

Submitting Application

If you are interested in a FlexTech Energy Audit, please fill out the application and submit to the service provider for your region.

Region 1 - C.J. Brown Energy

Contact: Wayne Balas
 Phone: 716-565-9190
 FAX: 716-633-5598
 Email: wbalas@cjbrownenergy.com

Region 2 - L&S Energy Services

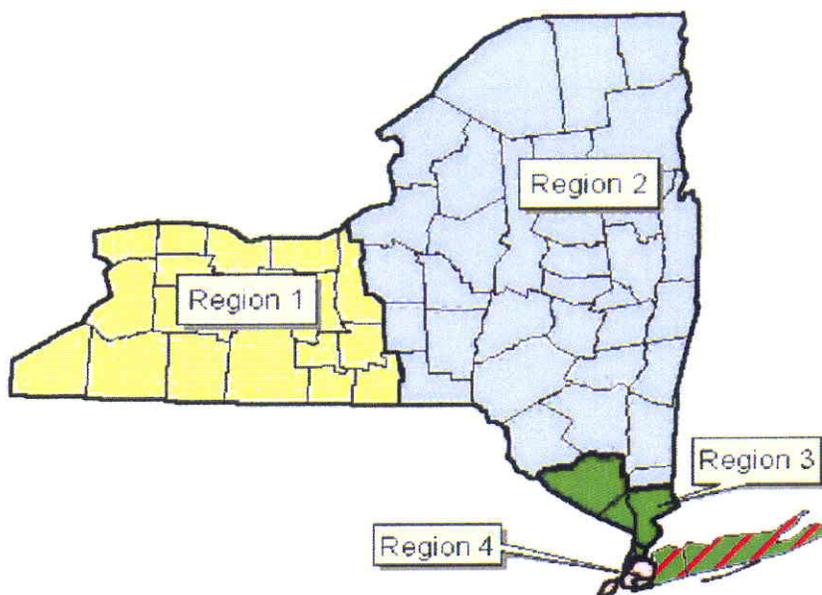
Contact: Michelle Wooddell
 Phone: 518-383-9405 x223
 FAX: 518-383-9406
 Email: MWooddell@LS-Energy.com

Region 3 - Daylight Savings

Contact: Frank Lauricella
 Phone: 845-291-1275
 FAX: 845-291-1276
 Email: flauricella@daylightsavings.us

Region 4 - EME Group

Contact: Saumya Puthenveetil
 Phone: 212-529-5969
 FAX: 212-529-6023
 Email: sputhenveetil@emegroup.com



Region 1 Counties

Chautauqua, Cattaraugus, Erie, Niagara, Orleans, Genesee, Wyoming, Allegany, Monroe, Livingston, Steuban, Ontario, Yates, Wayne, Seneca, Schuyler, Chemung, Tompkins, Tioga, Cayuga

Region 2 Counties

Dutchess, Columbia, Greene, Rensselaer, Albany, Schoharie, Otsego, Washington, Saratoga, Schenectady, Montgomery, Fulton, Herkimer, Oneida, Madison, Onondaga, Oswego, Jefferson, Lewis, Hamilton, Warren, Essex, Clinton, Franklin, St. Lawrence, Cortland, Broome, Chenango, Delaware, Sullivan, Ulster, Putnam

Region 3 Counties

Orange, Rockland, Westchester, Bronx, Nassau, Suffolk

Region 4 Counties

Kings, Queens, Richmond, New York, Nassau, Suffolk

**GREEN JOBS-GREEN NEW YORK
FREE/REDUCED-COST ENERGY AUDIT APPLICATION**

Green Jobs-Green New York (GJGNY) provides **income eligible owners of one-to-four unit residential buildings** the opportunity to receive a free or reduced-cost residential energy audit.

To qualify for a free/reduced cost residential energy audit you must (1) own the 1-4 unit residential building, (2) have a total household income at or below the limits indicated below, (3) have not previously received a free/reduced cost audit, and (4) provide a 12-24 month summary of the **electric and heating usage** for the building .

Free/reduced cost residential energy audits are available on first-come, first-served basis until funds are fully committed. Applicants that meet the eligibility and supporting documentation requirements will receive a **Reservation Number** along with terms and conditions from the Program. Applicants will have 90 days to have their residential energy audits completed by a Participating Home Performance with ENERGY STAR Contractor. Please complete all required fields, sign and date application.

Applicant Information

First Name _____ Last Name _____

Building Address _____ City _____ County _____ Zip _____

Mailing Address (if different than the above) _____ Unit # _____ City _____ County _____ Zip _____

Home Phone () - - Cell Phone () - - E-mail Address _____

Residential Building Type (5+ units do not qualify)
 Single Family 2-Unit 3-Unit 4-Unit
 Above Grade Conditioned Square Footage of Building _____

How did you hear about the Program? (Select one from each line)

Constituency Based Organization Contractor NYSERDA Neighbor/Friends Municipality Energy Smart Coordinator Other
 Newspaper Circular / Flyer Home Show Verbal Radio Television Internet Other

Project Finance Preference?

GJGNY Loan Home Equity Loan Out-of-Pocket Personal Loan

Household Income Range (please use the attached household income chart)

My total household income is:
 (Households with total income over 400% Area Median Income (AMI) do not qualify) ≤ 200 % AMI ≤ 250 % AMI ≤ 300% AMI ≤ 350% AMI ≤ 400% AMI

Energy Supplier Information

Electric Utility _____ Account Number: _____ Does the Building listed above have central air conditioning? _____
 Gas Utility _____ Account Number: _____
 Other Fuel Supplier _____ Oil Propane Other _____ Account Number _____

IMPORTANT ENERGY USAGE DATA REQUIRMENT - You must provide **the monthly electric and primary heating fuel usage** for the building listed above for 12 - 24 months. Your energy supplier can provide you with this information.

Applications received with incomplete energy usage data will not be approved.

Eligibility Declaration

I certify that I am the owner of the building listed above and the income of all the persons in my household is not more than the amount shown and that the other information I have given on this form is correct 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 records necessary to assure my eligibility for a free/reduced cost GJGNY residential audit. I understand that if I give false information or withhold information in order to make myself eligible for benefits that I am not entitled to, I can be prosecuted to the fullest extent of the law.

Applicant's Signature

Date

When complete, please mail, fax, or e-mail the signed application and supporting energy usage documentation to:

Please send a copy of my GJGNY Audit Reservation Number to the Home Performance Contractor Listed Below:

GJGNY Audit Fax: (866) 335-6306
 Mail: PO Box 12129
 Albany, NY 12212 E-mail: GJGNY-Audit@csgroup.com

Contractor Name _____ E-mail Address _____