

APPLICATION

Home Energy Assessment



NYSERDA

Most New York homeowners can receive a home energy assessment for free or at a reduced-cost through the Home Performance/Assisted Home Performance with ENERGY STAR® program. The assessments are available on a first come, first served basis. **Save time and apply online at nyserdera.ny.gov/apply-online**

To qualify, you need to meet these requirements:

1. You must be the owner, or be authorized to sign for the owner, of a 1- to 4-unit residential building.*
2. Your total household income must meet the guidelines on page 2.
3. You must not have previously received a free or reduced-cost assessment on the building listed below.

APPLICANT/HOMEOWNER INFORMATION (Please complete all fields, sign and date this application)

First Name	Middle Initial	Last Name	NY	
Building Address	City	County	State	Zip
Mailing Address (if different than the above)	City		State	Zip
()	()			
Home Phone	Cell Phone	Email Address		
Residential Building Type (5+ units do not qualify)*		Do you have Central Air Conditioning?		
<input type="checkbox"/> Single Family	<input type="checkbox"/> 2-Unit	<input type="checkbox"/> 3-Unit	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> 4-Unit				

HOUSEHOLD INCOME RANGE

Is your household income less than \$99,600?

- Yes If no, then please refer to attached chart and indicate your annual household income range below.
- ≤ 200% AMI** ≤ 250% AMI ≤ 300% AMI ≤ 350% AMI ≤ 400% AMI

HOW DID YOU HEAR ABOUT HOME PERFORMANCE WITH ENERGY STAR? (Optional)

Please select all that apply:

- Print Ad TV Radio Internet Event/Home Show Neighbor/Friend/Family Contractor
- EDGE Regional Outreach Contractor Real Estate Professional Town, Village, City, County NYSERDA
- Constituency-Based Organization (CBO) Name: _____

ELIGIBILITY DECLARATION

By signing below, I certify that the information listed on this form is true and accurate to the best of my knowledge and belief. I understand that my signature on this form gives permission for NYSERDA, or its designee, to verify my eligibility for a free or reduced-cost assessment. I understand that false or withheld information may result in penalties.

X

Applicant/Homeowner's Signature

Date

When complete, please mail, fax, or email the signed application to:
 Mail: Home Energy Assessments Fax: (866) 335-6306
 PO Box 12129 Email: HPwES-Audit@csgpr.com
 Albany, NY 12212

*Condo, co-op, not-for-profit, or mobile home owners please call (855) 838-7818 to see if you are eligible.

**Area Median Income (AMI) represents the statistical midpoint in household earnings for each county.

Need Help? Call (855) 838-7818

- Please send a copy of my home energy assessment Reservation Number to the Home Performance Contractor that I have chosen below. NYSERDA does not assign contractors.



Contractor Name



NY Home Performance with ENERGY STAR® Energy Usage History Waiver



APPLICANT INFORMATION

First Name Middle Initial Last Name

I am currently unable to provide the energy usage information required by NYSERDA. Please select **one** of the following options:

- I am a new homeowner (less than 12 months) and do not have access to previous usage records.
I have lived in my home for _____ months.
- I do not retain the records of my heating fuel usage, and am unable to obtain these records from my provider(s).
- I have ____ rental unit(s) in my building and the tenant(s) is/are unable to provide usage data.

PROPERTY INFORMATION

Building Address Unit # City County ZIP Code

ENERGY USAGE HISTORY

Please complete for **all** fuel types that require the Energy Usage History Waiver. I estimate that my **yearly** usage is:

_____ Gallons of Heating Oil	_____ Pounds/Gallons of Propane (circle one)	_____ CCF of Natural Gas
_____ kWh of Electricity	_____ Cords of Wood	_____ Pounds/Tons of Pellets (circle one)
_____ Pounds/Tons of Coal (circle one)	_____ Other	_____ Other

Primary Heating Fuel _____

FUEL TYPE	MONTH / YEAR	DELIVERY AMOUNT	PROVIDER	FUEL TYPE	MONTH / YEAR	DELIVERY AMOUNT	PROVIDER

I certify that the energy usage information provided above is accurate to the best of my knowledge. I understand that NYSERDA requires **12 to 24 months** of energy usage data in order to provide the most accurate savings and payback information for all proposed work to my home. All materials that include savings, calculations, payback schedules, or that are derived from my current energy usage will not necessarily reflect actual savings. I consent that NYSERDA and its designees have the authority to estimate my energy usage information.

Signature _____ Date _____