



Mail or E-mail to: **Metropolitan Energy Center**
 3810 Paseo Blvd, Kansas City, MO 64109
 Email: AtmosEnergy@KCEnergy.org
 Phone: 877-620-1803

AUDIT SUMMARY FORM

Energize Atmos Energy Homes

This form must be completed by an Energize Atmos Energy Homes certified auditor using information from an energy audit and modeling software, including the Performance Summary and Improvement Analysis Report. The form must be signed by both the homeowner and the energy auditor. Either the auditor or homeowner must submit all required materials to Metropolitan Energy Center (MEC). Please keep a copy of the application for your records.

APPLICANT INFORMATION			
Applicant Name:		Atmos Energy Account No:	
Audited Property Address:		Applicant Mailing Address:	
City, State, Zip:		City, State, Zip	
Phone:		Email:	
AUDITOR INFORMATION			
Auditor Company Name:		Auditor Name:	
Auditor Phone:		Auditor Email:	
AUDIT FINDINGS			
Baseline Nat. Gas Usage:	(CCF/yr)	Annual Nat. Gas Savings	(CCF/yr)
Proposed Nat. Gas Usage:	(CCF/yr)	Percentage of Nat. Gas Savings	(%)
PROGRAM ACTIVITIES			
<input type="checkbox"/> Energy Audit – Implement recommended upgrades to meet minimum Tier 1 requirements – 100% audit cost up to \$500 <input type="checkbox"/> Tier 1 – Achieve 10% natural gas savings through recommended building shell measures only – 35% of eligible project costs up to \$2,000 <input type="checkbox"/> Tier 2 – Achieve 20% natural gas savings through recommended building shell and mechanical equipment upgrades – 50% of eligible project costs up to \$5,000. NOTE: Building shell improvements must be considered and installed in combination with equipment measures.			
LIST OF RECOMMENDATIONS			
Description of Recommendations (If you require additional lines, please attach a page to this form)			
RECOMMENDATION	AFFECTED AREA	QUANTITY	
Example: Blown-in cellulose insulation for 3 1/2" stud walls	All exterior frame walls on second floors	4320 sf	
1.			
2.			
3.			
4.			
5.			
REQUIRED DOCUMENTS TO RECEIVE TECHNICAL REVIEW & RECOMMENDATIONS APPROVAL			
<input type="checkbox"/> Signed Audit Summary Form <input type="checkbox"/> REM Design Files (Baseline & Improved) <input type="checkbox"/> Photo of Front of Residence <input type="checkbox"/> Signed Terms & Conditions <input type="checkbox"/> Copy of Homeowner Assessment Report			
SIGNATURES			
I, _____, certify that I own and live in the audited property and that it serves as my primary residence. Furthermore, I acknowledge that my proposed project must be completed within six months of the initial audit and rebate request submitted within 30 days following the improvements. <div style="display: flex; justify-content: space-between; width: 80%; margin-left: auto; margin-right: auto;"> _____ _____ </div> <div style="display: flex; justify-content: space-between; width: 80%; margin-left: auto; margin-right: auto; font-size: small;"> Homeowner Signature Date </div>			
I, _____, certify that I have audited this property in an ethical manner and in accordance with standards for Energize Atmos Energy Homes. I certify that these audit results are accurate to the best of my knowledge, information, and behalf. <div style="display: flex; justify-content: space-between; width: 80%; margin-left: auto; margin-right: auto;"> _____ _____ </div> <div style="display: flex; justify-content: space-between; width: 80%; margin-left: auto; margin-right: auto; font-size: small;"> Auditor Signature Date </div>			