

Residential Household Income Screening & Incentive Application

Only complete this application if you occupy the installation property. Information provided in this application may be used to determine the interest rate available to borrower(s) who submit a Credit Application for a loan to pay for the installation of a clean energy project to the property you occupy. Information provided will also be used to determine eligibility for an incentive to further help pay for the installation. Eligibility is based upon the total gross annual income of each household unit that completes an income screening application. Each household unit should complete a separate income screening application.

If you need additional information, call 1-800-361-5663.

First Name		Last Name			
Primary Phone No.	Ext.	Email Address	S		
Street				Unit #	
City		State	Zip	County	
Select One:	Rental Unit				
No. of Units:					
☐ Single Family ☐ 2-Family H	ome 3-Family Home	4-Family Home	☐ Mobile Hor	me	
Section B - Property Owner	er Information – c omp	olete this section only if	fthe property ow	ner is different than the applica	
First Name		Last Name			
Primary Phone No.	Ext.	Email Addres	SS		
Mailing Address (if different than ins	stallation address)			Unit #	
City		State	Zip	County	
Section C - Project Partner	Information				
Contractor Name (if known)				ation Name (if applicable)	

Section D – Energ	v Supplier Informa	ation					
	, - app						
Electric Utility Name		Account Number		Name on A	Account		
Electricity is paid by:	Owner Tenant						
Natural Gas Utility Name	e (if applicable)	Account Number		Name on <i>i</i>	Account		
Heat is paid by: ☐ Own	er □ Tenant						
Section E - Income	a Screening for In	tarast Rata & Inc	antiva				
Income information and				ing all housel	old members Provi	de all types of	
current gross annual inc	come for all residents of	the household, age 18	3 and over,	who are not f	ull-time students. If	listing income	
from self-employment, be pages, if needed.	ousiness, rental, or farm	ning income, list the ne	t income a	fter operating	expenses. Please us	se additional	
pagoo, ii noododi							
Household Occupant				Full-Time	Income Type	Current Annual	
Income	First Name	Last Name	Age	Student (Y/N)	(ex. Wages)	Income Amount	
Household Income				(1711)		\$	
Earner 1						\$	
						\$	
Household Income Earner 2						\$	
Lamor L						\$	
Household Income Earner 3						\$	
Lamer 3						\$	
Household Income						\$	
Earner 4						\$	
List All Non-Income Earning Household							
Members							
Total number of people in the household							
Navy Varile Overtons and							
New York Customers Are you currently eligible fo							
NYSERDA's low income security income. If your hou							
programs listed, please pro If your household has not re	ovide the service award let	ter. You do not need to pr	ovide any ac	lditional income	e documentation other	than the award letter	
requirements by either prov						oumentation	
If your household has not received these services, you may meet the income documentation requirements by either providing tax returns, or by							
documenting current sources of income for each household member. Social Security Numbers, Routing and Account Numbers, and any PINs must be blackened-out on these documents.							
Sidonoffed out off these dot	James III.						

Tax Returns: Provide a copy of the most recent Federal Income Tax Return (Form 1040, 1040A, or 1040EZ). If the borrower and co-borrower are providing tax returns to document income, all additional household members must also document income by providing tax returns. This option is only available if all household members required to file a return did file a return. If earning rental/self-employment income, submit Schedule C, E,

and F along with the return. If you do not have rental/self-employment income, you do not need to provide the Schedules or Forms filed with the return. If you do not have a copy of your return, you may request a transcription of your return to be mailed to you free of charge by completing IRS Form 4506-T or by going to IRS.gov and clicking on "Get a tax transcript", or by calling 1-800-908-9946.

OR

Individual Income Sources: If your current income is significantly different from the income on your last filed tax return, or if you have sources of income not included on your tax return, provide documentation of income for each individual listed in the table above per the table on the following page.



Wages/Salary/Commission	Copy of two most recent paystubs showing year-to-date gross earnings, or letter from employer stating gross year-to-date earnings			
Pension/Social Security	Copy of award letter for current year or copy of bank statement showing deposit sources and amounts			
401(k)/IRA/Interest Earnings	Copy of brokerage/account statements showing regular pattern of distributions			
Alimony	Copy of divorce decree or court order that established the support			
Self-Employment/Business Income/Rental Income/Farming Income	Copy of most recent Federal Income Tax Return with Schedule C, E, or F, or profit & loss statement for past 12 months. Alternatively, for rental income, you may also list income as 75% of the gross annual leases for the property, and submit a schedule listing the property units and the gross annual lease			

Section F – Income-Eligible Incentive Consent & Signatures

By Signing below, I/we certify that all information provided on this application, including statements and documents submitted in connection with this application, are correct and complete to the best of my knowledge. I acknowledge that my project partner has retained Energy Finance Solutions ("EFS"); services offered by Slipstream Inc. ("Slipstream"), to process and underwrite my/our income qualification application. If necessary, I further agree to provide additional information to EFS and Slipstream to underwrite my/our income screening application.

I further acknowledge and agree that my project partner and EFS may share with and disclose to, orally and/or in writing, the project partner(s) identified by me above, or as subsequently identified by me to EFS, the following information regarding this application: whether the application has been pre-approved by EFS, and any additional items requested by EFS in order to complete my income qualification application; whether the application has been approved by EFS, and the approved incentive amount so that my project partner(s) can proceed with scheduling the work; and whether my application has been denied, so that the project partner(s) can determine whether I intend to proceed.

I understand that my signature on this form gives permission for my project partner, or its designee, to verify records necessary to assure my program eligibility. 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.

I understand this application does not guarantee assistance will be granted but will be used in determining eligibility for the program. Whether or not an eligible applicant will be provided assistance will depend in part upon the number of applicants received, the remaining funding available, and the priorities to be met by the program.

Whether or not the undersigned have elected to sign this document electronically, EFS, and or any subsequent holders of this document, shall have the right to convert and store the manual signature electronically, and the undersigned consents to the use of the electronically stored version in the same manner as an original signed copy.

I understand and intend that a legal signature is formed by entering my name on this and other documents provided to me, and by entering my name on this and other documents provided in relation to this transaction I intend for my electronic signature to have the same force and effect as my manual signature. If any of the parties do not wish to sign this document electronically, all must opt out together and request a paper copy to sign manually.

By entering my name below, I am creating a legally binding signature and confirm that I agree and accept the electronic signature terms

and conditions.

One household member listed in Section F is required to sign and date below.					
Signature	Date				
Submit completed application to Energy Finance Solutions through one of the follow	wing methods:				

Mail: Energy Finance Solutions Fax: 608-249-5788 Email: efs@energyfinancesolutions.com 431 Catalyst Way Madison, WI 53719

For more information, please contact Energy Finance Solutions (EFS) Toll Free: 1-800-361-5663

