Energy Profile Questionnaire
Home Energy Audit

General Information

1. What type of home do you have?
   ____ Single family detached
   ____ Townhouse/condominium (End Unit)
   ____ Townhouse/condominium (Non-End Unit)
   ____ Apartment/duplex (End Unit)
   ____ Apartment/duplex (Non-End Unit)
   ____ Manufactured/mobile home

2. What is the approximate square footage of your home? (*Do not include areas that are not heated or cooled, such as garages, attic areas, unfinished basements, etc.)*

   Less than 1000 sq. ft.
   1,000 – 1,499 sq. ft.
   1,500 – 1,999 sq. ft.
   2,000 – 2,499 sq. ft.
   2,500 – 2,999 sq. ft.
   3,000 – 3,499 sq. ft.
   3,500 – 3,999 sq. ft.
   4,000 – 5,000 sq. ft.
   Greater than 5,000 sq. ft.

3. How many floors/stories is your home? (Do not include areas that are not heated or cooled, such as garages, attic areas, unfinished basements, etc.)
   ____ 1 ____ 1.5
   ____ 2 ____ 2.5
   ____ 3

4. What is the average ceiling height in your home? *(If you have vaulted or "cathedral" ceilings, pick the category that best represents the average ceiling height.)*
   ____ Standard (8')
   ____ High (10')
   ____ Very High (12')

5. What year was your home built?
   ____ before 1950
   ____ 1950 – 1959
   ____ 1960 – 1969
   ____ 1970 – 1979
   ____ 1980 – 1989
   ____ 1980 – 1989
   ____ 1990 – 1994
   ____ after 1994

6. Including yourself, how many people live in the home on a full-time basis?
   _____ Adults (0-10)
   _____ Children(0-10)

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Structural Information

1. On what type of foundation is your home built? *(If more than one type, indicate approximate percent of each 25%, 50%, 75%, 100%) (The total must equal 100%.)*
   _____% Basement (*heated/cooled*)
   _____% Basement (*not heated/cooled*)
   _____% Crawlspace
   _____% Slab on grade

2. Are your floors insulated?
   ____Yes ____No ____Unknown

3. If you have a heated basement, are the basement walls insulated?
   ____Yes ____No ____Unknown

4. Are your exterior walls insulated?
   ____Yes ____No ____Unknown

5. How much insulation do you have in your attic or ceiling?
   ____ Poor (*0" to 3" of insulation*)
   ____ Fair (*more than 3" to 6" of insulation)*
   ____ Good (*more than 6" to 9" of insulation*)
   ____ Excellent (*more than 9" of insulation*)
   ____ Unknown

6. Please complete the following information about your windows and glass doors *(Do not count windows in areas like garages that are not heated or cooled.)*:

Size	Number	Type*
Small (*8-10 sq. ft.*)		
Medium (*11-15 sq. ft.*)		
Large (*16-20 sq. ft.*)		
X-large (*over 20 sq. ft.*)		
Sliding glass or French door		

   * Choices should include:
   1 - Single pane
   2 - Single pane with storm
   3 - Double pane
   4 - Tinted or Reflective Glass

7. How many exterior doors do you have? *(Do not count doors between unheated/uncooled areas and the outside, or glass doors entered in the section on windows.)* _____

8. What is the condition of the caulking and weather-stripping on your windows and exterior doors?
   ____ Poor
   ____ Average
   ____ Good

9. How would you describe your home in terms of air leakage/drafts?
   ____ Very leaky
   ____ Average
   ____ Very tight

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Home Heating

1. What type is your main heating system?
   ____ Electric furnace (or electric "strip heat")
   ____ Electric heat pump
   ____ Electric baseboard or wall heaters
   ____ Electric thermal storage system
   ____ Electric ceiling cable
   ____ Gas furnace (forced air)
   ____ Gas furnace (forced air) with pilot
   ____ Gas boiler (hot water/steam pipes)
   ____ Gas space heater (floor or wall units)
   ____ Gas heat pump
   ____ Propane/LP gas furnace
   ____ Propane/LP furnace with pilot
   ____ Propane/LP boiler (hot water/steam pipes)
   ____ Propane/LP space heater (floor/wall unit)
   ____ Oil Furnace
   ____ Oil Boiler (hot water/steam pipes)
   ____ Geothermal heat pump
   ____ Add-On Heat Pump with gas Furnace
   ____ Add-On Heat Pump with Oil Furnace
   ____ Other
   ____ None

2. What year was your main heating system installed?
   ____ before 1980
   ____ 1980 – 1984
   ____ 1984 – 1989
   ____ 1990 - 1994
   ____ 1995 or newer

3. If you have a system that uses ducts to distribute the heat, where are the majority of the ducts located?
   ____ Attic/Garage
   ____ Crawlspace/Unheated Basement
   ____ Heated Basement
   ____ Within the living space

4. If the ducts are not within the living space, are they insulated?
   ____Yes ____No

5. At what temperature do you normally set your thermostat for heating? _____

6. If you set your thermostat back at night or while out of the house, to what temperature do you set it back? _____
   On average, how many hours per day do you set back your thermostat?_____

7. Do you have a programmable or clock thermostat?
   ____Yes ____No

8. Percent of home heated by main heating system? _____

Energy Profile Questionnaire
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Home Heating - Secondary

9. What type is your secondary heating system?
____ Electric furnace (or electric "strip heat")
____ Electric heat pump)
____ Electric baseboard or wall heaters
____ Electric thermal storage system
____ Electric ceiling cable
____ Gas furnace (forced air)
____ Gas furnace (forced air) with pilot
____ Gas boiler (hot water/steam pipes
____ Gas space heater (floor or wall units)
____ Gas heat pump
____ Propane/LP gas furnace
____ Propane/LP furnace with pilot
____ Propane/LP boiler (hot water/steam pipes)
____ Propane/LP space heater (floor/wall unit)
____ Oil Furnace
____ Oil Boiler (hot water/steam pipes)
____ Geothermal heat pump
____ Add-On Heat Pump with gas Furnace
____ Add-On Heat Pump with Oil Furnace
____ Other
____ None

10. What year was your secondary heating system installed?
____ before 1980
____ 1980 – 1984
____ 1984 – 1989
____ 1990 - 1994
____ 1995 or newer

11. If you have a secondary system that uses ducts to distribute the heat, where are the majority of the ducts located?
____ Attic/Garage
____ Crawlspace/Unheated Basement
____ Heated Basement
____ Within the living space

12. If the ducts are not within the living space, are they insulated?
____Yes ____No

13. At what temperature do you normally set your secondary heating system thermostat for heating? _____

14. If you set your thermostat back at night or while out of the house, to what temperature do you set it back? _____
For how many hours a day on average? _____

15. Do your secondary heating system have a programmable or clock thermostat?
____Yes ____No

16. Estimate the percent of home heated by secondary heating system. _____

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Air Conditioning

1. What type is your main cooling system?
   ____ Central electric A/C
   ____ Electric Heat pump
   ____ Electric window or wall units
   ____ Gas heat pump
   ____ Central gas AC
   ____ Geothermal heat pump
   ____ Evaporative or “swamp” cooler
   ____ Other
   ____ None

2. What year was your main cooling system installed?
   ____ before 1980
   ____ 1980 – 1984
   ____ 1984 – 1989
   ____ 1990 - 1994
   ____ 1995 or newer

3. At what temperature do you normally set your thermostat for cooling? _____

4. If you set your thermostat up at night or while out of the house, to what temperature do you set it? _____
   How many hours per day set up? _____

5. Estimate the percent of home cooled by the main system ____

Secondary Cooling

6. What type is your secondary cooling system?
   ____ Central electric A/C
   ____ Electric Heat pump
   ____ Electric window or wall units
   ____ Gas heat pump
   ____ Central gas AC
   ____ geothermal heat pump
   ____ Evaporative or “swamp” cooler
   ____ Other
   ____ None

7. What year was your secondary cooling system installed?
   ____ before 1980
   ____ 1980 – 1984
   ____ 1984 – 1989
   ____ 1990 - 1994
   ____ 1995 or newer

8. At what temperature do you normally set your thermostat for cooling? _____

9. If you set your thermostat up at night or while out of the house, to what temperature do you set it? _____
   How many hours per day set up? _____

10. Estimate the percent of home cooled by the secondary cooling system _____

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Water Heating

1. Please complete the following information about your water heater(s):

	Water Heater #1	Water Heater #2
Type **		
Tank size (gallons) Small (< 30 gal.) Medium (30-49 gal.) Large (50-69 gal.) Xlarge (> 70 gal.)		
In heated/cooled area? (*Y/N*)		
Year installed: Before 1970 1970-1979 1980-1989 1990-1995 1996-later		
Thermostat setting (*Warm, hot, very hot*)		
High-efficiency or with insulation wrap installed? (*Y/N*)		

** Choices include *electric, gas, propane, fuel oil, heat pump, heat recovery, solar, other, and none.*

2. Approximately how many showers are taken each week in your home? _____

3. What is the average length of each shower? _____

4. How many baths are taken per week? _____

5. Do you have low-flow showerheads or have new showerheads been installed since 1996?
   ____Yes ____No ____Unknown

Refrigerators/Freezers

1. Please complete the following information on your refrigerators and any stand-alone freezers. (*Do not count the freezer compartment in your refrigerator*.)

	Refrigerator #1	Refrigerator #2	Freezer #1	Freezer #2
Size (*Small, medium, large*)				
Type ***U**pright* ***C**hest*	N/A	N/A	_____ U _____ C	_____ U _____ C
Defrost Type	_____ Manual _____ Frost-Free	_____ Manual _____ Frost-Free	_____ Manual _____ Automatic	_____ Manual _____ Automatic
Gasket condition (*Good, fair, poor*)				
Year manufactured *				

* Choices include: *Before 1979, 1980-1984, 1985-1989, 1990 and later*

Energy Profile Questionnaire
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Lighting

1. Please complete the following information about the lights in your home. Please note that when you are asked the 'Number of bulbs', don't forget to count each bulb in every fixture.

INDOOR LIGHTING		
Type of Lighting	**Number of bulbs**	**Hours per day**
Small incandescent* (< *40 Watts*)		
Medium incandescent (4*0 - 75 Watts*)		
Large incandescent (> *75 Watts*)		
Compact fluorescent		
Tube-type fluorescent		
Halogen Torche Bulbs		

* Incandescent lights are the standard “bulb” shaped lights used in most homes

OUTDOOR LIGHTING			
Type of Lighting	**Number of Bulbs**	**Control Type***	**Hours per day**
Outdoor security/flood lights - large (*Less than 150 Watts*)			
Outdoor security/flood lights - large (*More than 150 Watts*)			

* Options for control type are: Manually, Timer, Photocell, Motion sensor

Kitchen Appliances

1. Approximately how many loads per week do you run in your dishwasher? _____

2. Approximately how many times per week do you hand wash your dishes? _____

3. What type of energy does your range/oven use?
   ____ Electric
   ____ Gas with pilot light
   ____ Gas without pilot light
   _____ Propane with pilot
   _____ Propane without pilot
   ____ Other

4. Approximately how many burner-minutes per day do you use your range? _____
   (*Example: 2 burners for 15 minutes per day = 30 burner-minutes per day*)

5. Approximately how many hours per week do you use your oven? _____

6. Do you have a microwave oven?
   ____Yes
   ____No

7. If yes, then approximately how many minutes per day do you use your microwave? ____

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Laundry

1. What type of clothes washer do you own?
   ____ None
   ____ Top-Loading
   ____ Front-Loading

2. Approximately how many loads per **week** do you run in your clothes washer? _____

3. What water temperature do you usually wash your clothes in?
   ____ Cold
   ____ Warm
   ____ Hot

4. Does your clothes washer have a "low water" setting for small loads? _____

   If so, how many loads per week use this setting? _____

5. Approximately how many loads per **week** do you run in your clothes dryer? _____

6. What type of energy or fuel does your clothes dryer use?
   ____ Electric
   ____ Gas with pilot
   ____ Gas without pilot
   ____ Propane with pilot
   ____ Propane without pilot
   ____ None

Pools/Spas

1. Do you have a swimming pool with a filter?
   ____ Yes ____ No

2. What is the size of the filter pump?
   ____ Small
   ____ Medium
   ____ Large

3. If your pool is heated, what type of heater is it?
   ____ Electric ____Solar w/electric back-up
   ____ Electric Heat Pump ____Solar w/gas back-up
   ____ Gas ____Solar only
   ____ Propane

4. If heated by electric or gas, what size is the heater? (*Estimate based on size of pool*.)
   _____ (small, medium, large)

5. Approximately how many hours per week do you run the filter and heater in each season?

Season	Heater Hours/Week	Filter Hours/Week
Spring		
Summer		
Fall		
Winter		

5. Do you have a spa or hot tub?
____Yes ____No

7. If so, what type of heater does it have?
____ Electric
____ Gas
____ Propane or LP Gas

8. What size is the hot tub/spa heater?
____ Small
____ Medium
____ Large

**Help text explains Gas and Electric heater sizes

9. Approximately how many hours per week, on average, do you use your spa or hot tub?
_____

Waterbeds

1. How many heated waterbeds do you have of each size listed below?

____ Single/twin Typically covered? Y/N
____ Full/Queen/King Typically covered? Y/N

Small Appliances

1. Please indicate the number of each of the following appliances that are used on a regular basis.

____ Hair dryer
____ Ceiling fan
____ Toaster oven
____ Coffee maker
____ Iron
____ Answering machine
____ Misc. Other
____ Clock radio
____ Curling iron
____ Slow cooker
____ Electric fry pan
____ Vacuum Cleaners
____ Video games

2. If you use any of the following, indicate the average number of hours per week they are used:

____ Color TV
____ VCR/DVD
____ Well Pump
____ Aquarium
____ Dehumidifier
____ Drill Press
____ B&W TV
____ Stereo
____ Portable Space Heater
____ Humidifier
_____Power Saw

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Home Office

1. How many of each of the following equipment do you use in your home?
   ___Computers
   ___Printers
   ___ Scanners

2. On average, how many hours a week do you actively use your computer?
   _____

3. Do you leave your computer powered on when not in use? Y/N

4. **Scanner**
   How many pages per week do you scan? _____

   Do you leave your scanner on when not using it? Y/N

5. **Printer 1**
   Type of printer:
   - Inkjet small (6ppm)
   - Inkjet medium (12 ppm)
   - Inkjet large (17 ppm)
   - Laser jet small (12 ppm)
   - Laser jet medium (15 ppm)
   - Laser jet large (19ppm)
   - Multi-function small (5 ppm)
   - Multi-function medium (12 ppm)
   - Multi-function large (19 ppm)

   On average, how many Pages do you output per week? _____

   Do you leave your printer on? Y/N

6. **Printer 2**
   Type of printer:
   - Inkjet small (6 ppm)
   - Inkjet medium (12 ppm)
   - Inkjet large (17 ppm)
   - Laser jet small (12 ppm)
   - Laser jet medium (15 ppm)
   - Laser jet large (19ppm)
   - Multi-function small (5 ppm)
   - Multi-function medium (12 ppm)
   - Multi-function large (19 ppm)

   On average, how many pages do you output per week? _____

   Do you leave your printer on? Y/N

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Seasonal or Extra Energy Items

1. Please provide the following information on any other significant energy-using appliances or equipment not previously addressed in this questionnaire.

Fuel Type *(Gas, electric)*	**Units** (*kW, HP, BTU/hr*)	**Size**	**Hours/week**	**Season(s)***

*Choices include: *Winter, spring, summer, fall, winter & fall, spring & summer, all year*