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Appendix A – Business Lighting Measure Savings Summary

A-1

Total Units by Measure

Sum of QtyReplaced	
Description	Total
CEILING-MOUNT OCCUPANCY SENSOR	31
CFL <13W	290
CFL >23W	343
CFL 13 to 23W	1,705
LED EXIT SIGN	75
PULSESTART HALIDE FXT 320-749W	195
T5 HO LAMPS 4FT OR LESS 4-LAMP	36
T5 LAMPS	140
T8 4FT 28W OR LESS	9,366
T8 4FT OR LESS - 1 TO 4-LAMP	13,896
T8 5 TO 8FT OR LESS 1 & 2 LAMP	1,371
T8 HO LAMPS 4FT OR LESS 6&8LMP	860
WALL-MOUNTED OCCUPANCY SENSOR	92
Grand Total	28,400

A-2

Total Rebate and Total Cost by Measure

Description	Data	Total
CEILING-MOUNT OCCUPANCY SENSOR	Sum of Amount Tendered	\$ 1,038
	Sum of Total Rebate	\$ 576
CFL <13W	Sum of Amount Tendered	\$ 3,410
	Sum of Total Rebate	\$ 508
CFL >23W	Sum of Amount Tendered	\$ 1,853
	Sum of Total Rebate	\$ 600
CFL 13 to 23W	Sum of Amount Tendered	\$ 7,109
	Sum of Total Rebate	\$ 2,891
LED EXIT SIGN	Sum of Amount Tendered	\$ 1,278
	Sum of Total Rebate	\$ 450
PULSESTART HALIDE FXT 320-749W	Sum of Amount Tendered	\$ 56,276
	Sum of Total Rebate	\$ 10,725
T5 HO LAMPS 4FT OR LESS 4-LAMP	Sum of Amount Tendered	\$ 13,115
	Sum of Total Rebate	\$ 8,283
T5 LAMPS	Sum of Amount Tendered	\$ 1,786
	Sum of Total Rebate	\$ 1,120
T8 4FT 28W OR LESS	Sum of Amount Tendered	\$ 49,605
	Sum of Total Rebate	\$ 4,833
T8 4FT OR LESS - 1 TO 4-LAMP	Sum of Amount Tendered	\$ 65,291
	Sum of Total Rebate	\$ 36,198
T8 5 TO 8FT OR LESS 1 & 2 LAMP	Sum of Amount Tendered	\$ 7,976
	Sum of Total Rebate	\$ 6,775
T8 HO LAMPS 4FT OR LESS 6&8LMP	Sum of Amount Tendered	\$ 108,512
	Sum of Total Rebate	\$ 61,455
WALL-MOUNTED OCCUPANCY SENSOR	Sum of Amount Tendered	\$ 4,192
	Sum of Total Rebate	\$ 1,248
Total Sum of Amount Tendered		\$ 321,441
Total Sum of Total Rebate		\$ 135,661

A-3

Total Tracking and ex-post Gross Net Energy Savings by Measure

Description	Data	Total
CEILING-MOUNT OCCUPANCY SENSOR	Sum of Tracked kWh	22,299
	Sum of ex-Post Gross kWh	15,865
	Sum of ex-post Net kWh	13,451
CFL <13W	Sum of Tracked kWh	53,007
	Sum of ex-Post Gross kWh	37,714
	Sum of ex-post Net kWh	31,976
CFL >23W	Sum of Tracked kWh	89,151
	Sum of ex-Post Gross kWh	63,431
	Sum of ex-post Net kWh	53,779
CFL 13 to 23W	Sum of Tracked kWh	471,910
	Sum of ex-Post Gross kWh	335,764
	Sum of ex-post Net kWh	284,675
LED EXIT SIGN	Sum of Tracked kWh	38,544
	Sum of ex-Post Gross kWh	27,424
	Sum of ex-post Net kWh	23,251
PULSESTART HALIDE FXT 320-749W	Sum of Tracked kWh	98,668
	Sum of ex-Post Gross kWh	70,203
	Sum of ex-post Net kWh	59,521
T5 HO LAMPS 4FT OR LESS 4-LAMP	Sum of Tracked kWh	12,036
	Sum of ex-Post Gross kWh	8,564
	Sum of ex-post Net kWh	7,261
T5 LAMPS	Sum of Tracked kWh	156,979
	Sum of ex-Post Gross kWh	111,691
	Sum of ex-post Net kWh	94,696
T8 4FT 28W OR LESS	Sum of Tracked kWh	515,287
	Sum of ex-Post Gross kWh	366,627
	Sum of ex-post Net kWh	310,842
T8 4FT OR LESS - 1 TO 4-LAMP	Sum of Tracked kWh	784,241
	Sum of ex-Post Gross kWh	557,989
	Sum of ex-post Net kWh	473,086
T8 5 TO 8FT OR LESS 1 & 2 LAMP	Sum of Tracked kWh	47,300
	Sum of ex-Post Gross kWh	33,654
	Sum of ex-post Net kWh	28,533
T8 HO LAMPS 4FT OR LESS 6&8LMP	Sum of Tracked kWh	1,162,037
	Sum of ex-Post Gross kWh	826,791
	Sum of ex-post Net kWh	700,988
WALL-MOUNTED OCCUPANCY SENSOR	Sum of Tracked kWh	8,498
	Sum of ex-Post Gross kWh	6,046
	Sum of ex-post Net kWh	5,126
Total Sum of Tracked kWh		3,459,956
Total Sum of ex-Post Gross kWh		2,461,763
Total Sum of ex-post Net kWh		2,087,185



Appendix B – Telephone Survey Instruments

Appliance Recycling Program

REFR1:

Refrigeration description from sample

REFR2:

Refrigeration description from sample

FREZ:

freezer description from sample

TYPE:

TYPE FOR WORDING

1 refrigerator.....	1
1 freezer.....	2
1 refrigerator and 1 freezer.....	3
2 refrigerators.....	4

LOCAL:

Address from tracking data

INTRO:

May I please speak with<CONT1>? ALTERNATE: <CONT2>
INTRODUCTION: Hello, my name is _____ calling on behalf of PNM, your local electric utility. We are contacting customers who had refrigerators or freezers removed through a recycling program. Are you the person who would have been involved and most familiar with having a refrigerator or freezer picked up sometime during the last year and a half? IF NO: Then may I please speak to the person who would know the most about the removal? RIGHT PERSON: We are conducting a study to evaluate the local appliance pick up and recycling program and would like to include your opinions. Is now a good time to ask you some questions? IF NEEDED: It may take approximately 10-15 minutes IF NEEDED: I'm calling from _____, an independent research firm, who has been contracted to conduct the study.

INT02:

First, let me verify that <type> was removed sometime last year. Is this correct? IF NEEDED: During the last year and half.

- Yes, information is correct1
- NO (RECORD REASON)2 => TERM
- Don't know/Not sure/Can't remember3 => TERM
- Refused.....4 => TERM

INT04:

Records indicate the address from which <IT/THEY><WAS/WERE> removed was... <LOCAL>. Is this correct?

- Yes, appliance picked up from that address91
- 61 - Appliance picked up, but address wrong - THANK AND TERMINATE61 => TERM
- 64 - Don't know/Not sure/Can't remember - THANK AND TERMINATE64 => TERM
- 65 - Refused - THANK AND TERMINATE.....65 => TERM

INT05:

At the time, was that address. . . IF BUSINESS: Was it also a residence, or a business alone?

- Your primary residence01
- A second home02
- A property that's rented out03
- Or something else? (SPECIFY:).....97
- Don't know/Not sure/Can't remember - THANK AND TERMINATE.74 => TERM
- Refused - THANK AND TERMINATE75 => TERM
- Business only - THANK AND TERMINATE76 => TERM
- Business and residence04

BEGN1:

IF TYPE=1-2

Now I'm going to ask you some specific questions about the appliance that was picked up. The information says <TYPE>, described as a ... <refr1><frez> was removed.

BEGN2:

IF TYPE=3

Now I'm going to ask you some specific questions about the appliances that were picked up. The information says a refrigerator, described as... <refr1> and a freezer, described as... <frez> was removed. First, thinking about the <refr1> refrigerator...

BEGN3:

IF TYPE=4

Now I'm going to ask you some specific questions about the appliances that were picked up. The information says two refrigerators were removed, one described as... <refr1> and a second described as...

<refr2>. You will be asked the same set of questions for each unit. We will be asking you about a refrigerator or refrigerators you might have acquired at about the same time. If you only acquired one refrigerator to replace the two recycled units, then only discuss the replacement refrigerator in only one of the question sequences.

First, thinking about the <refr1> refrigerator...

REPEAT SECTION A FOR SECOND REFRIGERATORS (ie. A1_1 and A1_2, or otherwise indexed).

Second, thinking about the <refr2> refrigerator...

A1:

=> Z1 IF TYPE=2

During the time just before you decided to have it removed, was it being used as the main refrigerator, or was it a spare?

Main	1	=> A4
Spare	2	
Don't know	8	=> A4
Refused	9	=> A4

A2:

Approximately how long had you used it as a spare? PROBE FOR NUMERIC AGE/TIME RESPONSE. USE MONTHS FOR PARTIAL YEARS. MUST NOT BE GREATER THAN <A1>

Months (0-11) _____		
Years (0-50) _____		
Don't know/Not sure/Can't remember	98	=> A4
Refused	99	=> A4

A3A:

=> +1 IF years>=1

How many of those months was it plugged in and running? PROBE FOR NUMERIC AGE/TIME RESPONSE. MUST NOT BE GREATER THAN <A2B>

Months		=> A4
Don't know/Not sure/Can't remember	98	=> A4
Refused	99	=> A4

A3B:

Thinking about the last 12 months prior to scheduling the pick-up, how many of those months was it plugged in and running?

Months (1-12) _____		
Don't know - DO NOT READ	98	
Refused - DO NOT READ	99	

A6B:

How much did you pay for this used refrigerator?

Free/ Nothing/ Didn't Pay	0
Dollars (1-3000) _____	1
Don't know	98
Refused.....	99

A6D:

Does it have a . . .

Single door, with freezer compartment inside, or a.....	01
2 door, side by side.....	02
a Top freezer.....	03
or a Bottom freezer?	04
Other (SPECIFY:) - DO NOT READ	96
Don't know - DO NOT READ	98
Refused - DO NOT READ	99

A6E:

Is it frost free or manual defrost?

Frost free	01
Manual defrost.....	02
Other (SPECIFY:).....	03
Don't know	98
Refused.....	99

A6F:

How old is the replacement refrigerator?

=> +1 IF NOT A6=2

RECORD YEARS _____	
Don't know	98
Refused.....	99

A6G:

What size is it in cubic feet? IF NEEDED: Your best estimate is fine. IF NEEDED: A typical small, full-sized unit is 18 square feet, medium 20-22 square feet and large 24 square feet and up.

RECORD Cubic feet (8-26) _____	
Other EXPLAIN _____	
Don't know	98
Refused.....	99

A8:

If the recycling program had not picked up the refrigerator when it did, would you have still gotten rid of it, or would you have kept it?

Gotten rid of it	1	=> A9F
Kept it	2	
Don't know	8	=> A9F
Refused	9	=> A9F

A9A:

Would it have been stored unplugged, or used as a spare?

Stored unplugged	1
Use it as a spare	2
Both-store it and use it	3
No/Would not keep	4
Don't know	8
Refused	9

A9B:

At the time of the pick-up, how old was the <REFR1> you recycled? IF UNSURE, PROBE TO FIT

Years (1-50) _____	
Don't know/Not sure/Can't remember	98
Refused	99

A9C:

How much money do you think it cost, each month, to run the refrigerator that was picked-up?

Nothing	1
\$1 to \$5 per month	2
\$6 to \$10	3
\$11 to \$15	4
\$16 to \$20	5
More than \$20	6
Don't pay electric bill	7
Don't know	8
Refused	9



Z1:

During the time just before you decided to have it removed, was the freezer plugged in and running?

- Yes.....1 => Z4
- No.....2
- Don't know8 => Z4
- Refused.....9 => Z4

Z2:

How long had you had the freezer? PROBE FOR NUMERIC AGE/TIME RESPONSE. USE MONTHS FOR PARTIAL YEARS. MUST NOT BE GREATER THAN <A1>

- Months (0-11) _____
- Years (0-50) _____
- Don't know/Not sure/Can't remember98 => Z4
- Refused.....99 => Z4

Z3A:

=> +1 IF Z3_years>=1

How many of those months was it plugged in and running? PROBE FOR NUMERIC AGE/TIME RESPONSE. MUST NOT BE GREATER THAN <A2B>

- Months => Z4
- Don't know/Not sure/Can't remember98 => Z4
- Refused.....99 => Z4

Z3B:

Thinking about the last 12 months prior to scheduling the pick-up, how many of those months was it plugged in and running?

- Months (1-12) _____
- Don't know - DO NOT READ98
- Refused - DO NOT READ99

Z4:

Did you get another freezer during the year prior to recycling this unit?

- Yes.....1 => Z6
- No.....2
- Don't know8 => Z7
- Refused.....9 => Z7

Z5:

Did you get another freezer some time after the time you recycled this unit?

- Yes.....1
- No.....2 => Z7
- Don't know8 => Z7
- Refused.....9 => Z7



Z5B:

How many months after the old one was picked-up did you get another freezer? (LESS THAN ONE MONTH = 1)

RECORD MONTHS _____	.....
Don't know	..... 98
Refused	..... 99

Z6:

Now we are going to ask some questions about this freezer you acquired. When you acquired the freezer, was it a new or used freezer?

New	..... 1	=> Z6D
Used	..... 2	
Don't know	..... 8	=> Z6D
Refused	..... 9	=> Z6D

Z6A:

You indicated that the freezer you acquired was actually a previously used one. Where did you get it? (PROBE IF NEEDED: Did you purchase it or was it given to you?)

Bought it from a friend or relative	..... 1
Bought it from a used appliance dealer	..... 2
Bought it at garage sale, estate sale, or from a newspaper ad	..... 3
Given to me by a friend/neighbor/person	..... 4
Previous occupant of this left it behind	..... 5
Given to me by an organization	..... 6
(DO NOT READ) Other (SPECIFY: __)	..... 7
(DO NOT READ) Don't know	..... 8
(DO NOT READ) Refused	..... 9

Z6B:

How much did you pay for this used freezer?

Free/ Nothing/ Didn't Pay	..... 0
Dollars (1-3000)	..... 1
Don't know	..... 98
Refused	..... 99

Z6D:

Is it a . . .

Upright freezer	..... 01
Chest freezer	..... 02
Other (SPECIFY:) - DO NOT READ	..... 96
Don't know - DO NOT READ	..... 98
Refused - DO NOT READ	..... 99

Z6E:

Is it frost free or manual defrost?

Frost free	01
Manual defrost.....	02
Other (SPECIFY:)	03
Don't know	98
Refused.....	99

Z6F:

How old is the freezer?

=> +1 IF NOT Z6=2

RECORD YEARS	
Don't know	98
Refused.....	99

Z6G:

What size is it in cubic feet? IF NEEDED: Your best estimate is fine. IF NEEDED: A typical small, full-sized unit is 12-14 square feet, medium 16-18 square feet and large 20 square feet and up.

RECORD Cubic feet (8-26)	
Other EXPLAIN	
Don't know	98
Refused.....	99

Z6H:

Did you recycle your previous freezer because you had acquired or intended to acquire the freezer we've been discussing?

Yes.....	1	=> Z7
No.....	2	
Don't know	8	=> Z7
Refused.....	9	=> Z7

Z6I:

Did you get another freezer because you missed having a freezer?

Yes.....	1
No.....	2
Don't know	8
Refused.....	9

Z6J:

=> +1 IF NOT Z6=2

At the time that you acquired this used freezer, if this specific freezer had not been available, which of the following would you most likely have done... (READ)
(ONE ANSWER)

- Bought a similar used freezer somewhere else 1
- Not purchased a freezer at that time 2
- Purchased a lower quality or less expensive used freezer. 3
- Purchased a higher quality or more expensive used freezer 4
- Purchased a new freezer 5
- Repaired an old, non-working freezer..... 6
- Other (SPECIFY) 7
- Don't know 8
- Refused 9

Z7:

Now, thinking again about the freezer you recycled, before hearing about this recycling program, had you already considered discarding the freezer? By discard we mean selling the unit, giving it away, having someone pick it up, or taking it to the dump or a recycling center.

- Yes..... 1
- No 2
- Don't know 8
- Refused 9

Z8:

If the recycling program had not picked up the freezer when it did, would you have still gotten rid of it, or would you have kept it?

- Gotten rid of it 1 => Z9B
- Kept it 2
- Don't know 8 => Z9B
- Refused 9 => Z9B

Z9A:

Would it have been stored unplugged, plugged in and running or both?

- Stored unplugged 1
- Plugged in and running..... 2
- Both-Used some of the time 3
- No/Would not keep 4
- Don't know 8
- Refused 9

Z9B:

At the time of the pick-up, how old was the <FREEZ> you recycled?

Years (1-50) _____	
Don't know/Not sure/Can't remember	98
Refused.....	99

Z9C:

How much money do you think it cost, each month, to run the freezer that was picked-up?

Nothing.....	1
\$1 to \$5 per month.....	2
\$6 to \$10.....	3
\$11 to \$15.....	4
\$16 to \$20.....	5
More than \$20	6
Don't pay electric bill	7
Don't know	8
Refused.....	9

C1:

I am now going to read a list of alternative ways that you could have disposed of <this appliance><these appliances>. For each, tell me if this is a method you had considered using or doing. (PROGRAMMER: ITEMS E AND F ONLY IF A2 = 01 OR 02. RANDOMIZE a-i, j and k ALWAYS LAST.)

- a. Sell it to a private party, either by running an ad or to someone you know
- b. Sell it to a used appliance dealer
- c. Give it away to a private party, such as a friend, relative, or neighbor
- d. Give it away to a charity organization, such as Goodwill Industries or a church
- e. Have it removed by the dealer you got your new or replacement appliance from
- f. Trade it in for the new appliance or replacement appliance
- g. Haul it to the dump yourself
- h. Haul it to a recycling center yourself
- i. Hire someone else haul it away for junking or dumping
- j. Keep it
- k. Or something else I've not mentioned

FOR EACH:

Yes – considered using/doing.....	7
No – did not consider or did not know about	8
Don't know	98
Refused.....	99

C2:

Now suppose that the recycling program that you used to dispose of this appliance had not been available, which one of these other alternatives that we've just discussed would you have been most likely to do? (DO NOT READ) IF NEEDED: Your best estimate is okay.

- a. Sell it to a private party, either by running an ad or to someone you know..... 1
- b. Sell it to a used appliance dealer 2
- c. Give it away to a private party, such as a friend, relative, or neighbor..... 3
- d. Give it away to a charity organization, such as Goodwill Industries or a church 4
- e. Have it removed by the dealer you got your new or replacement appliance from..... 5
- f. Trade it in for the new appliance or replacement appliance 6
- g. Haul it to the dump yourself..... 7
- h. Haul it to a recycling center yourself..... 8
- i. Hire someone else haul it away for junking or dumping 9
- j. Keep it 10
- k. Or something else I've not mentioned..... 11
- l. Some Other Way (SPECIFY: ___)..... 12
- (DO NOT READ) Don't know 98
- (DO NOT READ) Refused 99

C3:

Which alternative would have been your second choice?

- a. Sell it to a private party, either by running an ad or to someone you know..... 1
- b. Sell it to a used appliance dealer 2
- c. Give it away to a private party, such as a friend, relative, or neighbor..... 3
- d. Give it away to a charity organization, such as Goodwill Industries or a church 4
- e. Have it removed by the dealer you got your new or replacement appliance from..... 5
- f. Trade it in for the new appliance or replacement appliance 6
- g. Haul it to the dump yourself..... 7
- h. Haul it to a recycling center yourself..... 8
- i. Hire someone else haul it away for junking or dumping 9
- j. Keep it 10
- k. Or something else I've not mentioned..... 11
- l. Some Other Way (SPECIFY: ___)..... 12
- (DO NOT READ) Don't know 98
- (DO NOT READ) Refused 99

C4:

If you had sold this appliance to someone, how much money do you think you would have received for it?

- DOLLARS ____ (\$1 - \$2000) 01 1
- Don't know 98
- Refused..... 99

C5:

If an appliance dealer were to have taken it away, how much, if anything, do you think you would have had to pay for this service?

Nothing / Free Service	0
DOLLARS ____ (\$1 - \$2000).....	1
Don't know	98
Refused.....	99

I1A:

Did you receive any incentive? IF YES: What did you receive?

Yes, \$30 rebate check for one unit	1
Yes, \$60 rebate check for two units	2
No, did not receive incentive.....	3
Other SPECIFY	4
Don't know/Not sure/Can't remember	98
Refused.....	99

I3:

Approximately how many weeks did it take from the time of the pick-up until you received your incentive?

=> E1 IF NOT =1-3

1 week or less	01	
Got it at time of the pick-up	00	=> I4A
Don't know	98	=> I4A
Refused.....	99	=> I4A

I4:

Do you think this was too long?

Yes.....	1
No.....	2
Don't know	8
Refused.....	9

I4A:

Did you know about the incentive prior to scheduling the pick-up?

Yes.....	1	
No.....	2	=> E1
Don't know	3	=> E1
Refused.....	4	=> E1

I4B:

If the incentive had not been offered, would you have still used this service to remove the <APPLIANCE(S)>?

Yes.....	1
No.....	2
Don't know	3
Refused.....	4

E1:

Now I am going to ask you a few questions about each of the steps you may have gone through in order to get the <appliance(s)> removed. The first step should have been to simply "sign up" for the service. This may have been referred to as the enrollment, or "Pre-Qualifying" process. This is when you would have given your personal and account information as well as specific details about the <appliance(s)> you wanted removed. This also determined that you were qualified to use this service. Did you yourself complete this step? IF YES: Did you do this on-line, or by telephone?

Yes, Telephone.....	01	
Yes, Online.....	02	
Yes, Other (SPECIFY):.....	03	
No, Did not do/Someone else completed	04	=> S1
Don't know	98	=> S1
Refused.....	99	=> S1

E2:

How satisfied were you with this "sign-up" experience? Use a 5-point scale where "5" means "completely satisfied" and "1" means "not at all satisfied".

Not at all satisfied.....	1
2.....	2
3.....	3
4.....	4
Completely satisfied	5
Don't know	8
Refused.....	9

S1:

The next step would have been to choose a specific date for the pick-up. Did you, yourself, choose and schedule the date?

Yes.....	1	
No.....	2	=> S3
Don't know/Not sure/Can't remember	8	=> S3
Refused.....	9	=> S3

S2:

How satisfied were you with the experience of choosing and scheduling a specific date for the pick-up? Use a 5-point scale where "5" means "completely satisfied" and "1" means "not satisfied at all"

Not at all satisfied.....	1
2.....	2
3.....	3
4.....	4
Completely satisfied.....	5
Don't know.....	8
Refused.....	9

S3:

The next step would have been the actual pick-up and removal of the <APPLIANCE(S)>. Were you present at the time of the pick-up?

Yes.....	1	
No.....	2	=> O5
Don't know/Not sure/Can't remember.....	8	=> O5
Refused.....	9	=> O5

S4:

How satisfied were you with the actual pick-up and removal experience? Use a 5-point scale where "5" means "completely satisfied" and "1" means "not satisfied at all"

Not at all satisfied.....	1
2.....	2
3.....	3
4.....	4
Completely satisfied.....	5
Don't know.....	8
Refused.....	9

O5:

Thinking about your experiences throughout the whole process, How satisfied were you with the service OVERALL? Use a 5 point scale where "5" means you were "completely satisfied" and "1" means you were "not at all satisfied".

Not at all satisfied.....	1
2.....	2
3.....	3
4.....	4
Completely satisfied.....	5
Don't know.....	8
Refused.....	9

S6:

What specific experiences or aspects of this service did you particularly like?

RECORD COMMENTS	01
None of it/Didn't like any of it.....	00
Truck driver was on time.....	02
Pick up process was efficient.....	03
Truck driver was friendly and polite	04
Truck driver was knowledgeable about the specific of the pick-up	05
Good Customer Service/Easy to schedule	07
Hassle free/Easy pick up	08
Convenience of the Service	09
That I didn't have to deal with hauling or disposing of it	10
Quick/Prompt/Fast.....	11
They did the heavy work/lifting/moving it.....	12
No fee to move my refrigerator	13
Getting paid to get rid of something you wanted to dispose of already.....	14
Free pick up.....	15
That I got thirty-five dollars for my old refrigerator	16
Like the rebate/incentive/money	17
Like recycle program instead of dumping/helps the environment.....	18
Availability of the Program	19
Enjoy all the Services	20
Don't know/Not sure.....	98
Refused.....	99

S7:

What specific experiences or aspects of this service were you dissatisfied with?

RECORD COMMENTS	01
None of it/Was satisfied with all	00
Pick up did not take place at the scheduled time	02
Required too long of a wait time	03
Required multiple call-backs to reschedule.....	04
Truck driver was not polite.....	05
Truck driver was not knowledgeable about the specifics of the pick up.....	06
Customer Service/poor/not friendly	07
Someone had to be home or no pickup.....	08
Had to leave it outside for pick up.....	09
Couldn't pick your date or time for pick up.....	10
Had to be working/plugged in before they would pick it up	11
Refund wasn't as much as I was told/false advertising.....	12
Ran out of funds so had to take bulbs /but didn't want the bulbs/ won't use them.....	13
Sent wrong incentives/got bulbs instead of check	14
Haven't received rebate/money/bulbs yet	15
Having to wait along time for money/bulbs to come.....	16
Other (SPECIFY:)	97
Don't know	98
Refused.....	99

M1:

How did you FIRST learn about this service?		
Newspaper advertisement.....	01	
TV advertisement	02	
Radio advertisement	03	
Utility website	04	
Utility bill insert/information with utility bill.....	05	
Separate mailing.....	06	
Toll-free 800 telephone number/Call the Utility Co.....	07	
Media stories about the program	08	
From a friend, relative or neighbor.....	09	
Appliance retailer	10	
Worked for Them/Dealt with them/Experience.....	11	
News flyer/flyer.....	12	
Online (non-utility website)	13	
Somewhere else (SPECIFY:)	97	
Don't know	98	=> Y1
Refused.....	99	=> Y1

M2:

Have you heard about this service through any other sources? IF YES: Where else?

No/None/No other sources	00
Newspaper advertisement.....	01
TV advertisement	02
Radio advertisement	03
Utility website	04
Utility bill insert/information with utility bill.....	05
Separate mailing.....	06
Toll-free 800 telephone number/Called the Utility Co.....	07
Media stories about the program	08
From a friend, relative or neighbor.....	09
Appliance retailer	10
Worked for them/Dealt with them/Experience.....	11
News flyer/flyer.....	12
Online (non-utility website)	13
RECORD OTHER	97
Don't know	98
Refused.....	99

Y1:

There are a number of ways to get rid of unwanted appliances. What is the MAIN reason you chose this service over other methods? IF MULTIPLE: Of those which is the main reason?

RECORD COMMENTS	01	
Save money on electric bill	02	
\$30 cash or free compact fluorescent lamps.....	03	
Spare refrigerator/freezer unnecessary	04	
Free pick-up service	05	
Environmentally safe disposal.....	06	
Needed to upgrade or replace existing refrigerator or freezer	07	
Improve the environment	08	
Recommendation of a friend/relative	09	
Recommendation of retailer/dealer	10	
<utility>sponsorship of the program	11	
Easy way/convenient.....	13	
No lifting or moving of it/Don't have to take it to the place/dump.....	14	
Others do not pick up/I would have to take it myself to the place.....	15	
Best way to make use of it/Don't want to throw it away	16	
Because they are recycled (Gen.)	17	
Would have to pay for another method of disposal.....	18	
Never heard of any others/only one I know of	19	
Other (SPECIFY:).....	12	
Don't know	98	=> 15
Refused.....	99	=> 15

Y2:

Where there any other reasons? IF YES: What were they?

No/None/No other reasons	00
RECORD COMMENTS	01
Save money on electric bill	02
\$35 cash or free compact fluorescent lamps.....	03
Spare refrigerator/freezer unnecessary	04
Convenience of free pick-up service	05
Environmentally safe disposal.....	06
Needed to upgrade or replace existing refrigerator or freezer	07
Improve the environment	08
Recommendation of a friend/relative	09
Recommendation of retailer/dealer	10
<utility>sponsorship of the program	11
Easy way/convenient.....	13
No lifting or moving of it/Don't have to the place/dump.....	14
Others do not pick up/I would have to take it myself to the place.....	15
Best way to make use of it/Don't want to throw it away	16
Because they are recycled (Gen.)	17
Would have to pay for another method of disposal.....	18
Never heard of any others/only one I know of	19
Don't know	98
Refused.....	99
.....	

M3:

Using a 5-point scale where "5" means "Very Effective" and "1" means "Not at all Effective", how would you rate the program's efforts at making you aware of what the program had to offer?

Not at all effective	1
2.....	2
3.....	3
4.....	4
Very effective	5
Don't know	8
Refused.....	9

Y4:

Using a 5-point scale where "5" means "Very Valuable" and "1" means "Not at all Valuable", how would you rate the program's value?

Not at all valuable.....	1
2.....	2
3.....	3
4.....	4
Very valuable	5
Don't know	6
Refused.....	7

D1:

My last few questions are for statistical purposes only. Including yourself and children, how many people live in your household at least six months of the year?

One/Just myself/Live alone	01
REFUSED	99

D2:

What is your age?

Refused.....	99
--------------	----

D2A:

Are you . . .

=> +1 IF NOT D2=99

18-25.....	1
26-35.....	2
36-45.....	3
46-55.....	4
56-65.....	5
65 or older?.....	6
Refused.....	9

D3:

Of the <d1> people who live in your household, how many are under 18 years of age?

=> +1 IF D1=01, 99

None00
 Refused.....99 => SKIP3

SUM1:

TOTAL NUMBER OF PEOPLE IN HOUSEHOLD (IF NO REFUSALS)

ONE PERSON IN HOUSEHOLD01
 REFUSED99

D10:

Please stop me when I reach the category that best describes your household's total annual income before taxes.

Under \$20,0001
 \$20,000 to just under \$50,0002
 \$50,000 to just under \$100,0003
 \$100,000 or above?4
 Don't know/Not sure - DO NOT READ8
 Refused - DO NOT READ9

D11

What is the primary language spoken in your home? [DO NOT READ LIST.]

1	English	T12
2	Spanish	T12
3	Mandarin	T12
4	Cantonese	T12
5	Tagalog	T12
6	Korean	T12
7	Vietnamese	T12
8	Russian	T12
9	Japanese	T12
-77	Other (specify)	T12
-88	Refused	T12
-99	Don't know	T12

D12

Do you own or rent your home?

0	Own	T2
1	Rent	T2
-77	Other (specify)	T2
-88	Refused	T2
-99	Don't know	T2

RECORD GENDER

Male.....1
 Female.....2

LANG:

THE INTERVIEWER WAS DONE IN:

English.....1
 Spanish.....2

That concludes my questions. Thank you very much for your time and cooperation.

Completed Interview01



CFL Exchange Program

Phone Survey for Participants

Survey No: _____

Date:

Project #: _____

Contact Name: _____

Address: _____

Phone: _____

Interviewer: _____

Contact Log

	Date	Time	Contacted			Comments
1						
2						
3						
4						
5						
6						
7						

Num of Calls _____ Num of Contacts: _____

Refusal:

*Compact Fluorescent Lamps are referred to as CFLs but this survey refers to everything as “bulbs” to facilitate better understanding with the customer.

Introduction

Hello, this is <<interviewer>> and I am calling on behalf of PNM. I’m looking to speak with <<respondent>>.

I’m calling regarding the PNM CFL Exchange program. We are conducting an evaluation study of the program on their behalf. PNM has provided us the program records in order to conduct the study.

1) I have a few brief questions that will take only a couple of minutes to complete. May I ask you these questions now?

1) Yes

2) No **Call back date and time:** _____

2) Our information shows that you turned in incandescent light bulbs for energy efficient bulbs through the PNM CFL Exchange program at <<event place>> on <<event date>> - is this correct?

Yes

3) No → **Thank and Terminate**

DK → **Is there someone else in your home who would know?**

Record Name _____

Refused → **Thank and Terminate**

If respondent initially does not recall program, read the following program description:

This program is provided by PNM and the Sierra Club to allow people to exchange standard light bulbs (called incandescent bulbs) for energy saving CFLs at no charge. Do you remember this program?

If contact does recall → **Continue survey**

If contact cannot recall → **Thank for their time, end call**

- 3) How did you *first* become aware of PNM’s CFL Exchange Program? ***Do Not Read List - Only One Response.***

Bill insert

Radio

YMCA

WIC (Women, Infant and Child) Center

4) Letter or Mailing (Other Than Bill Insert)

5) Flyer

6) Word of mouth - friend/relative/co-worker

7) Meals on Wheels

8) Senior Center

9) Community Center

10) Church

11) Salvation Army Center

12) Clinic or Hospital

13) Community Service Agency

14) Other Community Group or Organization – flyer or verbally informed

15) Other: _____

Don’t Know/Can’t remember

INCANDESCENT QUESTIONS

of incandescent bulbs exchanged: <<# *bulbs*>>

- 4) Our records indicate that you exchanged <<# *bulbs*>> standard, incandescent bulb(s) for energy-saving compact fluorescent bulbs. Is that correct?

Yes → **Go To 0**

16) No

- 5) How many standard bulbs *did* you exchange for energy saving bulbs?

One

Two

Three

Four → **If 1 thru 4, Go To 0**

Five or more → **Go To 6)**

None, I did not exchange any incandescent bulbs → **Go To 10)**

- 6) Did you exchange all your bulbs at one event or did you attend multiple events?

One event
Multiple events

7) How many of the bulbs you turned in were working?

- One
- 17) Two
- 18) Three
- 19) Four
- 20) Five or more

8) If you had not participated in the CFL Exchange would you have purchased CFLs from a store for:

- One fixture
- Two fixtures
- Three fixtures
- Four fixtures
- Five or more fixtures

9) Can you recall in which rooms you installed the <<# CFL>> new CFL(s) you received from the program?

Use Room Codes at bottom of page for locations and note # of lamps in each room. If lamp is not in use note appropriate "Not In Use Code" below.

Rm Code _____ Qty _____
If Not in Use (14): Code _____ Still Plan to Use? Yes / No / DK

Rm Code _____ Qty _____
If Not in Use (14): Code _____ Still Plan to Use? Yes / No / DK

Rm Code _____ Qty _____
If Not in Use (14): Code _____ Still Plan to Use? Yes / No / DK

Rm Code _____ Qty _____
If Not in Use (14): Code _____ Still Plan to Use? Yes / No / DK

Room Codes

Bedroom = 1	Kitchen = 2	Living/Family = 3	Hallway = 4	Closet = 5
Outside/Porch = 6	Garage = 7	Home Office = 8	Dining = 9	Commercial = 10
Attic = 11	Exercise = 12	Other = 13:	Not in Use = 14	Don't Know = 98

Not In Use Codes

Do not fit in my light fixture = 1	Fixture is difficult to access = 2	Don't like color = 3	Not bright enough = 4	Too Bright = 5
------------------------------------	------------------------------------	----------------------	-----------------------	----------------

Takes too long to turn on = 6	Have not taken the time to install them = 7	Burned out = 8	Extras/No place to put them = 9	Broken, did not work or shattered= 10
Other: = 11				

PROGRAM AWARENESS/PERCEPTION QUESTIONS

I just have a few questions about the program itself.

- 10) Why did you participate in this program? *Do not read list; if more than one response, rank answers in order of respondent priority.*
- 98) _____ Energy savings → Ex. “Save on power bills”, “reduce electricity use”, etc.
- 99) _____ Safety → Ex. “reduce chance of fire”, “get rid of hot halogen bulbs”, etc.
- 100) _____ Free benefit → Ex. “get new lamps”, “get new bulbs”, “no cost for it”, etc.
- 101) _____ Environmental Concerns → Ex. “reduce air pollution”, “do the right thing”, etc.
- 102) _____ Other

11) Since replacing your old lights, have you noticed a change in your electricity bill?

- 98) Yes
- 99) No → **Go To Q10**
- 1) DK → **Go To Q10**
- 2) Refused → **Go To Q10**

12) Is it as much as you expected to save, less than, or even more than you expected? *Read responses if needed*

- 1) Less than I expected
- 2) About as much as I expected
- 3) Even more than I expected
- 98) DK
- 99) Refused

Next, we just want to know how much you might have shared about the program with others.

13) Have you told other people about the bulbs you received from the program?

- 98) Yes

99) No → **Go To Q14**

98) DK → **Go To Q14**

99) Refused → **Go To Q14**

- 14) Which statement would best fit how many people you told: *Read 1, 2, and 3 on list*
- 1) I told a few people – perhaps about 1 to 3
 - 2) I told some people – perhaps about 4 to 9
 - 3) I told a lot of people – perhaps 10 or more
 - 1) DK
 - 2) Refused
- 15) How good or bad was everything you mentioned about the program?
- 1) All bad
 - 2) Some bad and good things
 - 3) All good
 - 98) DK
 - 99) Refused
- 16) As far as you know, have the people you told about the energy efficient bulbs gone out and purchased similar lighting products as the ones you received at the event?
- 1) No, nobody
 - 2) A few people – perhaps about 1 to 3
 - 3) Some people – perhaps about 4 to 9
 - 4) A lot of people – perhaps 10 or more
 - 99) Don't know
 - 100) Refused
- 17) What did you like or not like about the program?

Positive Comments

- 1. Excellent Program no complaints
- 2. Good learning opportunity to try new product
- 3. Lowers my bills saves money & energy
- 4. Distribution location convenient
- 5. Courteous & educated staff
- 6. I like that it's no cost.
- 7. Couldn't afford CFL w/out program
- 8. Other: _____

Negative/Neutral Comments

- 9. Lamps were defective
- 10. Limits on qty to be exchanged
- 11. Increase variety of CFL 's
- 12. CFLs not bright enough, increase wattage
- 13. Prefer white light over warm light
- 14. More staffing, lines too long
- 15. Distribution location inconvenient
- 16. Program ran out of CFLs
- 17. Other: _____

18) Is there anything about the program that the utility should eliminate, adjust, or improve?

DEMOGRAPHIC QUESTIONS

I just have a few final questions for background and classification purposes only.

19) Do you own or rent your home?

98) Own

99) Rent

100) Other: Specify _____

1) Don't Know

2) Refused

20) How many people live in the household?

- # _____

L1. Don't Know

L2. Refused

21) What is your household's primary language?

1) English

7) Indian

- Spanish

8) Korean

- Chinese

9) French

- Russian

10) Other: _____

- Italian

98) Don't Know

- Vietnamese

22) What is the highest level of education you have completed?

98) High School Graduate or Less

99) Some College

100) 4-Year College Degree

101) Advanced Degree

1. Refused

23) Lastly, into which of the following categories did your household income fall for 2007?

1. Less Than \$23,000
2. \$23,001 - \$27,000
3. \$27,001 - \$32,500
4. \$32,501 - \$38,000
5. \$38,001 - \$43,500
6. \$43,501 or more

S1. Don't Know

S2. Refused

24) Can you tell me your age?

D1. _____

R1. Don't Know

R2. Refused

These are all of my questions. Thank you for your time.



Business Lighting Program

Phone Survey for Participants

Survey No: _____

Date:

Project Name: _____ Project #: _____

Company Name: _____

Contact Name: _____

Title: _____

Address: _____

Phone: _____ Fax: _____

e-mail: _____

Interviewer: _____

Contact Log

	Date	Time	Contacted			Comments
1						
2						
3						
4						
5						
6						
7						



Num of Calls _____ **Num of Contacts:** _____

Scheduled Yes/No Survey Completed Yes/No

Site	Contact	Date	Time

Refusal:

INTRO

Hello, this is <<**interviewer**>> and I am calling on behalf of PNM. I'm looking to speak with <<**respondent**>>.

I'm calling regarding the PNM's Business Lighting Retrofit Program. We are conducting an evaluation study of the program on their behalf.

IN1: Our records show that your company completed a lighting project at [MAIL MERGE ADDRESS], is that correct?

- 1 Yes
- 2 No, Address: _____

IN2: Who was most responsible for the decision to install the lighting upgrades at your company?

- 1 Interviewee
- 2 Name: _____ Phone# _____

IN2a: Were you/they involved in the decision-making process at the initial stage when the project was specified and agreed upon for this facility?

- 1 Yes
- 2 No (If No) At what point in the process did you/they become involved and what was your/their role? _____

(Once Decision Maker is identified)

IN3: Are all of the following lighting measures still installed and operational?

- 1 Yes
- 2 No (If no, ask why?) _____

Measure	Date Installed	Rebate	Qty
[MAIL MERGE MSR1]	[MM DATE1]	[MM AMT1]	[MM QTY1]
[MAIL MERGE MSR2]	[MM DATE2]	[MM AMT2]	[MM QTY2]
[MAIL MERGE MSR3]	[MM DATE3]	[MM AMT3]	[MM QTY3]
[MAIL MERGE MSR4]	[MM DATE4]	[MM AMT4]	[MM QTY4]
[MAIL MERGE MSR5]	[MM DATE5]	[MM AMT5]	[MM QTY5]

IN4: Can you tell me the main reason you decided to upgrade your lighting?

READ ONLY AS NEEDED; check all that apply

- 1 To replace old or outdated equipment
- 2 To allow remodeling, build-out, or expansion
- 3 To gain more control over how the equipment was used
- 4 To improve measure performance
- 5 To get a rebate from the program
- 6 To protect the environment
- 7 To reduce energy costs
- 8 To reduce energy demand/likelihood of blackouts
- 9 To respond to the energy crisis
- 10 To acquire the latest technology
- 11 To reduce maintenance/operations costs
- 50 Other: _____
- 98 Don't Know/Refused

IN5: How did you first learn about the PNM Business Lighting program and incentives that were available to you?

DO NOT READ LIST [If same as IN4 Name: _____]

- 1 Contractor
- 2 Engineer/Architect
- 3 Equipment Vendor [VENDOR NAME] _____
- 4 PNM Representative
- 5 Other non-utility literature, including trade publications
- 6 Energy Services Company, often referred to as ESCOs
- 7 Energy Efficiency Program (non-utility)
- 8 Previous Installation
- 9 Self Knowledge / Education
- 10 Business colleague / Professional association / Trade show
- 11 From parent company
- 50 Other [SPECIFY, OK TO PUT NAME OF COMPANY]

98 Don't Know/Refused

IN6: Was the information or advice you received from [IN5] a significant factor in your decision to install this high efficiency equipment at the time you did?

- 1 Very Important
- 2 Somewhat Important
- 3 Not Very Important
- 4 Not At All Important
- 50 Other: _____

IN7: Did you have plans to upgrade your lighting before you talked with anyone about the program? *(Any idea, desires, wants or something different in mind, etc.)*

- 1 Yes
- 2 No

IN7a: What plans existed? *(Probe for timing, quantity, and efficiency)*

IN8: Was it necessary to revise any aspect of your plans in order to qualify for the [program]?

- 1 Yes
- 2 No, (IF YES) What changes were made? *(Probe for timing, quantity, and efficiency) (Probe if measures did NOT qualify for the Business program but qualified under another PNM program)*

IN9: Which of the following statements best describes the condition of the equipment you replaced? The existing equipment was...

- 1 Fully functional *(a few burnt out bulbs is considered fully functional)*
- 2 Functioning, but with significant problems
- 3 Had failed or did not function
- 4 Not applicable, didn't replace anything added controls, ex.) Occ. Sensors
- 50 Other Describe _____

98 Don't Know/Refused

SITE SCHEDULES

The following questions are to confirm the operating schedules for your business.



Q1 Please verify the weekday and weekend hours of operation on file for the following lighting fixtures:

Measure	Reported Average Hours	Actual Average Hours - Weekday	Actual Average Hours - Weekend
[MSR CODE 1]	[AVGHR5 1]		
[MSR CODE 2]	[AVGHR5 2]		
[MSR CODE 3]	[AVGHR5 3]		
[MSR CODE 4]	[AVGHR5 4]		
[MSR CODE 5]	[AVGHR5 5]		

Q2 Which holidays are observed (check all that apply)

- New Years day
- Memorial day
- Veteran's day
- Other _____days
- MLK day
- July 4th
- Thanksgiving ____ days
- Sum of all of all holidays observed:_____
- Presidents' day
- Labor day
- Easter _____ days
- Columbus day
- Christmas ____ days

Q3 Are there any months that you experience higher or lower than normal operating hours? Indicate months of increased or decreased operating hours. **Normal (100%) is assumed for blank entries.**

	Lighting % of Normal		Lighting % of Normal
Jan	100 or ____%	Jul	100 or ____%
Feb	100 or ____%	Aug	100 or ____%
Mar	100 or ____%	Sep	100 or ____%
Apr	100 or ____%	Oct	100 or ____%
May	100 or ____%	Nov	100 or ____%
Jun	100 or ____%	Dec	100 or ____%

Q4 Compared to before the retrofit, has your lighting schedule changed at all since completing this lighting project?

- 1 Yes
- 2 No

If so, why?

Comments: _____

FREE RIDERSHIP

NOTE: the Free Ridership questions (FR1-4) will be repeated for each measure category installed.

For the next few questions we are interested in learning what you might have done in absence of the PNM program and their incentives.

FR1 In absence of the PNM program what portion of the lighting retrofit would you have installed?

- 1 The entire installation (100%)
- 2 Most of the installation (75%)
- 3 Some of the installation (50%)
- 4 A little of the installation (25%)
- 5 None (0%, or very small portion)
- 98 Don't know

FR1a *Interviewer: record verbatim comment of equipment quantity or % that would have been installed instead of the program measures.*

Measure	FR1a

ONLY ASK FR2 IF MEASURE CODE = [4-High Performance T8 or “Super” T8 Systems with Electronic Ballast, 5-Low-Wattage T8 Lamps, 8-Interior High Bay Linear Fluorescent Fixtures, Only complete new 4- or 5-lamp T5HO]

FR2 In absence of the PNM program what level of efficiency or type of lighting would have been installed? Would you have installed equipment that was

- 1 Higher than installed efficiency (full FR, lost Opportunity)
- 2 Same as installed efficiency (100%)
- 3 Slightly lower than installed efficiency (67%)
- 4 Somewhat lower than installed efficiency (33%)
- 5 Baseline efficiency or what the building code requires (0%) **(Go to FR5)**
- 98 Don't know

FR2a Interviewer: record verbatim comment of equipment type and efficiency and/or wattage that would have been installed instead of the program measures.

Instead of....	We would have installed....

FR3 In absence of the program when would the lighting have been installed? **READ LIST**

- | | | |
|----|----------------------------|------|
| 1 | At the same time or sooner | 100% |
| 2 | 1 year later | 0% |
| 3 | 2 years later | 0% |
| 4 | >2 years later | |
| 5 | Never | |
| 98 | Don't know | |

FR3a Comments

FR4 (OPEN ENDED) I'd like to better understand your purchase decision. Maybe you could just describe in your own words what impact, if any, the program had on your decision to install the energy efficient lighting at the time you did?

FR4 Comments

SPILOVER (FREE DRIVERSHIP)

SO1 Has your lighting contractor/supplier or a PNM representative influenced the way you manage your building's energy usage? If yes, how influential were they?

- 1 Very influential (Ask SO1a)
- 2 Influential (Ask SO1a)
- 3 Somewhat influential (Ask SO1a)
- 4 Not very influential (Ask SO1a)
- 5 Not at all influential (Go to SO2)

SO1a Have any changes been made at your company as a result of your interaction with your contractor? If yes, explain

SO1a Comments

SO2 Since [insert date] has your company purchased and installed any additional energy efficient lighting without applying for a PNM rebate?

(PROBE to clarify that the installation was totally separate from the project installed through the program)

- 1 Yes
- 2 No (Skip to END of Survey to Question P11)
- 98 Don't Know (Skip to END of Survey to Question P11)

SO2a If YES, what equipment has been installed?

Measure: _____

Quantity: _____

SO3 Did your participation in PNM's Program influence your decision to make these additional improvements?

- 1 Yes
- 2 No
- 98 Don't Know

SO3a If No, what prompted you install this equipment?

SO3b IF YES, What aspects of the program influenced your decision to install them?
(rebate, energy savings, etc.)

SO4 Do you think you would have purchased and installed these additional measures if you had not participated in the PNM Program?

- 1 Yes
- 2 No
- 98 Don't Know

SO4a If No, Why not?

Note: A "yes" response to SO2 or SO3 or a "no" response to SO4 indicate spillover. Gather:

Pre-measure	Pre-qty	Pre-hours	Post-measure	Post-qty	Post-hours

IF MEASURES EXIST MAKE A COPY OF PAGE FOR FIELD SURVEYOR TO VERIFY SPILLOVER

PROGRAM IMPROVEMENT

PI1. Would you install additional energy efficient measures besides lighting if there were an appropriate PNM program?

PI2. Is there anything you would change about the lighting program?



End. These are all the questions I have. Thank you very much for your time and consideration. Your comments will help PNM make any necessary adjustments to the program for future participants.



Advanced Evaporated Cooling Rebate Program

Phone Survey for Participants

Survey No: _____ Date: _____

Project #: _____

Contact Name: _____

Address: _____

Phone: _____

Interviewer: _____

Contact Log

	Date	Time	Contacted			Comments
1						
2						
3						
4						
5						
6						
7						

Num of Calls _____ Num of Contacts: _____

Refusal: _____

Introduction

Hello, this is <<interviewer>> and I am calling on behalf of PNM. I'm looking to speak with <<respondent>>.

I'm calling regarding the Advanced Evaporated Cooling Rebate program. We are conducting an evaluation study of the program on their behalf. PNM has provided us the program records in order to conduct the study.

I have a few brief questions that will take only a couple of minutes to complete. May I ask you these questions now?

Yes



No Call back date and time: _____

Our information shows that you received a rebate from PNM for purchasing and installing an Advanced Evaporated Cooling System in <<month, year>> at <<address>> - is this correct?

Yes

Yes → But we have moved, Thank and Terminate

No → Thank and Terminate

DK → Is there someone else in your home who would know?

Record Name _____

Refused → Thank and Terminate

If respondent initially does not recall program, read the following program description:

This program is provided by PNM and involves completing and submitting a rebate after the purchase and installation of a qualifying Advanced Evaporated Cooling system to keep your home cool and comfortable. Do you remember this program?

If contact does recall → Continue survey

If contact cannot recall → Thank for their time, end call

How did you *first* become aware of PNM's Advanced Evaporated Cooling Rebate Program? *Do Not Read List - Only One Response.*

Bill insert

Radio

PNM Website

In-store Clerk or Advertisement

Letter or Mailing (Other Than Bill Insert)

Flyer

Word of mouth - friend/relative/co-worker

Air Conditioning Contractor

Previous Participation

Community Group or Organization – flyer or verbally informed

Other: _____

Don't Know/Can't remember/Refused

Do you have more than one AC system in your home?

Yes → Record type of the second unit _____

No

How did you go about selecting a contractor to install your equipment? (Circle All That Apply)

Already knew a reputable contractor who installed or performed maintenance on a previous unit

Requested multiple bids selected least expensive offer

Phone Book

Newspaper AD

Friend/colleague Recommendation

Internet Search

Referred to the PNM Web site for list of participating contractors

ACCA (AC Contractors of America) Website

50. Other: _____

98. DK/Refused

Did any of the following factors influence your purchase decision? On a scale of 1-5, where 5 represents very influential, 1 is not at all influential, and 3 in neutral, tell me how much each of the following factors influenced your decision.

A. Wanted to reduce our utility bills	1	2	3	4	5
B. Concern for the environment - Global Warming	1	2	3	4	5
C. Prior Years Heat Wave	1	2	3	4	5
D. Energy Star Label	1	2	3	4	5
E. Rebate Availability	1	2	3	4	5

Do you Own or Rent?

Own

Rent /Lease

DK/Refused

Approximately how old was the AC unit you replaced?

Verbatim: _____

How often do you use your air-conditioner during the cooling season months (May-October)? Would you say it is used.....?

Daily

A few days a week

A few days a month

Only on extremely hot days

Never

DK/Refused

Is/(Are) your thermostat(s) programmable or manual?

Programmable (Digital)

Manual

Throughout the summer months do you cool your house to a certain temperature all the time or do you adjust the temperatures when you're home and/or when you're away?

One temperature: _____

Adjust temperature when home and away

What is the Occupied Temperature Setting: _____

What is the Unoccupied Temperature Setting: _____, off

Something Else, Please Describe:

Our records show your home was built <<Year Built>>. If Blank, In what year was your home built?

Verbatim: _____

2004-2005

2001-2003

1999-2000

1992-1998

1984-1991

1978-83

Pre 1978

Approximately how many people live in your home year around?

Verbatim _____

Are there any summer or temporary residents who stay longer than a week?

If yes, Qty: _____

No

Free-ridership Questions

Were you aware of the Advanced Evaporated Cooling System Rebate Program before you purchased your new system?

Yes

No

Refused

Don't Remember

Was the rebate associated with your new system a factor in your decision to purchase it?

Yes

No

Somewhat

Refused

Don't Remember

In absence of the PNM program, what level of efficiency or type of air conditioning unit would you have purchased for your home? Would you have installed equipment that was...

Higher than installed efficiency (full FR, lost opportunity)

Same as installed efficiency (100%)

Slightly lower than installed efficiency (67%)

Somewhat lower than installed efficiency (33%)

Baseline efficiency or what the building code requires (0%)

Don't know

In absence of the program when would the unit have been installed? READ LIST

At the same time or sooner 100%

1 year later 0%

Two years later 0%

>2 years later

Never

Don't know



I'd like to better understand your purchase decision. Maybe you could just describe for me in your own words what impact, if any, the program had on your decision to purchase and have Advanced Evaporated Cooling equipment installed in your home at the time you did?

-

SPILLOVER (FREE DRIVERSHIP) QUESTIONS

Has your HVAC contractor or a PNM representative influenced your decision to have Advanced Evaporated Cooling equipment installed?

Very Influential

Influential

Somewhat influential

Not very influential

Not at all influential

Did your participation in PNM's program influence your decision to make any additional energy conservation improvements to your home?

Yes, if so, what?

No

Don't know

PROGRAM AWARENESS/PERCEPTION QUESTIONS

I just have a few questions about the program itself.

Since the installation of your system, have you noticed a change in your electricity bill?

Yes → Go to the following question

No → Skip the following question

DK → Skip the following question

Refused → Skip the following question

Is it as much as you expected to save, less than, or even more than you expected?

Read responses if needed

Less than I expected

About as much as I expected

Even more than I expected

DK

Refused

Next, we just want to know how much you might have shared about the program with others.

Have you told other people about the rebate you received from the program?

Yes

No → Skip the next three questions

DK → Skip the next three questions

Refused → Skip the next three questions

Which statement would best fit how many people you told: *Read 1, 2, and 3 on list*

I told a few people – perhaps about 1 to 3

I told some people – perhaps about 4 to 9

I told a lot of people – perhaps 10 or more

DK

Refused

How good or bad was everything you mentioned about the program?

All bad

Some bad and good things

All good

DK

Refused

As far as you know, have the people you told about the Advanced Evaporated Cooling System Rebate Program gone out and purchased AC units eligible for rebates?

No, nobody

A few people – perhaps about 1 to 3

Some people – perhaps about 4 to 9

A lot of people – perhaps 10 or more

Don't know



Refused

Is there anything about the program that the utility should eliminate, adjust, or improve?

Recruitment

To properly evaluate PNM’s Advanced Evaporated Cooling System Rebate Program we would like to visit your home and view your Advanced Evaporated Cooling unit. PNM is sponsoring this verification process on a small sample of homes to better understand the energy performance of recent equipment installations. This visit will give PNM a better understanding of Advanced Evaporated Cooling Systems and better understanding those that have taken part of the rebate program. The visit will also give PNM valuable data on installation methods.

This visit will be performed by a field engineer at no cost to you and would provide PNM with important information that will shape the rebate program in the future. In order for us to do this we need to determine when would be a good day and time to come to your home. Our engineers will be on your property for no longer than thirty minutes and a good portion of that time will be spent outside by the condensing unit.

Would you be willing to participate in the study?

Yes

No, Moving

No Ask why: _____

Don't Know Call back and speak with : _____ at: _____

Survey Date _____ Survey Time _____

Contacts:

On-site Contact Person: _____

Daytime Phone No. or Email:

Owner Contact Person: _____ Company (optional): _____

Daytime Phone No. or Email:

Is there anything we should know about getting to your home that might make it difficult?



Are you planning on being away from your home for an extended period of time or are you planning on moving (i.e. vacation) during the summer? We ask this question because of the nature of our visit. We do not want to monitor your AC system if you are not going to be home during the summer months.

Vacation (If yes, get dates, schedule installation accordingly)

Moving, won't be there

Possibly or Don't Know

Definitely will be there

If So, when: _____

(Proceed to propose a date for the survey, and gather all of the information needed to get the surveyor on-site.)

These are all of my questions. Thank you very much for your time.



Customer Intercept Follow-Up Telephone Survey

PNM Measurement and Verification of 2007 Home Lighting Program

Definitions

- [PH_SURVEYOR_NAME] = name of telephone interviewer
- [CONTACT] = name of survey respondent
- [STORE] = store in which respondent purchased CFLs
- [STORE_CITY] = location of store in which respondent purchased CFLs
- [SURVEY_MONTH] = month during which in-store survey took place
- [NUM_CFLs] = number of CFLs purchased at time of in-store survey
- [INTERVIEWER_NAME] = name of in-store interviewer
- [CFL_WATT_1] = wattage of first CFL purchased on day of in-store survey
- [CFL_WATT_2] = wattage of second CFL purchased on day of in-store survey
- survey
- [CFL_WATT_3] = wattage of third CFL purchased on day of in-store survey



Lead-In

Hello, may I speak with [CONTACT]?

[IF CONTACT NOT AVAILABLE, DETERMINE CALL-BACK DATE/TIME.]

My name is [PH_SURVEYOR_NAME] and I'm calling from KEMA, Inc., with regard to some light bulbs you purchased at [STORE] in [STORE_CITY] during the month of [SURVEY_MONTH]. At that time, one of our researchers completed a brief survey with you regarding your purchase.

E1. Do you remember this?

0	No	E2
1	Yes	E3
-99	Refused	E2
-88	Don't know	E2

E2. Our records indicate that you completed a survey with one of our researchers named [INTERVIEWER_NAME] and that you purchased compact fluorescent light bulbs – or “CFLs” – in [STORE] that day. [INTERVIEWER_NAME] gave you a five dollar gift card to [STORE] when you completed the survey. Do you remember this?

0	No	END
1	Yes	E3
-99	Refused	END
-88	Don't know	END

E3. Great! At that time, our researcher offered you a \$20 gift certificate to [STORE] or to Amazon.com for completing a follow-up telephone survey. We'd like to begin the survey with you now. It should take less than 10 minutes to complete and at the end, I'll collect your contact information so we know where to send the gift certificate.

1	[AGREES TO PARTICIPATE]	C1
2	[SCHEDULE CALL-BACK TIME]	END
0	[DOES NOT AGREE TO PARTICIPATE]	END

[If asked who is sponsoring this study: We are conducting this study on behalf of Public Service New Mexico (PNM) to help them improve their energy-efficiency programs.]



[If asked why you are conducting this study: Studies like this help utility companies like PNM better understand customers' need for and interest in energy programs and services.]

[If asked about survey length: This call should take about 10 minutes of your time. Is this a good time for us to speak with you? IF NOT, SET UP CALL BACK APPOINTMENT.]

[If respondent expresses sales concern: I am not selling anything, and your responses will be kept confidential. If you would like to talk with someone from Public Service New Mexico (PNM) about this study, feel free to call Carlos Lucero at PNM (505-241-4706) for more information.]

Great, let's get started. I'd like you to think back to when you purchased the CFLs and completed the in-store survey.

Recall

C1. According to our records, you purchased [NUM_CFLs] that day. Does that sound right to you?

0	No	C2
1	Yes	C3
-88	Refused	C2
-99	Don't know	C2

C2. How many CFLs did you buy that day?

	[RECORD NUMBER OF CFLs] [RECORD AS NEW VALUE FOR NUM_CFLs]	C3
-88	Refused	C3
-99	Don't know	C3

C3. Did you pay full price for the CFLs, or was the price reduced by a special sale or promotion?

0	Paid full price for CFLs	C5
1	CFL price reduced by sale or promotion	C4
-88	Refused	C5
-99	Don't know	C5

C4. Who provided the discount? Was it ... [READ LIST]

1	The store ([STORE]);	C5
2	The manufacturer;	C5
3	PNM; or	C5
-77	Someone else? (Specify: _____)	C5
-99	Refused	C5
-88	Don't know	C5

We'd like to talk with you in more detail about the [NUM_CFLS] CFLs you purchased on the day you completed the in-store survey.

C5. How many of those [NUM_CFLS] did you install in a home?
 [IF INSTALLED AND THEN REMOVED, DO NOT INCLUDE IN C5]
 [IF NECESSARY: This can be at your home or in another residence.]

	RECORD NUMBER OF CFLs]	C6
-88	Refused	C10
-99	Don't know	C10

C6. Does Public Service New Mexico (also known as PNM) provide electric service to the home where you installed this/these CFL(s)?

0	No (none of CFLs in homes in PNM territory)	C7
1	Yes, all of the CFLs	C7
2	Yes, some of CFLs [RECORD NUMBER OF CFLS IN PNM TERRITORY]	C7
-88	Refused	C7
-99	Don't know	C7

C7. [IF C5 = NUM_CFLS SKIP TO] How many of the CFLs you bought on the day of the in-store survey did you install in a business?
[IF NECESSARY: This can be a business you own or at another business location.]

	RECORD NUMBER OF CFLs]	C8
-88	Refused	C8
-99	Don't know	C8

C8. What type of business? [ACCEPT MULTIPLE RESPONSES]

1	Office [CONFIRM NOT A HOME OFFICE; IF SO, RECODE AS HOME] [RECORD NUMBER CFLS]	C9
2	Grocery or convenience store [RECORD NUMBER CFLS]	C9
3	Other type of retail store [RECORD NUMBER CFLS]	C9
4	Restaurant or bar [RECORD NUMBER CFLS]	C9
5	Health care facility [RECORD NUMBER CFLS]	C9
6	Hotel or motel [RECORD NUMBER CFLS]	C9
7	Warehouse or [RECORD NUMBER CFLS]	C9
-77	Other type (specify) [RECORD NUMBER CFLS]	C9
-88	Refused	C9
-99	Don't know	C9

C9. Does [Public Service New Mexico, also known as] PNM provide electric service to the business where you installed this/these CFL(s)?

0	No (none of CFLs in business in PNM territory)	C10
1	Yes, all of the CFLs	C10
2	Yes, some of CFLs [RECORD NUMBER OF CFLS IN PNM TERRITORY]	C10
-88	Refused	C10
-99	Don't know	C10

C10. [IF C5 + C7 = NUM_CFLS SKIP TO] Of the CFLs you purchased on the day of the in-store survey, how many have you placed into storage to install later?

	[RECORD NUMBER OF CFLs]	C11
-88	Refused	C11
-99	Don't know	C11

C11. [IF C5 + C7 = NUM_CFLS SKIP TO] What did you do with the other CFLs you bought that day?

1	Gave it away	[RECORD NUMBER OF CFLS]	1
2	Forgot about it/misplaced it	[RECORD NUMBER OF CFLS]	<input type="checkbox"/>
3	Discarded it/Threw it away	[RECORD NUMBER OF CFLS]	1
4	Installed and then removed it	[RECORD NUMBER OF CFLS]	V1
-88	Other (Specify: _____)	[RECORD NUMBER OF CFLS]	<input type="checkbox"/>
-99	Refused		<input type="checkbox"/>
-98	Don't know		<input type="checkbox"/>

Let's talk in a little more detail about [IF NUM_CFLS > 3 READ: three of the] CFLs you purchased on the day of the in-store survey.

[REPEAT THROUGH 1 FOR UP TO 3 CFLS PURCHASED ON DAY OF SURVEY]

Installation

DEPENDING ON HOW MUCH DATA WE WANT TO COLLECT HERE...PERHAPS

THIS ITERATION COULD BE COMPLETED FOR EACH WATTAGE LAMP INSTEAD OF INDIVIDUAL LAMP. BASICALLY, FOR EACH WATTAGE WE COULD INITIALLY VERIFY WATTAGE AND THEN ASK ONLY ONCE I1-I4, I9-I11 (INCLUDE QUANTITY IN I3 & I4 PER ROOM/FIX). OR, EVEN MORE GENERALLY, WE COULD SIMPLY ASK HOW MANY LAMPS WERE INSTALLED IN EACH ROOM/FIXTURE TYPE AND NOT ASSOCIATE THOSE WITH WATTAGES.

[IF C5 = 0 SKIP TO V1] You mentioned that you installed at least one of them.

- About how many weeks after this purchase did you install this (first, second, third) CFL?

	[RECORD TIME PERIOD IN WEEKS] + [RECORD NUMBER OF CFLS]	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- Is this (first, second, third) CFL still installed?

0	No [RECORD NUMBER NO LONGER INSTALLED]	V1
1	Yes	<input type="checkbox"/>
3	Some installed, some not [RECORD NUMBER NO LONGER INSTALLED]	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- In which room or location is the (first, second, third) CFL installed?

	[ROOM_TYPE]	
1	Kitchen	<input type="checkbox"/>
2	Eat-in kitchen	<input type="checkbox"/>
3	Living room	<input type="checkbox"/>
4	Dining room	<input type="checkbox"/>
5	Bedroom	<input type="checkbox"/>
6	Bathroom	<input type="checkbox"/>
7	Hall/Entry	<input type="checkbox"/>
8	Office	<input type="checkbox"/>
9	Basement	<input type="checkbox"/>
10	Laundry/utility room	<input type="checkbox"/>
11	Living room (family room, rec room, den)	<input type="checkbox"/>
12	Garage	<input type="checkbox"/>
13	Closet	<input type="checkbox"/>
-77	Other room inside home (specify)	<input type="checkbox"/>
14	Outdoor – porch or patio	<input type="checkbox"/>
15	Outdoor – entryway	<input type="checkbox"/>
16	Outdoor – other	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- In what type of light fixture did you install this (first, second, third) CFL?

1	Table lamp	<input type="checkbox"/>
2	Ceiling fixture	<input type="checkbox"/>
3	Standing Lamp	<input type="checkbox"/>
4	Ceiling Fan	<input type="checkbox"/>
5	Wall fixture	<input type="checkbox"/>
6	Chandelier	<input type="checkbox"/>
	Pendant	
	Recessed Can	
-77	Other (specify)	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- [IF NUM_CFL = 1 AND CFL_WATT_1 ≠ MISSING]
According to our records, you purchased a [CFL_WATT_1] CFL on the day of the in-store survey. Does that sound right to you?

0	No	<input type="checkbox"/>
1	Yes	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- [IF (CFL_WATT_1 AND CFL_WATT_2 ≠ MISSING) AND NUM_CFL = 2 AND CFL_WATT_1 = CFL_WATT_2] OR
[IF NUM_CFL ≥ 3 AND (CFL_WATT_1 AND CFL_WATT_2 ≠ MISSING) AND (CFL_WATT_1 = CFL_WATT_2 = CFL_WATT_3)]
According to our records, you purchased [CFL_WATT_1] CFLs on the day of the in-store survey. Does that sound right to you?

0	No	<input type="checkbox"/>
1	Yes	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- [IF NUM_CFL = 2 AND CFL_WATT_1 ≠ MISSING AND CFL_WATT_2 ≠ MISSING] OR
[IF NUM_CFL ≥ 3 AND CFL_WATT_1, CFL_WATT_2, AND CFL_WATT_3 ≠ MISSING]
According to our records, you purchased [CFL_WATT_1] and [CFL_WATT_2], (and CFL_WATT_3) Watt CFL(s) on the day of the in-store survey. Which wattage CFL did you install in your [ROOM_TYPE]?

	[RECORD WATTAGE]	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- [IF OR = 0] OR
[NUM_CFL = 1 AND CFL_WATT_1 = MISSING]
[IF NUM_CFL = 2 AND (CFL_WATT_1 OR CFL_WATT_2 = MISSING)] OR
[IF NUM_CFL ≥ 3 AND (CFL_WATT_1, CFL_WATT_2, OR CFL_WATT_3 = MISSING)]
What was the wattage of this CFL?

	[RECORD WATTAGE]	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- Did the (first, second, third) CFL have any special features such as being dimmable?

0	No	<input type="checkbox"/>
1	Yes (Specify Feature)	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- What type of bulb did this (first, second, third) CFL replace?

1	Incandescent	<input type="checkbox"/>
2	CFL	<input type="checkbox"/>
3	Halogen	<input type="checkbox"/>
-77	Other (specify)	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- What was the wattage of the bulb you replaced with this (first, second, third) CFL?

	[RECORD WATTAGE]	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

CFL Removal

- V1. [IF C11 ≠ 4 SKIP TO 1] What was your main reason for taking the CFL out?
[DO NOT READ LIST. ACCEPT ONLY ONE RESPONSE.]

1	Burned out	V2
2	Didn't like the color	V2
3	Took too long to start up	V2
4	Wasn't bright enough	V2
5	Was too bright	V2
6	Didn't like the way it looked	V2
7	Didn't fit in fixture	V2
-77	Other reason (specify)	V2
-88	Refused	V3
-99	Don't know	V3

- V2. Were there any other reasons?
[DO NOT READ LIST. ACCEPT MULTIPLE RESPONSES.]

1	Burned out	V3
2	Didn't like the color	V3
3	Took too long to start up	V3
4	Wasn't bright enough	V3
5	Was too bright	V3
6	Didn't like the way it looked	V3
7	Didn't fit in fixture	V3
-77	Other reason (specify)	V3
-88	Refused	V3
-99	Don't know	V3

V3. What type of bulb did you use to replace the CFLs you removed?
[DO NOT READ LIST. ACCEPT MULTIPLE RESPONSES.]

1	Incandescent	V4
2	CFL	V4
3	Halogen	V4
-77	Other (specify)	V4
-88	Refused	V4
-99	Don't know	V4

V4. What did you do with the bulb once you removed it?

1	Installed in a different location	<input type="checkbox"/>
2	Gave it away	<input type="checkbox"/>
3	Threw it away	<input type="checkbox"/>
4	Storing it/saving it	<input type="checkbox"/>
5	Returned it to the store	<input type="checkbox"/>
6	Took it to a recycling center	<input type="checkbox"/>
7	Brought to solid waste disposal center	<input type="checkbox"/>
-77	Other reason (specify)	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

Gave CFL Away

1. [IF C11 ≠ 1 SKIP TO 1] Does the person to whom you gave the CFL live in New Mexico?

0	No	2
1	Yes	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

2. What state do they live in?

	[RECORD STATE OR (IF OUTSIDE U.S.) COUNTRY]	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

Discarded CFL

1. [IF C11 ≠ 4 SKIP TO 1] Why did you throw the CFL away? [ACCEPT MULTIPLE RESPONSES.]

1	Burned out	V3
2	Didn't like the color	V3
3	Took too long to start up	V3
4	Wasn't bright enough	V3
5	Was too bright	V3
6	Didn't like the way it looked	V3
7	Didn't fit in fixture	V3
-77	Other reason (specify)	V3
-88	Refused	V3
-99	Don't know	V3

2. How did you dispose of the CFL? [ACCEPT ONLY ONE RESPONSE.]

1	Wrapped in paper/plastic and threw in trash	<input type="checkbox"/>
2	Threw in trash	<input type="checkbox"/>
2	Returned it to the store	<input type="checkbox"/>
3	Took it to a recycling center	<input type="checkbox"/>
4	Brought to solid waste disposal center	<input type="checkbox"/>
-77	Other (specify)	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

Put CFL in Storage

1. [IF C5 > 0; ELSE SKIP TO] When do you think you'll install this CFL? Would you say ...within the next 3 months, 3 to 6 months from now, 6 months to a year from now, more than a year from now, or never?

1	Within the next 3 months	<input type="checkbox"/>
2	3 to 6 months from now	<input type="checkbox"/>
3	6 to 12 months from now	<input type="checkbox"/>
4	More than a year from now	<input type="checkbox"/>
5	Never	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

General CFL Use

- Have you purchased any more CFLs since the day you did the in-store survey?

0	No	<input type="checkbox"/>
1	Yes	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- [IF = 1; ELSE SKIP TO] How many more CFLs have you purchased since then?

	[RECORD NUMBER]	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- Did you pay full price for these CFLs, or was the price reduced by a special sale or discount?

1	Full Price	<input type="checkbox"/>
2	Discounted	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- On a scale of 1 to 5 where 1 means “not at all influential” and 5 means “very influential”, how influential was your experience with the PNM-discounted CFLs in terms of your decision to purchase CFLs again since the day of the in-store survey?

1	Not at all influential	<input type="checkbox"/>
2	2	<input type="checkbox"/>
3	3	<input type="checkbox"/>
4	4	<input type="checkbox"/>
5	Very influential	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- About how many total CFLs do you have installed on the inside or outside of your home (including the ones you bought on the day of the in-store survey)?

	[RECORD NUMBER]	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- About how many total CFLs are you storing at your home? _____
[NOTE: INCLUDE CFLS PURCHASE ON DATE OF IN-STORE SURVEY.]

	[RECORD NUMBER]	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

- [IF > 0 OR C5 = 3 OR V4 = 4] Why are you storing CFLs?
[ALLOW MULTIPLE RESPONSES.]

1	To have them on hand if a bulb burns out	G1
2	Have more than I need	G1
3	Bought them on sale	G1
4	Can't/won't use them in certain rooms	G1
5	Can't/won't use them in certain fixture types	G1
6	Can't won't use them with certain controls (e.g., dimmer switches)	G1
-88	Refused	G1
-99	Don't know	G1

CFL Satisfaction

G1.[IF C5 ≠ 1 OR V4 ≠ 1 OR ≤ 0 SKIP TO G12] Using a scale of 1 to 10, where 1 means you are "not at all satisfied" and 10 means you are "extremely satisfied," how satisfied are you in general with the CFL(s) you have installed?

	[RECORD RATING]	G2
-88	Refused	G2
-99	Don't know	G2

Using the same scale, how would you rate CFLs in terms of ... [ROTATE G2 – G7].

- G2.The color of the light they provide?
- G3.The brightness of the light they provide?
- G4.The amount of time they take to light up?
- G5.The way they fit into light fixtures?
- G6.The way they look in light fixtures?
- G7.How long they last before burning out?

	[RECORD RATING]	G8
-88	Refused	G8
-99	Don't know	G8

G8. [IF G3 < 4] Are they too bright, or not bright enough?

1	Too bright	G9
2	Not bright enough	G9
-88	Refused	G9
-99	Don't know	G9

G9. In general, what are the best features of CFLs?

[DO NOT READ LIST. ACCEPT MULTIPLE RESPONSES.]

1	Last longer before burning out	G10
2	Save money/reduce electric bill	G10
3	Save/conserves energy/electricity	G10
4	Resource conservation benefits/better for environment/"green"/global warming	G10
5	CFLs work better/higher quality than incandescent bulbs	G10
-88	Refused	G10
-99	Don't know	G10

G10. [IF = 1] When one of the CFLs you now have installed burns out, how likely are you to replace it with another CFL? Use a scale of 1 to 10, where 1 means you are "not at all likely" and 10 means you are "extremely likely."

	[RECORD RATING]	G11
-88	Refused	G11
-99	Don't know	G11

G11. [IF G10 < 6] Why do you say that?

	[RECORD VERBATIM RESPONSE]	G12
-88	Refused	G12
-99	Don't know	G12

G12. On a scale from 1 to 5 where 1 means "not at all likely" and 5 means "very likely," how likely are you to purchase CFLs within the next year?

	[RECORD RATING]	G13
-88	Refused	G13
-99	Don't know	G13

G13. When one of the incandescent bulbs you now have installed burns out, would you say you will definitely replace it with a CFL, will possibly replace it with a CFL, or will definitely not replace it with a CFL?

0	Don't have any incandescent bulbs installed in my home	G14
1	Definitely replace it with a CFL	G14
2	Possibly replace it with a CFL	G14
3	Will definitely not replace it with a CFL	G14
-88	Refused	G14
-99	Don't know	G14

**G14. What is preventing you from installing [more] CFLs in your home?
[DO NOT READ LIST. ACCEPT MULTIPLE RESPONSES.]**

1	Waiting for bulbs installed to burn out	<input type="checkbox"/>
2	Storing incandescent bulbs	<input type="checkbox"/>
3	Operating hours -- don't use the other bulbs/lamps enough	<input type="checkbox"/>
4	CFLs are too expensive/cost too much	<input type="checkbox"/>
5	Need dimmable bulbs / can't get dimmable CFLs / can't use CFLs with dimmers	<input type="checkbox"/>
6	Need 3-way bulbs / can't get 3-way CFLs / can't use CFLs in my 3-way fixtures	<input type="checkbox"/>
7	Don't like the way CFLs look in fixtures	<input type="checkbox"/>
8	Don't like the way CFLs fit in fixtures	<input type="checkbox"/>
9	CFLs aren't bright enough	<input type="checkbox"/>
10	CFL light color isn't what I want/isn't right	<input type="checkbox"/>
11	CFLs take too long to light up	<input type="checkbox"/>
-77	Other (specify)	<input type="checkbox"/>
-88	Refused	<input type="checkbox"/>
-99	Don't know	<input type="checkbox"/>

Verification of PNM Service

- We're almost finished with my questions. Just to verify, does PNM provide electricity to your home?

0	No	T1
1	Yes	T1
-88	Refused	T1
-99	Don't know	T1

DEMOGRAPHICS

T1. Do you own or rent your home?

0	Own	T2
1	Rent	T2
-77	Other (specify)	T2
-88	Refused	T2
-99	Don't know	T2

T2. What type of building do you live in? [READ LIST IF NEEDED.]

1	Mobile home	T4
2	Single-family home detached from any other house	T4
3	Single-family home attached to one or more houses	T4
4	A building with 2 apartments	T4
5	A building with 3 or 4 apartments	T4
6	A building with 5 or more apartments	T4
-77	Other (specify)	T4
-88	Refused	T4
-99	Don't know	T4

T3. Is this your primary residence?

0	Primary	T2
1	Vacation/Seasonal	T2
-77	Other (specify)	T2
-88	Refused	T2
-99	Don't know	T2

T4. Including yourself, how many people currently live in your home year-round?

	[RECORD NUMBER]	T5
-88	Refused	T5
-99	Don't know	T5

T5. Which of the following best describes your age?

1	Less than 18 years old,	T6
2	18 to 24,	T6
3	25 to 34,	T6
4	35 to 44,	T6
5	45 to 54,	T6
6	55 to 64, or	T6
7	65 or older?	T6
-88	Refused	T6
-99	Don't know	T6

T6. [IF T4 > 1] Including yourself, how many people currently living in your home year-round are in the following age groups? [TOTAL SHOULD EQUAL T4.]

1	Less than 18 years old	[RECORD NUMBER]	T7
2	18 to 24	[RECORD NUMBER]	T7
3	25 to 34	[RECORD NUMBER]	T7
4	35 to 44	[RECORD NUMBER]	T7
5	45 to 54	[RECORD NUMBER]	T7
6	55 to 64	[RECORD NUMBER]	T7
7	65 or older	[RECORD NUMBER]	T7
-88	Refused		T7
-99	Don't know		T7

T7. What is the highest level of education you have completed?

1	No schooling		T8
2	Less than high school		T8
3	Some high school		T8
4	High school graduate or equivalent (e.g., GED)		T8
5	Trade or technical school		T8
6	Some college		T8
7	College degree		T8
8	Some graduate school		T8
9	Graduate degree		T8
-88	Refused		T8
-99	Don't know		T8

T8. Which of the following best represents your annual household income from all sources in 2007, before taxes? Was it . . . ?

1	Less than \$20,000 per year,		T9
2	\$20,000-49,999,		T9
3	\$50,000-74,999,		T9
4	\$75,000-99,999,		T9
5	\$100,000-149,999,		T9
6	\$150,000-199,999, or		T9
7	\$200,000 or more?		T9
-88	Refused		T9
-99	Don't know		T9

T9. Are you Spanish/Hispanic/Latino?



0	No	T10
1	Yes	T10
-88	Refused	T10
-99	Don't know	T10

T10. What is your race? [ACCEPT MULTIPLE RESPONSES.]

1	White	T11
2	Black or African American	T11
3	American Indian or Alaska Native	T11
4	Asian	T11
5	Chinese	T11
6	Japanese	T11
7	Korean	T11
8	Vietnamese	T11
10	Filipino	T11
11	Native Hawaiian	T11
12	Guamanian or Chamorro	T11
13	Samoan	T11
-77	Other (specify)	T11
-88	Refused	T11
-99	Don't know	T11

T11. What is the primary language spoken in your home? [DO NOT READ LIST.]

1	English	T12
2	Spanish	T12
3	Mandarin	T12
4	Cantonese	T12
5	Tagalog	T12
6	Korean	T12
7	Vietnamese	T12
8	Russian	T12
9	Japanese	T12
-77	Other (specify)	T12
-88	Refused	T12
-99	Don't know	T12

T12. RECORD GENDER [DO NOT ASK.]

1	Male	7
2	Female	7
-99	Don't know	7

Confirm Mailing Address for Gift Certificate



Those are all of the questions I have for you today.

1. As our way of saying thank you for your time, we'd like to send you a \$20 gift card to [STORE] or to Amazon.com. Which of these two would you prefer?

1	[STORE]	2
2	Amazon.com	2
3	Either is fine	2
4	Do not want gift card	8

2. Could I please have your full name and mailing address [so I can mail you the gift card]?

	[RECORD FIRST AND LAST NAME] [RECORD STREET] RECORD CITY / STATE / ZIP]	4
-99	Refused	3
-88	Don't know	3

3. Without an address we will be unable to send you the \$20 gift card as a way of saying thank you for participating in the study. Do you want to provide your mailing address?

0	Will not provide address	8
1	Will provide address	2

4. I'd like to make sure we have the best phone number for you in case we have a problem mailing the gift card. Is the number I called today the best number to use?

0	No	5
1	Yes	6
-99	Refused	6
-88	Don't know	6

5. What's the best number for you?

	[RECORD NUMBER]	7
0	Unwilling to provide phone number	6

6. Okay, if we run into any trouble we'll give you a call back at the phone number we're using today. [GO TO 7.]

Thank & Terminate



7. Those are all of the questions I have for you today. You should receive your gift card within 2 to 4 weeks. Thank you for your time. (END.)

8. Those are all of the questions I have. Thank you for your time. (END.)

- 9) After having participated in the rebate program, would you consider participating in another PNM rebate program if one applied to you?
 - 1) Yes, I would
 - 2) Yes, I already have. If so, which program _____
 - 3) No, Why not: _____
 - 4) Don't know about the other programs
 - 5) I don't know about the other programs, but I would like to learn more. **(Point to PNM website)**
 - 98) Don't know

10) If any, what recommendations do you have to improve the program?

Positive/Neutral Comments	Negative/Neutral Comments
1) No suggestions	5) Increase Incentives
2) Easy program to use, no complaints	6) Expand the list of rebated equipment
3) Utility Staff was helpful	7) Lengthy process too much paper work
4) Provide more literature on other rebate programs	50) Other (write below)

I have just a few final background questions. We ask you these to better understand the customers who use the programs.

- 11) Do you own or rent your home?
 - 1) Own
 - 2) Rent
 - 50) Other: _____
 - 99) Refused

12) Is this your primary residence? Primary _____ Other: _____
 Vacation/Seasonal _____

- 13) How many people currently live in your household in the following age ranges?
 - 1) Under 18 _____
 - 2) 18 to 49 _____
 - 3) 50 to 64 _____
 - 4) 65 or more _____
 - 99) Refused

- 14) What is your household's primary language?
 - 1) English
 - 2) Spanish
 - 50) Other: _____

This concludes our questions and we would like to thank you for participating in our evaluation.



Appendix C– On-site Inspection Forms

1.1 PNM Electric Energy Efficiency Program Energy Saver Kit Onsite Instrument

Site ID:		Date/Time:	
Contact Name:		Phone Number:	
Verified Address:	Street:		
	City:	Zip:	
Surveyor Name:			

OBTAIN TRACKING DATA BEFORE PERFORMING SITE VISIT!

Installed Energy Saving Measures

	Type	Verified?	Notes (if uninstalled notate why)
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
10)			



General Characteristics

1. What is the square footage of the home?

Sqft: _____

What is the average age of the home?

Year built: _____

2. What type of cooling system is in place? (check primary)

A/C

Heat Pump

Evaporative

Other _____

3. What is the efficiency of the cooling system?

Efficiency _____

OR

Make _____ Model _____



Weatherization Measures – Manual J Calculation Data
ONLY IF WEATHERIZATION MEASURES PRESENT

GENERAL				
Front Orientation of Home?	N	S	E	W
What is the average ceiling height?				
Total # of people that live in the home?				
What is the color of the roof? (choose one)	Light	Dark		
Duct System Location? (circle)	Attic	Crawl	Garage	Other
	If other explain:			

WALL/ROOF		
Wall framing type?	2x4	2x6
	If other explain:	
Total wall area to Ambient		
Total wall area to Attic (Knee Wall)		
Total wall area to Garage		
Total ceiling area to Attic		
a. Attic insulation R-value/#inches		
b. Attic insulation type	Blown-in	Batt
Total Door Area		

FLOOR/SLAB	
Slab on Grade	
Crawlspace	
Over Open Space	
Over Garage	
Over Other	
	If other explain:

SECONDARY WINDOW TYPE			
Window Type	Vinyl	Metal	Wood
Number of Panes	Single	Double	Triple
Low-E	Yes	No	
Window Area			
a. North Orientation			
b. South Orientation			
c. East Orientation			
c. West Orientation			

PREDOMINANT WINDOW TYPE			
Window Type	Vinyl	Metal	Wood
Number of Panes	Single	Double	Triple
Low-E	Yes	No	
Window Area			
a. North Orientation			
b. South Orientation			
c. East Orientation			
c. West Orientation			

SKYLIGHT			
Window Type	Vinyl	Metal	Wood
Number of Panes	Single	Double	Triple
Curb Mounted	Yes	No	
Glazing Type			
Skylight Area			



PNM Business Lighting Verification Onsite Form

SITE OVERVIEW

Metered _____

Site Name

RLWID

Address 1

Address 2

City

State

Zip

Rebate No.

Bus Type

Program

Stratum

Sqft

CONTACT INFO

Name

Title

Phone 1

Email

Phone 2

Notes

CHECKLIST

Overview

- Site Overview
- Contact Information
- Participant Free Rider/Spillover (If not completed by Phone Staff)
- Lighting Measures Form

Inspection

- Inspect Qty/Type of Efficiency Measures
- Emergency/Exit lights - Quantify and exclude from monitoring
- Occupancy sensors – Verify installation
- Take Digital Photos if Useful

Operation – Review Phone Responses

-
- Interview for Operating Schedules
 - Any Changes to Facility since Installation (timing and extent)
 - Seasonality for Typical Annual Schedules

Measurements

- Install Monitoring Equipment

Schedules

	Area	Average Daily Hours	Seasonal Variation			
1			Sp:	Su:	Fa:	Wt:
2			Sp:	Su:	Fa:	Wt:
3			Sp:	Su:	Fa:	Wt:
4			Sp:	Su:	Fa:	Wt:
5			Sp:	Su:	Fa:	Wt:
6			Sp:	Su:	Fa:	Wt:

General Schedule Notes:

Tracking Data

Measures	Pre		Post		Logger			
	Fixture Count	Pre Watts	Fixture Count	Installed Watts	Area	Logger ID	Time	Location
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								



Appendices

PNM Electric Energy Efficiency Program Residential & Commercial Advanced Evaporative Cooling Onsite Instrument

Site ID:		Date/Time:	
Contact Name:		Phone Number:	
Verified Address:	Street:		
	City:	Zip:	
Surveyor Name:			
Construction Type:	New Construction <input type="checkbox"/>	Existing <input type="checkbox"/>	
Building Type:	Residential <input type="checkbox"/>	Commercial <input type="checkbox"/>	
Age of Bldg:		Square Footage:	

Rebated Evaporative Cooling Systems

Rebate Type:	ICM <input type="checkbox"/>	ICM w/ Evap Unit <input type="checkbox"/>	Indirect / Direct Unit <input type="checkbox"/>	100% Indirect Unit <input type="checkbox"/>
Evaporative Cooling Unit				
Evap Unit Manufacturer:			New <input type="checkbox"/>	Existing <input type="checkbox"/>
Evap Unit Model #:		Evap Unit Serial #:		
Indirect Cooling Module				
ICM Manufacturer:				
ICM Model #:		ICM Serial #:		

Replaced Equipment* (If existing construction collect any available information from site contact on replaced equipment.)

AC Manufacturer:		HVAC System Type:	Package <input type="checkbox"/>	Split <input type="checkbox"/>
AC Model Number:		AC Serial Number:		
Age of Unit:				

Notes:

Glossary

Deemed savings – Estimate of energy savings associated with the installation of an energy efficiency measure, typically applicable to non weather dependent measures.

DEER – The Database for Energy Efficient Resources (DEER) is a California Energy Commission and California Public Utilities Commission (CPUC) sponsored database designed to provide well-documented estimates of energy and peak demand savings values, measure costs, and effective useful life (EUL) all with one data source. The users of the data are intended to be program planners, regulatory reviewers and planners, utility and regulatory forecasters, and consultants supporting utility and regulatory research and evaluation efforts. <http://www.energy.ca.gov/deer/>

EUL – Expected Useful Life, of a measure, expressed in years.

Ex Ante – Any program parameter estimate prior to program implementation, usually provided by program implementer.

Ex Post – Any program parameter estimate after program implementation, usually provided by independent program evaluator.

Free-rider – A program participant who would have implemented a program measure or practice in the absence of the program.

Gross savings – Energy/demand savings attributed to a program or measure including savings of free-riders.

Levelized cost - The levelized cost is a measure of the total costs of the program in a form that is sometimes used to estimate costs of utility-owned supply additions. It presents the total costs of the program to the utility and its ratepayers on a per kilowatt, per kilowatt hour, or per therm basis levelized over the life of the program.

Net-to-gross (NTG) – The ratio of net program impacts (savings) to gross program impacts (savings).

Net savings – Energy/demand savings attributed to a program or measure excluding savings of free-riders.

PAC – The Program Administrator Cost Test, is a cost effectiveness test which measures the net costs of a demand-side management program as a resource option based on the costs incurred by the program administrator (including incentive costs) and excluding any net costs incurred by the participant.

Power factor - The ratio of power actually used by a customer's electrical equipment to the total apparent power supplied, usually expressed as a percentage.

Participant (of a program) – Varies by program. For this evaluation unique program participants are determined by: PNM acceptance of a valid rebate form, unique household (account number), unique program year, and unique program. Program participant date is determined by rebate check date.

Spillover - Reductions in energy consumption and/or demand in a utility's service area caused by the presence of the DSM program, beyond program related gross savings of participants. These effects could result from: (a) additional energy efficiency actions that program participants take outside the program as a result of having participated; (b) changes in the array of energy-using equipment that manufacturers, dealers, and contractors offer all customers as a result of program availability; and (c) changes in the energy use of non-participants as a result of utility programs, whether direct (e.g., utility program advertising) or indirect (e.g., sticking practices such as b) above, or changes in consumer buying habits).

Total Resource Cost Test (TRC) - societal version – The Total Resource Cost Test is a cost effectiveness test which measures the net costs of a demand-side management program as a resource option based on the total costs of the program, including both the participants' and the utility's costs. This test represents the combination of the effects of a program on both the customers participating and those not participating in a program.

Tracking database – Program implementer maintained database which tracks various information about program participants, at a minimum including number of participants and gross savings per participant.