



# INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

*We Protect Hoosiers and Our Environment.*

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Eric J. Holcomb  
Governor

Brian C. Rockensuess  
Commissioner

July 2, 2024

Ronald A. & Ruby L. Hunt  
6148 E. 1400 N.  
Roann, Indiana 46974

Dear Homeowner:

Re: Geothermal Heating/Cooling Device  
Pursuant to IC 6-1.1-12-34  
Property Tax Deduction for  
Parcel Number: 52-03-10-300-001.002=014

The above referenced claim for a property tax deduction, attached State Form 18865 and supplemental attachments, submitted by the above referenced applicant, have been reviewed by this Office in accordance with IC 6-1.1-12-35.5. Please be advised that the heating/cooling system outlined in the claim for exemption (18865) qualifies as a geothermal system as defined in IC 6-1.1-12-34. The total amount of this claim shall be pursuant to IC 6-1.1-12-34(b). This certification does not include a determination as to the total actual or depreciated value of the claimed property.

This certification is for the life of the installed equipment and does not need to be requested on an annual basis. However, when the equipment is no longer in service, the owner of the equipment for which this certification is made must give written confirmation to the assessor of the township or county in which the equipment is installed.

Additionally, this certification does not include a determination as to the timeliness of the claim nor whether the property claimed for exemption is real or personal property.

**You must follow up with your county auditor's office and notify them of the successful certification of each geothermal unit. Also, they may require additional information regarding the unit(s).**

If you have any questions concerning this matter, you may contact our office at (317) 232-8670.

Sincerely,

*Kathryn Teachout*

Geothermal Division  
Operations Section  
Office of Water Quality

Certification/Approval Number: 2003479  
Ronald A. & Ruby L. Hunt



**STATEMENT FOR DEDUCTION OF ASSESSED VALUATION**  
 (Attributed to Solar Energy System or Solar, Wind, Geothermal, or Hydroelectric Power Device)

FORM SES / WPD

State Form 18865 (R11 / 10-15)  
 Prescribed by the Department of Local Government Finance

**INSTRUCTIONS:** To be filed in person or by mail by the owner of such property with the County Auditor of the county in which the property is located. A person who is no longer eligible for this deduction shall notify the County Auditor of this change. (IC 6-1.1-12-36)

- FILING DATES:**
- (1) **Real Property:** Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed or postmarked on or before January 5 of the following calendar year.
  - (2) **Mobile/Manufactured Home assessed under IC 6-1.1-7:** Must be completed, dated, and filed during the twelve (12) months before March 31 of the year the deduction is to be effective.
  - (3) **State Distributable Property under IC 6-1.1-8 (solar powered device only):** Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed on or before January 5 of the following calendar year.
  - (4) **Personal Property under IC 6-1.1-3 (solar powered device only):** Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed on or before January 5 of the following calendar year. In addition to filing this form for the deduction, an applicant must also attach a Form 103-SPD to either his personal property tax return or his amended personal property tax return for each year the deduction is desired.  
 (IC 6-1.1-12-26; 6-1.1-12-26.1; 6-1.1-12-27.1; 6-1.1-12-29; 6-1.1-12-30; 6-1.1-12-33; 6-1.1-12-34; 6-1.1-12-35.5; 6-1.1-12-36)

All claims for a deduction filed on a geothermal or hydroelectric system or device must be accompanied by proof of certification of qualification by the Department of Environmental Management pursuant to IC 6-1.1-12-35.5. **#2003479**

**CERTIFICATION STATEMENT**

I (We), Hunt, Ronald A & Ruby L certify that I (we) own or am (are) buying on contract or am (are) leasing the real property from the real property owner the following real property, mobile/manufactured home, state distributable property, or personal property that is subject to assessment and property taxation and for which a:

Solar Energy Heating or Cooling System     Wind Power Device     Geothermal Device     Hydroelectric Device

Solar Power Device\*:  Real     Mobile/Manufactured Home     State Distributable     Personal Property

\*Applies to a solar power device installed after December 31, 2011.

deduction from assessed valuation is hereby claimed in Miami county.

Date system/device was installed (month, day, year) <u>06/10/2024</u>	Total deduction claimed \$
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**PROPERTY DESCRIPTION**

Taxing District (city, town, township) <u>Roann, Perry Township</u>	Township <u>Perry Township</u>	Legal description or key number <u>PT SW 1/4 10-29-05 14.323</u>
If a deduction was allowed last year, have there been any changes in the property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Parcel number <u>52-03-10-300-001.002-014</u>
Address of owner (number and street, city, state, and ZIP code) <u>6148 E 1400 N Roann, IN 46974</u>		
I (We) hereby certify that the above statement is true, correct, and complete.		Signature <u>Ronald Allen Hunt</u>
		Date (month, day, year) <u>July 1, 2024</u>

**FOR AUDITOR'S USE ONLY**

	Assessment Date First Effective 20__ Payable 20__
1 Total assessed value of real property or mobile/manufactured home including qualifying device/system.	\$
2(a) For wind; geothermal; hydroelectric; real property or mobile/manufactured home with a solar powered device: Enter the assessed valuation without the qualifying device/system.	
2(b) For solar energy system only: Out-of-pocket expenditures for components and installation labor.	
2(c) For personal property solar power device deduction: Enter amount calculated on Form 103-SPD.	
2(d) For state distributable solar power device deduction: Enter assessed value of qualifying equipment.	
3 Deduction: Line 1 minus Line 2(a); or enter the actual amount shown on Line 2(b), 2(c), or 2(d).	

**VERIFICATION BY ASSESSING OFFICIAL**

Is property recommended for deduction? <input type="checkbox"/> Yes <input type="checkbox"/> No	Recommended deduction	Comments, if any
Signature of assessing official <u>Karen LeMaster</u>	Printed name of assessing official <u>Karen LeMaster</u>	Date signed (month, day, year) <u>7-1-24</u>

**FINAL DETERMINATION OF COUNTY AUDITOR**

Deduction determined by County Auditor for assessment date of _____, 20__ payable in 20__.	Approved deduction \$
Signature of county auditor <u>Mary A. Brown</u>	Date signed (month, day, year) <u>7/1/2024</u>
Description or reasons for change:	

GEOHERMAL INFORMATION FOR DEDUCTION

PARCEL NUMBER 52-03-10-300-001.002-014

Name of Property Owner Ronald A & Ruby L Hunt

Address of Property Owner 6148 E 1400N ROANN IN 46974

Phone Number of Property Owner (260) 578-0635

What Type of System do you have?

Horizontal Close Loop System

Vertical Closed Loop System

Open Discharge Open Loop System (pulls for a well & returns to ditch or another outlet)

Return Well Open Loop (pulls from a well & returns to a separate well)

How Many Tons is the System?

2 Tons

4 Tons

2.5 Tons

5 Tons

3 Tons

6 Tons

3.5 Tons

When was System installed? Year 2024

Make Water Furnace Serial# 240501212

Model NDV038K101NTR0AA

AFTER COMPLETION PLEASE RETURN THIS FORM TO THE AUDITOR'S OFFICE FOR USE ON THE  
GEOHERMAL DEDUCTION APPLICATION





# RESIDENTIAL 10 YEAR PARTS AND LABOR LIMITED WARRANTY CERTIFICATE

**LIMITED WARRANTY.** WaterFurnace International, Inc. (WFI) warrants the heat pump unit identified by the serial number on this certificate and all WFI accessories originally sold and installed with this product ("Product") against failure due to defects in material or workmanship under normal use and maintenance when properly installed in a single family owner occupied dwelling (Residential) for the Warranty Period defined in the chart below. This limited warranty is subject to all the provisions, conditions, limitations and exclusions stated on this certificate.

**REGISTRATION AND TRANSFER:** This limited warranty extends to the original owner of the Product and any subsequent owner of the Product (so long as all the conditions of the limited warranty are met). Registration is not required and this limited warranty transfers automatically.

USE OF EQUIPMENT	ITEM	COVERAGE	WARRANTY PERIOD*	
			Original Owner	Subsequent Owner
Owner-occupied Single-Family Dwelling	Heat Pump	Internal Parts	10 years	Balance of 10 years
	Heat Pump	Scheduled Labor and Refrigerant allowance	10 years	Balance of 10 years
	Heat Pump	Parts, Scheduled Labor allowance	5 years	Balance of 5 years
Other Installations (Small Businesses, Nursing Homes, etc.)	Heat Pump	Internal Parts Only	18 months	Balance of 18 months
	Heat Pump	Part Only	12 months from Ship Date	Balance of 12 months

\*The warranty period begins on the WARRANTY START DATE as defined below:  
 If the actual start-up date cannot be verified, the Warranty Start Date shall be the date of original shipment of the Product from the distributor.  
 The Warranty Start Date shall not exceed 12 months from the date of shipment.  
 The Warranty Start Date shall be the date of documented Start-up.  
 WFI will be the Contractor's responsibility to provide documentation of the actual Start-up (not occupancy) date in a form acceptable to WFI. The documentation may be added but will not be limited to Start-up form, specific work orders and etc.

**Model Number**  
NDV038K10INTR0AA

**Serial Number**  
240501212

**Warranty Start Date**  
June 10, 2024

**CLAIMS AND REMEDIES.**

- If the Product fails due to a defect covered under the terms of this Certificate within the applicable Warranty Period, WFI, at its option, will provide repair, refund or replacement part.
  - You are responsible for providing access for removal and repair of defective parts upon request.
  - You will not be charged for the replacement of defective part replaced under circumstances not otherwise excluded.
  - Applicable labor and/or refrigeration allowances will be limited and only in accordance with WFI Product literature.
  - The replacement part is warranted under this Certificate for the balance of the original Warranty Period.
- To make a claim under this Certificate, you must notify your Service Provider within thirty (30) days of the Product failure on which your claim is based. While service can be performed by any company, we recommend you call your WFI Dealer. Improper or incorrectly performed maintenance or repair causing defects or damage voids this warranty. To find a WFI Dealer in your area:
  - Look for a label on your equipment or check the documentation received with the Product
  - Go to [www.waterfurnace.com](http://www.waterfurnace.com).
  - Call WFI @ (800) 994-5667
- Except as otherwise stated in this Certificate, the remedies set forth above are the sole and exclusive remedies for a Product defect.

**THIS LIMITED WARRANTY DOES NOT COVER:**

- Actual costs incurred for any and all labor or materials, including without being limited to refrigerant recharging, for the installation, repair, adjustment, or replacement of any part or component specified in the Labor Allowance Schedule.
- Costs of normal maintenance, including without being limited to cleaning and/or replacement of filters; and
- Damages, including without being limited to damages to the Product, caused by or related to use of parts not included in the Product, whether or not supplied, approved or designated by WFI and whether or not necessary for use of the Product.
- Product relocated after original installation and parts or accessories added after the original installation. Product failures or performance issues caused by or related to improper selection or installation of Product or related components, including without being limited to improper selection of the size of Product or related components, improper duct and/or distribution system, and improper installation or choice of open or closed loop system;
- Product failure or performance issues caused by or related to misapplications, improper voltage, blown fuses, improper operation or improper maintenance or repair;
- Damages caused by or related to misuse, abuse, unauthorized alteration, flood, wind, fire, lightning, accidents, corrosive environments, acts of God, or other conditions beyond the control of WFI;
- Electricity or fuel costs, including without being limited to increases or related savings in electricity or fuel costs, for any reason whatsoever;
- Damages caused by or related to improper conditioning of the water supplied to the heat exchangers, fouling of the water supply or HVAC system by foreign material or lime causes;
- Product that has been altered or subjected to mechanical tempering;
- Product from which the WFI serial number has been removed;
- Products sold outside the United States or Canada.
- Warranty on items that are purchased via the internet or installed by persons without proper training.

**THE TERMS OF THIS CERTIFICATE, INCLUDING WITHOUT BEING LIMITED TO ALL LIMITATIONS AND EXCLUSIONS, INURE TO THE BENEFIT OF WFI, ITS SUPPLIERS AND ITS SUBCONTRACTORS AND THE SUCCESSORS AND ASSIGNS OF ANY AND ALL OF THEM.**

**THIS CERTIFICATE GIVES YOU SPECIFIC LEGAL RIGHTS, AND YOU MAY ALSO HAVE OTHER RIGHTS WHICH VARY FROM STATE TO STATE.**



Register your geothermal products

### Confirm Information

Please confirm that your information is correct below.

To make changes click on 'Make Changes' or use your browser's back button.

### Product Information

Model Number: NDV038K101NTR0AA  
Serial Number: 240501212  
Install Date: 06/10/2024  
Dealer Name: Jones Contracting Inc  
Loop Type: Vertical  
Installation Type: Replacement

### Personal Information

Owners Name: Ron Hunt  
E-Mail: -  
Address 1: 6148 E. 1400 N.  
Address 2: -  
City: Roann  
State/Province: IN  
Zip/Postal Code: 46974  
Day Phone: 260-578-0635  
Cell Phone: -

[Contact Us](#)

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9000 Conservation Way, Fort Wayne, IN 46809