

## Assisted Home Performance EmPower New York Toll Free 1-877-NY-SMART

## Homeowner Agreement

## PROOF OF OWNERSHIP IS REQUIRED TO COMPLETE THIS APPLICATION

I (Print Property Owner(s) Name Here)	certify that I am the owner of the property
(Print Property Owner(s) Name Here)	
located at:	
(Prin	t Property Address Here)
and further certify that I have given permission for New Yo and/or its independent contractors to work on the prope	
I understand that participating Assisted Home Performance and EmPower New York contractors are independent contractors and provide a one- year warranty on labor and materials for work completed. I further understand that contractors and vendors will provide information on all existing manufacturer warranties for any equipment installed.	
Customer Name:	Date:
Property Ownership Verified by Examination of:	Deed
_	Property Tax Bill
_	Mortgage Statement
_	Bill of Sale
_	Homeowners Insurance
Note: Utility bills are not acceptable as documentation of ownership	

Certifying Contractor:

Date: