

Be E³ Smart

2016-17 FAMILY INSTALLATION SURVEY

Ohio's Electric Cooperatives

Please complete the installation survey with your family. Fill it out to the best of your ability. Your answers will be part of statewide data collection. No individual student's results will be tied back to the student or family.

LIGHTING								
1) How many 9 WATT LEDs did you ins	tall?		One	□Two		None		
2) When installing the 9 WATT LED(s), what bulb(s) did you replace? (IL = incandescent light bulb)								
40 W IL □ One □ Two	60 W IL	□ One	□Two	75 W IL	□ One	□Two		
100 W IL □ One □ Two	CFL	□ One	□Two	Other	□ One	Two		
3) Did you install the LED NIGHTLIGHT	?		Yes	□No				
4) Did you purchase additional LED's?			Yes	□No				
If YES, how many did you purchase?			1 - 3	□ 4 - 6		7 - 9	☐ 10 or more	
INSULATION								
1) Did you install the WEATHER STRIPE	PING?		Yes	□No				
2) Did you install the DOOR SWEEP?			Yes	□No				
3) How many DRAFT STOPPERS did yo	u install?		1-3 4-	-6 🗆 7 -9	9 🗆 10 (or more	□ None	
HVAC								
1) What type of PRIMARY HEATING SY	STEM doe	s your h	ome use?	☐ Gas fur	nace	☐ Electric f	urnace	
☐ Air source heat pump	□ Baseb	oard/In-	-wall unit	☐ Other		□ Don't kn	ow	
2) During the HEATING season, did you	ı check th	e therm	ostat setting	in your ho	me? 🗆 Y	'es	□No	
If YES, did you (or will you) decrease				r home?				
\Box No, our thermostat is already at the recommended setting of $68^{\circ}F$								
\square No, other reason								
If YES, by how much did you (or wild \Box 1-2° F \Box 3-4°	•		e setting?	<u>!</u>				

4)	What type of PRIMARY COOLING SYSTEM does your home use? □ Central AC □ Window AC							
	☐ Air source heat pump ☐ Other ☐ Don't know ☐ None							
5)	During the COOLING season, did you check the thermostat setting in your home? ☐ Yes ☐ No							
6)	i) If YES, did you (or will you) increase the thermostat setting in your home? □ Yes, we increased (or will increase) the setting							
	☐ No, our thermostat is already at the recommended setting of 78°F							
	□ No, other reason							
	If YES, by how much did you (or will you) increase the setting? $ \Box \ 1\text{-}2^{\circ} \ F \qquad \Box \ 3\text{-}4^{\circ} \ F \qquad \Box \ 5^{\circ} \ F \ or \ more $							
W	ATER							
1)	What type of water heater does your home use? ☐ Natural Gas ☐ Electric ☐ Other							
2)	Did you (or will you) check the hot water temperature in your home?							
	\square Yes, we lowered (or will lower) the setting							
	\Box No, it is already at the recommended setting of 120°F							
	☐ No, other reason							
RE	FRIGERATOR/FREEZER							
1)	Did you adjust the setting on your REFRIGERATOR to the recommended setting (34-40°F)?							
	□ Yes							
	\square No, it is already at the recommended setting							
	☐ No, other reason							
2)	Did you adjust the setting on your FREEZER to the recommended setting (0-5°F)?							
	□ Yes							
	\square No, it is already at the recommended setting							
	□ No, other reason							
CC	NCLUSION							
1)	How many people live in your home?							
	□ 2 □ 3 □ 4 □ 5 □ 6+							
2)	Is your home a single-family building? (This means your walls don't touch another building.)							
	□ Yes □ No							