

EASTERN KERN AIR POLLUTION CONTROL DISTRICT

2700 "M" STREET SUITE 302, BAKERSFIELD, CA 93301-2370 PHONE: (661) 862-5250 • FAX: (661) 862-5251 • www.kernair.org



WOOD SMOKE REDUCTION PROGRAM GUIDELINES

REQUIREMENTS

The Eastern Kern Air Pollution Control (District) is offering rebate vouchers to replace Non-EPA certified wood stoves, fireplace inserts, and open-hearth fireplaces **used as a residential primary source of heat,** with new cleaner burning devices. Applications will be accepted until grant funds are depleted. Vouchers will be awarded first-come, first-served basis. A Completed application must be signed by the homeowner and submitted to the District. **No retroactive rebates are allowed.**

- 1. The Wood Smoke Reduction Program (WSRP) is only available to homeowners.
- 2. The fireplace or woodstove being replaced must be used as the home's primary source of heat.
- 3. The woodstove being replaced must be uncertified. A woodstove installed prior to 1988, and not having a particulate matter emission standards label affixed to it qualifies for this Program.
- 4. The new device must be one of the following: EPA certified woodstove, wood insert, pellet stove, pellet insert, natural gas, propane, or electric heating device.
- 5. Eligible woodstove, wood insert, pellet stove, or pellet insert must have a particulate matter emission rate not exceeding 2.0 g/h. EPA Certified Step 1 or Step 2 devices are eligible until May 15, 2020. After May 15, 2020, only EPA Certified Step 2 devices will be eligible.
- 6. The Standard Voucher is valued at \$2,000. Please be aware that the Standard Voucher amount may not cover the entire cost of the new cleaner device, installation, required permits or any code upgrade that may be required.
- 7. An Enhanced Voucher is valued at \$4,000. The Enhanced Voucher is available for an applicant with a project located in a designated Low Income or Disadvantaged Community.

Applicants can also qualify for the Enhanced Voucher if they demonstrate their income eligibility by providing proof of participation in one of the following low-income assistance programs:

- U.S. Department of Agriculture Women, Infants and Children (WIC) Program;
- U.S. Department of Health and Human Services Low Income Energy Assistance Program (LIHEAP);
- California Alternate Rates for Energy (CARE) Program with any utility company.
- 8. The new home heating device must be professionally installed in accordance with local fire and building codes by a licensed participating retailer. The applicant is responsible for scheduling the inhome estimate. Any applicable building permits must be obtained prior to installation of the new device. NO DO-IT-YOURSELF INSTALLATIONS ARE ALLOWED.
- 9. The applicant must redeem the voucher within sixty (60)-days from the date of issuance from a participating retailer. The voucher will be applied as an instant rebate off the total price of the new cleaner device. Installation must occur within one-hundred and twenty (120)-days of voucher issuance. The installation expiration date may be extended at the discretion of the District. Please contact the District for the list of participating retailers.

- 10. The applicant must arrange post inspection within forty-five (45) days of completed job to verify completed work and satisfy any applicable building permit. This includes providing entry of your property and home. Failure to do so will result in forfeit of voucher and any WSRP funds.
- 11. Old device replaced through this program must be removed from service and surrendered to the participating retailer, who will render it permanently inoperable and properly dispose/recycling it. The participating retailer shall take a photo of the older device prior to removing it. The retailer shall also take a photo of the installed new device.
- 12. Participating retailers or their licensed installers shall provide participants training on proper wood storage and wood burning practices (if applicable) and device operation and maintenance.
- 13. The WSRP is supported by the California Climate Investments (CCI) Program. This voucher program is subject to state requirements and agreements with the California Air Resources Board (CARB) and the California Air Pollution Control Officer's Association (CAPCOA).

HOW TO APPLY

If you own and reside in a home located within the District's jurisdiction that uses a fireplace or uncertified woodstove as the primary source of heat (see map below or list of communities on page 3 to determine jurisdiction). Complete all sections of the WSRP Application (page 4) and review and sign the Applicant Certification (page 5). Include at least one photo of your current non-certified wood burning device and a copy of your current utility or cable bill to verify name/address.

Submit your completed application with all attachments to:

Eastern Kern APCD 2700 M Street, Suite 302 Bakersfield, California 93301



EASTERN KERN COMMUNITIES

| Kernville |
|--------------------------|
| Keysville |
| Lake Isabella |
| Miracle Hot Springs |
| Mojave |
| Monolith |
| North Edwards |
| Onyx |
| Paris Loraine |
| Randsburg |
| Reefer City |
| Ridgecrest |
| Riverkern |
| Rosamond |
| Sand Canyon |
| Squirrel Mountain Valley |
| South Lake |
| Stallion Springs |
| Tehachapi |
| Twin Oaks |
| Walker Basin |
| Weldon |
| Willow Springs |
| Wofford Heights |
| |



EASTERN KERN AIR POLLUTION CONTROL DISTRICT

2700 "M" STREET SUITE 302, BAKERSFIELD, CA 93301-2370 PHONE: (661) 862-5250 • FAX: (661) 862-5251 • www.kernair.org



WOOD SMOKE REDUCTION PROGRAM APPLICATION

| Applicant Information | | | |
|---|-----------------|------------------------|-----------------------------------|
| Name | | | Phone No: |
| Physical Address: | | E-mail Address: | |
| | | | |
| City: | | State: | Zip: |
| Molling Address if Different | | | |
| Mailing Address if Different Address: | | | |
| | | | |
| City: | | State: | Zip: |
| Wood Burning Device Information | | | |
| Existing Wood Burning Device | ľ | New Certified D | evice To Be Installed |
| ☐ Non-certified freestanding woodstove | □ ЕРА с | ertified Woodsto | ove or Wood Insert |
| ☐ Non-certified wood insert | □ ЕРА с | ertified Pellet St | ove or Pellet Insert |
| ☐ Open hearth fireplace | ☐ Natural Gas | | |
| Make/Model: | ☐ Propane | | |
| Year Manufactured/Age: | ☐ Electric | | |
| Cords of wood burned annually: | ☐ Standa | rd Incentive: \$2 | ,000 |
| ☐ I have included a photograph of my old device. | □ *Enhar | ced Incentive: \$ | 4,000 (Low-Income Disadvantaged) |
| FPlease provide proof of Low-Income eligibility pursuant to Sec Income or Disadvantaged Community region of the map. | ction 4 (WIC, I | LIHEAP, CARE), if | your home is not located in a Low |
| Additional Information | | | |
| Reason for applying (Check all that apply) | | | |
| To reduce air pollution | | | |
| ☐ To save money | | | |
| □ Not satisfied with current device□ Other: | | | |
| Is the rebate a significant factor in replacing your sto | ve? \[Yes \] | □ No | |
| Is your current device used as a primary source of he | at (>50% wi | nter use)? \square Y | es □ No |
| How did you hear about the Program? | | | |
| | | | |
| DATE RECEIVED Validation | on (for EK | APCD use) | |
| | | Eligible for Fu | ınding: |
| | | Voucher Ar | nount: |
| | | | Date: |
| | | | |

APPLICANT CERTIFICATION

I certify the following:

- 1. I understand that only a currently installed and operating non-EPA certified wood burning device used as my primary source of heat is eligible to be replaced under this program.
- 2. I understand that I am limited to receiving one rebate voucher per address.
- 3. I understand that applications are processed in the order they are received. Rebates will be distributed on a first-come, first-served basis. Funding is limited; rebates are not guaranteed.
- 4. I understand the voucher must be redeemed within 60-days from the date of its issuance and work must be completed within 120-days. Voucher expiration date may be extended at the discretion of the District. No retroactive rebates are available.
- 5. I understand applications may only be accepted for devices located in Eastern Kern County (see Map on page 2 and Community List on page 3).
- 6. I understand the participating retailer that installs the new device is responsible for properly disposing and dismantling the old device.
- 7. I understand devices purchased with funds from this program must be professionally installed by a licensed installer and that there may be additional costs for installation including a local permit. Installations must comply with all local fire and building codes.
- 8. If I choose to replace a device with funds from this program, I will make a commitment to purchase a device from a participating retailer within the 60-day period and authorize the retailer to complete all required work, which may include obtaining permits and completing job cards.
- 9. I understand I must arrange and allow all post inspections to verify completed work with 45-days of completed installation. This includes providing entry onto my property and into my home.
- 10. I understand that I am responsible to pay the retailer any cost exceeding my voucher amount associated with the purchase price of my new certified device.
- 11. I understand that I will forfeit my voucher if I provide the District with false information or fail to obtain any required permit or if the required information is not submitted to the District prior to the expiration date listed on the voucher.
- 12. I understand the District does not warranty any device purchased under this voucher program, including, but not limited to, the quality or functionality of the device.
- 13. I understand that proper wood burning practices (e.g., burning only dry, seasoned wood) and proper stove installation and operation (e.g., maintaining a hot fire) are critical to the effectiveness of my new device
- 14. I agree to receive training on proper wood storage and wood burning practices (if applicable) and device operation and maintenance from the participating retailer or installer.
- 15. I understand that the District, CAPCOA, or the State of California may inspect all work and associated records with 30-day advanced notice.
- 16. I understand applications will be treated in accordance with Public Records Act requirements. Certain information, subject to those requirements, may be publicly disclosed.

| Applicant/Owner Name (Print): | |
|-------------------------------|--|
| Applicant/Owner Signature: | |
| Date: | |