

Agency: BVCAP CAPLSC CAPMN CNCAP UWM NENCAP NWCAP SENCA

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|------------------|------------------|
| Client Name: | Vendor Name: |
| Contact Name: | File Number: |
| Address: | Address: |
| City State: Zip: | City State: Zip: |
| Phone Number: | Phone Number: |

The Nebraska Weatherization Assistance Program will provide you with a new refrigerator in exchange for a low efficiency refrigerator that is currently in use in your house. The refrigerator to be removed must meet certain requirements for energy consumption, and will be metered by the auditor prior to offering a new appliance. Your old refrigerator will be removed from your home and appropriately disposed of. The new refrigerator will be provided at no charge. You will be responsible for removing all food from your old refrigerator and transferring them to the new refrigerator.

The auditor is responsible for assuring the replacement refrigerator will fit into the space available and will be delivered with the door hinged on the proper side.

| REFRIGERATOR INFORMATION | | |
|-----------------------------|---|---|
| | Existing Refrigerator | Replacement Refrigerator |
| Brand: | | |
| Model: | | |
| Configuration: | <input type="checkbox"/> Top Freezer <input type="checkbox"/> Bottom Freezer <input type="checkbox"/> No Freezer <input type="checkbox"/> Side-by-Side | <input type="checkbox"/> Top Freezer <input type="checkbox"/> Bottom Freezer <input type="checkbox"/> No Freezer <input type="checkbox"/> Side-by-Side |
| Energy Use/Rating | | |
| Fresh Food Volume (Cu. Ft.) | | |
| Freezer Volume (Cu. Ft.) | | |
| Total Volume (Cu. Ft.) | | |
| Defrost | <input type="checkbox"/> Auto <input type="checkbox"/> Partial Auto <input type="checkbox"/> Manual | <input type="checkbox"/> Auto <input type="checkbox"/> Partial Auto <input type="checkbox"/> Manual |
| Color | <input type="checkbox"/> Tan/Almond <input type="checkbox"/> White <input type="checkbox"/> Other | <input type="checkbox"/> Tan/Almond <input type="checkbox"/> White <input type="checkbox"/> Other |
| Height x Width x Depth | | |
| Door Hinge | <input type="checkbox"/> Left <input type="checkbox"/> Right | <input type="checkbox"/> Left <input type="checkbox"/> Right |
| Ice Maker | <input type="checkbox"/> Inside Door <input type="checkbox"/> None | <input type="checkbox"/> Inside Door <input type="checkbox"/> None |

SIGNATURE

- I accept the Weatherization Program's offer to replace and remove the above refrigerator.
- I refuse the Weatherization Program's offer to replace and remove the above refrigerator.

Sign Here _____ Client Signature _____ Date

Sign Here _____ Weatherization Representative Signature _____ Date

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