can usually be found on the heating equipment label.</i>	<input type="text"/>	<input type="text"/>
e) What is the capacity in Btu/hr of the heating system? <i>Capacity is the amount of heat your heating system is capable of generating in an hour. Look for this information on the equipment label of the heating system. If you cannot find it, enter 0.</i>	<input type="text"/>	<input type="text"/>
f) To estimate the efficiency of your furnace, please enter the approximate year your heating system was installed.	<input type="text"/>	<input type="text"/>
g) Where is the heating system located?	<input type="checkbox"/> Indoors or other heated space <input type="checkbox"/> Garage <input type="checkbox"/> Unconditioned basement or crawl space	<input type="checkbox"/> Indoors or other heated space <input type="checkbox"/> Garage <input type="checkbox"/> Unconditioned basement or crawl space

32. How would do you describe the condition of your air filter?

Air filters are used to remove contaminants from the air stream.

☐ Clean
 ☐ Average
 ☐ Dirty
 ☐ N/A

33. a) If you have heating ductwork, is it run through heated spaces?

☐ Yes
 ☐ No

b) If no, are your heating ducts insulated?

☐ Yes
 ☐ No

c) If no, have your ducts been sealed by an HVAC professional?

☐ Yes
 ☐ No

34. Are heating registers blocked by furniture, rugs and/or drapes?

Registers are vents in heated space that directs the flow of air across the floor to allow warm air to rise.

☐ Yes
 ☐ No

Water heating

The following section asks questions related to your water-heating system(s). If you have only one water-heating system, do not enter values for column "Secondary Water-Heating System."

Question	Primary water-heating system	Secondary water-heating system
35. a) What is the fuel source for your water heating system?	<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other <input type="checkbox"/> None	<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other <input type="checkbox"/> None
b) What type of water heating system do you have? <i>A storage water heater is the most common type of water heater where water is heated and stored in a tank (typically 40 or 50 gallons). An Instantaneous water heater heats water when it is needed and does not have any storage tanks.</i>	<input type="checkbox"/> Storage <input type="checkbox"/> Instantaneous	<input type="checkbox"/> Storage <input type="checkbox"/> Instantaneous
c) What is the size (in gallons) of your water heater? <i>The water heater capacity can usually be found on the water heater's equipment label.</i>	<input type="text"/>	<input type="text"/>
d) Who is the manufacturer of the water heater? <i>This information can usually be found on the water heater's equipment label.</i>	<input type="text"/>	<input type="text"/>
e) What is the model number of the water heater? <i>This information can usually be found on the water heater's equipment label.</i>	<input type="text"/>	<input type="text"/>
f) Your water heater's efficiency is stated as its "Energy Factor." If your water heater has a sticker stating its Energy Factor, please write it here. <i>If you cannot find your water heater's Energy Factor, please enter the approximate year your water heater system was installed.</i>	<input type="text"/>	<input type="text"/>
g) Where is the water heating system located?	<input type="checkbox"/> Indoors or other heated space <input type="checkbox"/> Garage <input type="checkbox"/> Unconditioned basement or crawl space	<input type="checkbox"/> Indoors or other heated space <input type="checkbox"/> Garage <input type="checkbox"/> Unconditioned basement or crawl space
h) What is the temperature of the outside of your water heater?	<input type="checkbox"/> Room temperature <input type="checkbox"/> Warm to touch <input type="checkbox"/> Hot to touch	<input type="checkbox"/> Room temperature <input type="checkbox"/> Warm to touch <input type="checkbox"/> Hot to touch
i) What is the usual temperature setting of your water-heating system?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <div>Lowest Highest</div>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <div>Lowest Highest</div>
j) What year was your water heater installed?	<input type="text"/>	<input type="text"/>
k) Do the water pipes entering and leaving your water heater have insulation on them?	<input type="checkbox"/> Insulation on cold-water pipe <input type="checkbox"/> Insulation on warm-water pipe <input type="checkbox"/> No insulation	<input type="checkbox"/> Insulation on cold-water pipe <input type="checkbox"/> Insulation on warm-water pipe <input type="checkbox"/> No insulation
l) Please estimate the diameter (in inches) of the water pipes entering and leaving your water heater.	<input type="text"/>	<input type="text"/>
m) Do you have a water-heater blanket on your water heater?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Water heating (continued)

36. What is the average number of showers/baths taken per day in your home?

37. How many shower heads do you have in your home?

38. How many bathroom sink faucets do you have in your home?

39. How many kitchen sink faucets do you have in your home?

40. Inefficient shower heads and faucets not only consume more water, but also waste natural gas at your water heater.

To learn if your fixtures are efficient, please complete the following steps:

1. Gather a stopwatch or timer and ONE of the following: a 2-cup measuring cup, a half- or a one-gallon container.
2. Turn the shower or faucet on to its normal position, as you would for showering, washing hands or washing dishes.
3. With your stopwatch or timer in hand, place the container directly under the shower head or faucet. Be sure to capture all of the water while performing this test.
4. Record the container type and time taken to fill the container in the table below. Also note if your shower head or faucet drips when turned off.
5. Based upon your measurements, we will calculate your fixtures' water efficiency.

Fixture	Container type (choose only one)			Time to fill container (seconds)	Does it drip after turned off?
Shower head 1	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Shower head 2	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Shower head 3	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Shower head 4	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Bathroom faucet 1	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Bathroom faucet 2	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Bathroom faucet 3	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Bathroom faucet 4	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Bathroom faucet 5	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Bathroom faucet 6	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Kitchen faucet 1	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Kitchen faucet 2	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No
Kitchen faucet 3	<input type="checkbox"/> 2-cup	<input type="checkbox"/> Half-gallon	<input type="checkbox"/> One-gallon		<input type="checkbox"/> Yes <input type="checkbox"/> No

Energy-efficiency measure installations

To help us understand the likelihood of installing energy-efficiency products in your home, please complete the following section.

41. If recommended and provided free of charge, would you install low-flow shower heads?

☐ Yes ☐ No

42. If recommended and provided free of charge, would you install faucet aerators?

☐ Yes ☐ No

43. If recommended and provided free of charge, would you install pipe insulation on your water heater?


☐ Yes ☐ No

44. If recommended and provided a \$50 incentive, would you install a smart thermostat?

☐ Yes ☐ No

Monthly statement example

The customer (1) Account Number and (2) Service Agreement Number can be found on the Enbridge Gas monthly statement.



John B Smith

1 Account: 1234567890

Page 1 of 1

Thank you for your patronage. Your prompt payment assists us in providing our customers with high-quality natural gas service.

Account Summary as of May 12, 2017

Previous Balance Due - 5/4/2017	41.00
Payments Received - 4/18/2017	-41.00
Current Charges - Gas Service (Budget)	41.00
Total Amount Due Upon Receipt	\$41.00

1% monthly interest (12% annually) charged on balance on or after 6/5/2017.

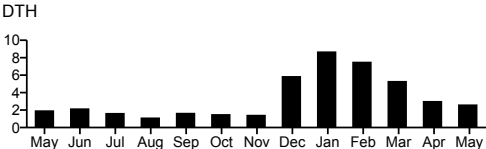
Service Address: 123 Energy Avenue, Salt Lake City, UT 84108

Residential Gas Service

2 Service Agreement: 0987654321

Comparison	Last Year	This Year
Decatherms/Day	0.07	0.09
Dollars/Day	\$0.80	\$0.89

Usage History



Service from 4/13/2017 - 5/12/2017

Rate - GS

Charge for Gas Used (Avg cost per DTH \$ (6.70800))	16.77
Basic Service Fee Total	6.75
Utah Sales Tax (4.15%)	0.98
Municipal Energy Tax (6%)(Salt Lake City)	1.41
Energy Assistance	0.04
Current Gas Billing	25.95
Current Charge (Budget Amount)	\$41.00

(Budget Plan Balance: \$23.90 Debit)

Meter ID	Current Meter Read		Previous Meter Read		Days	Dial Difference		Volume Multiplier	Billed DTH
	Date	Reading	Date	Reading					
46089634	5/12/2017	1249	4/12/2017	1221	30	28	CCF	0.090855	2.5

Please email your completed Home Energy Plan to:

ThermWise.EnergyPlan@DominionEnergy.com

or, mail to:

ThermWise Home Energy Plans
P.O. Box 45360
Salt Lake City, Utah 84145-0360