2019-2020 NY Residential Existing Homes Program Contractor Participation Agreement SIGNATURE FORM



SECTION 1: COMPANY INFORMATION

program re		signature from the authorized company contact will be accepted to	r					
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 ☐ Audit only								
EmPower New York								
Legal Company Name (company name must match the Taxpayer ID # or SSN)								
DBA - (if of must be atta	different than name above dba certificate ached)							
Physical .	Address	Mailing Address (if different)						
Address		Address						
City		City						
State	Zip Code	State Zip Code						
County		Fax						
Main Phone Number								
Company Website								
	SECTION 2: AUT	HORIZED COMPANY CONTACT						
Authorize	ed Contact Name	Title						
(must have legal signatory rights to enter into a contractual agreement on behalf of the company listed above)								
Email		Phone						
Owner Name Same as above								
Email		Phone						

SECTION 3: SERVICE AREA

For <u>Home Performance with ENERGY STAR contractors</u>, the following information will be used on the contractor profile web page (nyserda.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).

<u>For EmPower New York contractors</u>, this information will be used for project assignment purposes. If your EmPower territory is different than your Home Performance with ENERGY STAR territory please complete the information below and contact <u>support.residential@nyserda.ny.gov</u> to provide updates to service territory.

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

I certify my company and any subcontractors utilized on Program projects hold the necessary licenses and permits to perform work in the regions indicated below per the terms outlined in the Participation Agreement.

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

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

SECTION 4: CERTIFIED STAFF

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	Staff Name	Please disclose any staff affiliations with contractors who have been terminated from any NYSERD					My company provides the following services Audits Shell Heat AC Manufactures Please identify all staff that will be working on projects through the Program and their certifications including BPI, SPFA, installation certifications. Use additional pages if necessary. The Program may request a copy of certificates or ID cards Year Company Pear Received BPI Established GoldStar Accreditation Company BPI Certificate ID# BPI Envelope Professional BPI Crew Leader BPI Crew Leader BPI Crew Leader BPI Crew Leader BPI Retrofit Installer Technician BPI Heating Professional BPI Heating Professional BPI Heating Professional BPI Manufactured Housing PPI Manufactured Housing PPI Manufactured Installer in NYSSA) HERS Rater Approved Installer in NYSSA)		
		staff affili					es the following that will have actions. Use actions of the control of the contro		
		ations with contrac					the following services Audits Shell Healthy Home Evaluator BPI Certification BPI Envelope Professional BPI Envelope Professional BPI Crew Leader		
		tors wh					☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐		
Į		ıo hav					BPI Energy Auditor		
		e bee					BPI Healthy Home Evaluator BPI A C/l least Divers		
Page 3 of 4	Previ	n terminated from ar Previous Company	n terminated from					BPI AC/Heat Pump	
	ious C			inated					BPI Envelope Professional
	ompa							BPI Crew Leader equest	
of 4	ny	any N					BPI Quality Control Inspector		
		IYSEF					BPI Retrofit Installer Technician		
		RDA p					BPI Heating Professional entificus		
		rogra					BPI Manufactured Housing Professional His ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐		
		∃ E					HERS Rater Approved Installer in NYSERDA's Approved Installer in NYSERDA's		
		A program in the past 5 years							
		st 5 ye					NATE AC NATE,		
		ars					NATE Heat Pump		
Į							NATE Oil Heating		
							NATE Gas Heating		
							BPI Manufactured Housing Professional HERS Rater Approved Installer in NYSERDA's ASHP Program (PON 3653) NATE AC NATE Heat Pump NATE Oil Heating NORA Oil Heat Silver NORA Oil Heat Gold		
							NORA Oil Heat Gold		
							Manufacturer Authorized/Licensed Installer		
							Other		

SECTION 6: AFFILIATIONS WITH OTHER NYSERDA PROGRAMS
Please disclose your company's active or previous participation in other NYSERDA programs over the last five years.
NYESH MPP PV/Solar Thermal Solar For All RHNY ASHP Clean Heating & Cooling Other
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 2019-2020 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 approval 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 Signature Form
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)
Details of company and staff experience in the energy efficiency sector (required for all new applicants, renewing contractors with provisional program status or upon NYSERDA request)
☐ Employee roster of both certified and non-certified employees providing work experience, previous firms and training.
Contractors should provide documentation for a minimum of six months experience for each specialty measure work they are looking to perform through the Program.(Required for all new applicants and for returning contractors upon NYSERDA request)
A minimum of 3 Customer Reference letters detailing relevant energy efficiency projects performed within the last six months. (Required for all new applicants and for returning contractors upon NYSERDA request)
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

Albany, NY 12203

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

17 Columbia Circle

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.