

VOUCHER APPLICATION - Phase 1

For **ELIGIBILITY** purposes, do not disassemble your old device or install a new device before receiving a voucher from the District. Only refundable deposits are allowed prior to voucher approval and the amount must be clearly noted on the final invoice as 'refundable'. Review voucher guidelines at www.valleyair.org/burncleaner.

APPLICANT INFORMATION

First and Last Name

Mailing Address City State Zip Code

Device Address (If different from above) City State Zip Code

Device County (check one)
 San Joaquin Stanislaus Merced Madera Fresno Kings Tulare Kern (SVJ portion)

Primary Phone (required) () E-mail Address

Check here if you prefer to have your voucher emailed

Applicant Status (check one)
 I am the homeowner purchasing for my residence at "Device Address" above. I am the property owner purchasing for "Device Address" above. I am a tenant purchasing for "Device Address" above. **(Rental Property Owner & Tenant Approval form required)**

Application Type (check one)
 Standard Application: Up to \$1000* Low-income Application: Up to \$2500* **(Low Income Eligibility Form required)**

** Receive up to an additional \$500 for installation costs on a gas device.*

DEVICE INFORMATION

Estimated Wood or Pellet Usage of Old Device (required)
 Cords of wood or pounds of pellets per year: **or** Logs of wood or pounds of pellets per day: Average annual days used:

Does the house have access to piped natural gas or propane? Yes No

Old Device Type (check one)

Wood	Pellet	Other
<input type="checkbox"/> Certified insert	<input type="checkbox"/> Certified insert	<input type="checkbox"/> Open-hearth fireplace
<input type="checkbox"/> Non-certified insert	<input type="checkbox"/> Non-certified insert	<input type="checkbox"/> Wood-burning firebox
<input type="checkbox"/> Freestanding certified stove	<input type="checkbox"/> Freestanding certified stove	
<input type="checkbox"/> Freestanding non-certified stove	<input type="checkbox"/> Freestanding non-certified stove	

(Older gas burning devices are ineligible for this program)

New Device Type (check one)

Wood*	Pellet*	Gas
<input type="checkbox"/> Certified insert	<input type="checkbox"/> Certified insert	<input type="checkbox"/> Insert
<input type="checkbox"/> Freestanding certified stove	<input type="checkbox"/> Freestanding certified stove	<input type="checkbox"/> Freestanding stove
		<input type="checkbox"/> Fireplace (Make and Model Required)
		Make: <input style="width: 150px;" type="text"/>
		Model: <input style="width: 150px;" type="text"/>

** New certified wood or pellet devices must be identified on the list of EPA Certified Wood Heaters to be eligible for funding.*

RETAILER INFO

Applicants may visit any retailer participating in the Burn Cleaner program and are not required to choose a retailer at the time of application. A list of participating retailers is available at www.valleyair.org/burncleaner. If you have already chosen and contacted a retailer, please provide their information below (*you may still choose any retailer on the list*). The District may contact the retailer you listed below regarding your application.

Retailer Name

Sales Representative

PHOTOS

Two pre-installation photos must be submitted with this application.

Photo 1 - must be taken from a few feet back, showing the old unit and surrounding structures.

Photo 2 - must show the inside of the unit, with any doors or screens opened.

For complete photo guidelines visit www.valleyair.org/BurnCleaner

Photo Samples (DO NOT FAX PHOTOS)



Photo 1

Photo 2

AGREE & CERTIFY

By signing this application, I certify that I have read, understand and will adhere to the Burn Cleaner Program Voucher Guidelines and agree to all the following:

- I understand that the selection of the retailer, installer and new device is completely my choice, my responsibility and up to my discretion.
- I understand that submission of this voucher application **does not guarantee** incentive funding for the new device.
- I have not made any **non-refundable payments** towards the purchase of the new device and will not install the new device until I have received an approved voucher from the District.
- I understand that it is my responsibility to verify that the new device is eligible under the program guidelines. New wood or pellet devices must be on the current list of EPA Certified Wood Heaters and a new gas fireplaces it must meet ANSI z21.88/CSA2.33.
- I will be removing an operable old device or modifying an open hearth fireplace at the device address specified on this voucher application.
- If applicable, I agree to surrender my old wood or pellet insert/stove at a licensed recycling/dismantling facility or to the participating retailer to dispose of at a licensed recycling/dismantling facility within 60 days of installation of the new device.
- I understand that if I install the new device in another location other than what is identified in the pre-installation photos, I must first contact District staff to receive approval and I must still render the old device permanently inoperable.
- I am not changing out my old device in preparation for the sale of the house as a result of any District, state or federal rules. Such transaction would deem this application ineligible for funding per District Rule 4901 (www.valleyair.org/Rule4901).
- I understand that the District does not endorse any participating retailer on the Burn Cleaner Program Retailers List. The District will not be held liable for any circumstances or events that occur between the applicant and retailer. Participating retailers are independent contractors; they are **not** officers, representatives, agents, servants, employees, partners, associates, etc. of the District.

Printed Name

Signature (*electronic signatures not accepted*)

Date

CHECKLIST - Phase 1

You are almost done!

Please submit the following for consideration:

- Signed and completed Voucher Application
- Two Pre-installation photos (*choose one*)
 - Attached to app
 - Emailed
 - Sent by Retailer
- If applicable, Low-Income Documents (*See Guidelines for additional documents required*)
- If applicable, Standard Tenant Documents (*See Guidelines for additional documents required*)

When complete, please print and sign this form, then mail, scan & email or fax to the Valley Air District:

MAIL: San Joaquin Valley Air Pollution Control District
Attention: Burn Cleaner Program Staff
1990 East Gettysburg Ave., Fresno, CA 93726-0244

E-MAIL: weberip@valleyair.org
(Subject line must show your name and device address)

FAX: (559) 230 - 6112 (*Faxed photos are not accepted*)

Register Your New Device!

Take advantage of more burn days by registering your new certified wood or pellet device at www.valleyair.org/CBYBregistration.
(Does not apply to gas devices)

LOW INCOME ELIGIBILITY FORM

In addition to this form, please review Low-Income Requirements and Eligibility section on the Voucher Guidelines at www.valleyair.org/burncleaner. **Please submit this form with the Voucher application.**

First and Last Name _____ Phone Number _____

Device Address _____ City _____ State _____ Zip Code _____

I am applying for low-income as the: Homeowner Primary Tenant (**Rental Property Owner & Tenant Approval form required**)

SECTION 1

Low Income eligibility will be determined based upon household income. Please fill in the following information:

# People in Household**	Max ANNUAL Gross Income	or	Max MONTHLY Gross Income
1	\$26,730	or	\$2,228
2	\$36,045	or	\$3,004
3	\$45,360	or	\$3,780
4	\$54,675	or	\$4,556
5	\$63,990	or	\$5,333
6	\$73,305	or	\$6,109
7	\$82,643	or	\$6,887
8	\$92,003	or	\$7,667
8+ add the following amount for each person	\$9,360	or	\$780

* The Income Eligibility Table is updated during February of each year.
 **Household includes all family members or other persons, including yourself, who reside together and share common living expenses.

Number of people living in household (include yourself): _____

Add the total Gross Income for all household members including yourself. Monthly or Annual

Wages: _____

Unemployment Payments: _____

Social Security Payments: _____

Veterans Benefit Payments: _____

Other Income: _____

Total Gross Income: _____

SECTION 2

Documents Required for Verification:

Option 1 Provide a copy of your completed federal income tax (Form 1040) from the most recent tax year. Please submit pages 1 & 2 of your tax return as well as any tax schedules filed during the past tax year.

Option 2 If you did not file a tax return this past year, please provide the following:

- 1) a written explanation as to why below, AND

- 2) the following applicable documents available for all household members who receive income to verify eligibility:
 - ✓ Copy of all bank statements, check stubs, and/or documents from all applicable issuing agencies for the last 60 days stating the amount received.
 - ✓ Other documents as approved by the District.

The District may request additional documents to verify eligibility.

If you receive any of the following benefits, you may provide supporting documentation dated in the last 60 days from any one of these issuing agencies verifying that you receive benefits (*check one*):

- Supplemental Security Income (SSI); or
- Temporary Assistance for Needy Families (TANF); or
- State Supplemental Payments (SSP); or
- California Work Opportunity and Responsibility to Kids (CalWORKs); or
- General Assistance (GA) or General Relief (GR); or
- Publicly subsidized full medical coverage (Medi-Cal); or
- Housing Choice Voucher Program (*must provide a copy of the housing assistance payments (HAP) contract*).
- CAL Fresh

Project # _____

RENTAL PROPERTY OWNER & TENANT APPROVAL

Rental property owners and tenants are eligible to apply for the San Joaquin Valley Air Pollution Control District's (District) Burn Cleaner Program (Program). As applicable, this form must be completed by both the rental property owner and primary tenant, and submitted with the required documents specified in the Program guidelines to be considered for a Program voucher.

This form is only required to be completed and submitted if:

- **You are the primary tenant** who will be purchasing an eligible new device regardless of the type of application you will be submitting, Standard or Low-Income.
- **You are the rental property owner** who will be purchasing an eligible new device under the Low-Income application. If you are a rental property owner and will be submitting a Standard application, you are **not required** to complete and submit this form.

Please be sure to check the appropriate boxes on the Voucher application regarding the Applicant Status and Applicant Type.

In addition to this form the following are also required:

- **Lease Agreement** - Copy of the signed lease agreement between the property owner and occupying tenant with a minimum of six (6) months remaining from the date of the application submittal.
- **Proof of Residence** - Utility bill (electricity, cable/satellite, water/garbage, etc.)

By signing this form, the rental property owner and the tenant agree to replace the existing, higher-polluting residential burning device(s) located at the device address identified on the application with an eligible new cleaner device(s) according to the Program guidelines, and agree to the following:

1. Tenant agrees to provide supporting documentation, as needed by the District, to determine low-income eligibility. If the rental property owner is applying under the Low-income application, the tenant has the option to submit supporting documentation such as income verification directly to the District in lieu of providing it to the rental property owner.
2. The rental property owner shall keep the new device(s) obtained through the Burn Cleaner Program in the rental property in which it is installed, unless it is otherwise required to be removed for, but not limited to, safety or regulatory reasons as deemed appropriate by the District. The device(s) shall become the property of the rental property owner, not the tenant or the District.
3. The rental property owner shall not raise the rent or evict the tenant because of the increased value of the rental property due solely to the installation of the new hearth device funded by the District.
4. The rental property owner and the tenant agree that payment of the incentive funding provided through the Program shall be made to the party that purchased the new hearth device.

Rental Property Owner Name (*print*)

Mailing Address	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Rental Property Owner Signature

Date

Tenant Name (*print*)

Mailing Address	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Tenant Signature

Date

Please submit this form with the completed Burn Cleaner Program Voucher Application and all other applicable documents.

For more information, call 559-230-5800 or visit www.valleyair.org/burncleaner.

**DISTRICT
USE ONLY**

Reviewed by _____ / ____ / ____

Project #