

## **LiveSmart BC Contractor Accreditation Form**

Home Owner's Name:	Live	Smart File I.D. #
Address:		
subject line, and leave a copy of post-retrofit assessment. This f	f the form with the homeowner to b	gov.bc.ca with "LSCA Form" in the be checked by the energy advisor at the to be eligible for the LiveSmart BC oxes on the following system
☐ Air Source Heat Pump	Model numbers, outdoor, indoor, air handler/furnace	
AHRI Number		
☐ High Efficiency Furnace ┌	Model numbers	
AHRI Number		
<b>Equipment Sizing</b>	g Equipment selected meets sizing requirements	
<b>ENERGYSTAR Equipment</b> Equipment installed meets ENERGY STAR criteria		
Ducting Inspected		
High Efficiency Boiler	AHRI Number	
Ducting/Piping Inspected ☐ Duct/piping system meets system requirements   ENERGYSTAR Equipment ☐ Equipment installed meets ENERGY STAR criteria		
HRV Model Number		
Equipment Sizing Required for HRV Installations		
ENERGYSTAR Equipment		
been designed and installed to TE		above mentioned. I confirm that it has STTBC standards and understand that the se standards.
Date:	(Date)	
Installer Name:		
	(print)	(signature)
Certified Person (if different):		
_	(name)	(signature)
Current TECA, HRAI or ASTTBC #	(accreditation)	(accreditation expiry date)
	(accrealiation)	(accreanation expiry date)