

2016-2017 NY Residential Existing Homes Program
Contractor Participation Agreement
SIGNATURE FORM



SECTION 1: COMPANY INFORMATION

Please type or print legibly. Only forms with an original signature from the authorized company contact will be accepted for program review.

My company is A New Participant Renewing Participation

My company is interested in serving the following groups of customers (check all that apply)

- Home Performance with ENERGY STAR / Assisted Home Performance with ENERGY STAR
- EmPower New York (Applicants must also complete the low-income addendum)

Legal Company Name

(company name must match the Taxpayer ID # or SSN)

DBA - (if different than name above dba certificate must be attached)

Physical Address

Mailing Address (if different)

Address

Address

City

City

State

Zip Code

State

Zip Code

County

Main Phone Number

Fax

Company Website

Year Company
Established

Year Received BPI
GoldStar Accreditation

Company BPI Certificate ID#

SECTION 2: AUTHORIZED COMPANY CONTACT

Authorized Contact Name

Title

(must have legal signatory rights to enter into a contractual agreement on behalf of the company listed above)

Email

Phone

SECTION 3: SERVICE AREA

For Home Performance with ENERGY STAR, the following information will be used on the contractor profile web page (nysesda.energysavvy.com/contractors) where homeowners search for contractors by entering their ZIP code. If you select option 1 below, the search will be performed from the center of the service area you select. If you select option 2, the search will be performed from the center of the ZIP code where your company is located. Please select only one option (by county OR radius, not both).

For EmPower NY participants, this information will be used for project assignments.

It is the contractor's responsibility to obtain all required licenses and permits in the regions in which they provide services per the terms outlined in the Participation Agreement.

My Company would like to serve projects ... (1) Within the counties selected below (2) Within a defined radius Radius (miles)

Western New York <input type="checkbox"/> Allegany <input type="checkbox"/> Cattaraugus <input type="checkbox"/> Chautauqua <input type="checkbox"/> Erie <input type="checkbox"/> Niagara	Finger Lakes <input type="checkbox"/> Genesee <input type="checkbox"/> Livingston <input type="checkbox"/> Monroe <input type="checkbox"/> Ontario <input type="checkbox"/> Orleans <input type="checkbox"/> Seneca <input type="checkbox"/> Wayne <input type="checkbox"/> Wyoming <input type="checkbox"/> Yates	Central New York <input type="checkbox"/> Cayuga <input type="checkbox"/> Cortland <input type="checkbox"/> Madison <input type="checkbox"/> Onondaga <input type="checkbox"/> Oswego	North Country <input type="checkbox"/> Clinton <input type="checkbox"/> Essex <input type="checkbox"/> Franklin <input type="checkbox"/> Hamilton <input type="checkbox"/> Jefferson <input type="checkbox"/> Lewis <input type="checkbox"/> St. Lawrence	Mohawk Valley <input type="checkbox"/> Fulton <input type="checkbox"/> Herkimer <input type="checkbox"/> Montgomery <input type="checkbox"/> Oneida <input type="checkbox"/> Otsego <input type="checkbox"/> Schoharie
Capital Region <input type="checkbox"/> Albany <input type="checkbox"/> Columbia <input type="checkbox"/> Greene <input type="checkbox"/> Rensselaer <input type="checkbox"/> Saratoga <input type="checkbox"/> Schenectady <input type="checkbox"/> Warren <input type="checkbox"/> Washington	Southern Tier <input type="checkbox"/> Broome <input type="checkbox"/> Chemung <input type="checkbox"/> Chenango <input type="checkbox"/> Delaware <input type="checkbox"/> Schuyler <input type="checkbox"/> Steuben <input type="checkbox"/> Tioga <input type="checkbox"/> Tompkins	Mid-Hudson <input type="checkbox"/> Dutchess <input type="checkbox"/> Orange <input type="checkbox"/> Putnam <input type="checkbox"/> Rockland <input type="checkbox"/> Sullivan <input type="checkbox"/> Ulster <input type="checkbox"/> Westchester	New York City <input type="checkbox"/> Bronx <input type="checkbox"/> Kings <input type="checkbox"/> New York <input type="checkbox"/> Queens <input type="checkbox"/> Richmond	Long Island <input type="checkbox"/> Nassau <input type="checkbox"/> Suffolk

SECTION 4: SERVICES

How does your company offer:

Comprehensive Energy Audits Complete own audits Another company completes audits

Please indicate companies you work with

Shell Work Complete work ourselves We subcontract work We refer work to others

Please indicate companies you work with

Heating Work Complete work ourselves We subcontract work We refer work to others

Please indicate companies you work with

Cooling (AC/Heat Pump) Work Complete work ourselves We subcontract work We refer work to others

Please indicate companies you work with

Our company would like the Program to assist in identifying sub-contractors with complementary services/certifications

SECTION 5: CERTIFIED STAFF

Please identify all staff that will be working on projects through the Program and their certifications including BPI, SPFA, NATE, NORA and manufacturer's installation certifications. Use additional pages if necessary. The Program may request a copy of certificates or ID cards for certifications other than BPI.

Staff Name	BPI Certification #	BA	ENV	Heat	AC/HP	WHALCI	MFBA	Mfg. Hsg.	Other	Other Certifications
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SECTION 6: AFFILIATIONS WITH OTHER NYSERDA PROGRAMS

Please disclose your company's participation in other NYSERDA programs over the last five years.

- NYESH
 MPP
 PV/Solar Thermal
 RHNY

Other

Please disclose any staff affiliations with other NYSERDA programs in the past five years.

Staff Name	Previous Company(s)	NYESH	MPP	PV/Solar Thermal	RHNY	Other
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>
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SECTION 7: SIGNATURE

By signing below, I attest that I have legal signatory rights to enter into a contractual agreement on behalf of my company.

I have read, understand, and agree to comply with all participation commitments in NYSERDA's 2016-2017 NY Residential Existing Homes Program Contractor Participation Agreement, including all Participation Statuses and all supporting policies described or referenced therein. I understand that my participation in the Program is not approved until NYSERDA has reviewed and executed this Agreement.

I understand the provisions of this Agreement are effective from the date of execution by NYSERDA. NYSERDA reserves the right to modify, any any time during this Agreement term, the provision of this Agreement. I certify under the penalties of law that the statements made in the Agreement and in supporting documentation provided along with this agreement, have been examined by me and are true and complete. I understand that by signing this Agreement, I consent to any other inquiry to verify or confirm the information I have given. I hereby authorize any reference identified or provided to NYSERDA by Contractor release to NYSERDA any information pertaining to past or present relevant work. I hereby release from all liability or damage, NYSERDA and those persons, agencies or organizations who may furnish such information.

Signature of Authorized Company Contact

Print Name

Date

Electronic signatures will not be accepted. The signature above must match the name listed as the Authorized Company Contact on page 1 of this application. Please print, sign and then scan this application and submit to NYSERDA as directed below.

SECTION 8: SUPPORTING DOCUMENTATION/ATTACHMENTS & SUBMISSION INSTRUCTIONS

- Fully completed Contractor Participation Agreement
- One copy of a current insurance certificate with NYSERDA & The State of New York listed as additional insured
- One copy of a DBA certificate (if applicable)
- A minimum of 3 Customer References (For new applicants. Returning contractors may be asked to submit references)
- Detail of company and staff experience in energy efficiency sector (new applicants, renewing contractors with provisional program status or upon request from NYSERDA)
- Fully complete Addendum to the 2016-2017 NY Residential Existing Homes Program Participation Agreement to Provide Low-Income Services (only if applying to provide services through EmPower New York)

**EMAIL COMPLETED APPLICATION TO:
HPWES@NYSERDA.NY.GOV**

OR MAIL COMPLETED APPLICATION TO:
New York State Energy Research and Development Authority
Attn: NY Residential Existing Home Program
17 Columbia Circle
Albany, NY 12203

Applications missing any of the above required documentation will not be approved.

Any any time, if the information provided on this Participation Agreement Signature Form and any attachment changes, it must be reported to NYSERDA, in writing or via e-mail to HPwES@nyserda.ny.gov.

To ensure delivery to your inbox, add HPwES@nyserda.ny.gov to your safe senders list.