

Osage Valley Electric Cooperative
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Butler MO 64730

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Energy Audit Request Form

Yes, I would like to have an energy audit conducted on my home. I have enclosed \$125.00.

Name _____

Account Number _____ **Map Location** _____

Address _____ **City/St/Zip** _____

Home Phone _____ **Cell Phone** _____

Directions to the house: _____

	Yes	No		Yes	No
Do you feel your energy usage is high?			Do you humidify your home in the winter?		
Do you have rooms that are warmer/cooler than others?			Have you noticed condensation (except for windows) in the winter?		
Does your home heat evenly from floor to floor?			Do you have any water leaks that you are aware of?		
Is your home drafty?			Do you feel you have excessive dust in your home?		
Does anyone in your home have frequent headaches?			Does anyone in your home experience dry sinuses in the winter?		
Do you have any unexplained odors in your home?			Are you planning any home improvements in the near future?		
Do your windows sweat in the winter?			Do you have a fireplace in your home?		
Does anyone in your home have allergies?			Have you noticed mold in your home?		

Comments:

IMPORTANT: If you have a fireplace with no damper, an inoperable damper and no sealed glass doors, the ashes will need to be removed before the day of the evaluation. When the auditor depressurizes the home and air flows down the chimney, ashes can be drawn in to the home.

Office Use

Date Sent To Auditor _____ Date Audit Completed _____