

2008/09 Home Performance with ENERGY STAR®
Contractor Partnership Agreement: Western New York Region
(Funded by New York Energy \$martSM)



Signature Form

I have read, understand, and agree to comply with, all partnership commitments described in NYSERDA's 2008/09 Home Performance with ENERGY STAR Contractor Partnership Agreement, including all supporting policies described or referenced therein. Additionally, I have read, understand, and agree to comply with, all additional conditions related to Assisted Home Performance with ENERGY STAR, including all supporting policies described or referenced therein.

I understand the provisions of this Agreement are effective from August 1, 2008 through December 31, 2009. NYSERDA reserves the right to modify, at any time during this Agreement term, the provisions of this Agreement. I certify, under the penalties of law, that the statements made in 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 agree to provide NYSERDA information on my organization. This information includes the organization's primary contact person. I further agree to identify any and all employees that have participated in any NYSERDA sponsored programs within the last five years. Because this is an ongoing requirement, I will notify NYSERDA immediately of any changes or updates to this information.

The **Western New York Region: New York Energy SmartSM Market** includes counties listed below. Please check one or more counties in this region that your business agrees to provide service.

- | | | |
|--------------------------------------|-------------------------------------|----------------------------------|
| <input type="checkbox"/> Allegany | <input type="checkbox"/> Chautauqua | <input type="checkbox"/> Niagara |
| <input type="checkbox"/> Cattaraugus | <input type="checkbox"/> Erie | |

NOTE: If the authorized company representative is different for business and consumer affairs, please complete the consumer contact information section. Unless otherwise indicated, the official company information will be posted on NYSERDA's website, www.GetEnergySmart.org. Please verify the information on the Get Energy Smart web site for accuracy.

| | Official Business | Consumer Contact & posted on www.GetEnergySmart.org |
|-------------------------|-------------------|--|
| Company Name: | | |
| Company Contact: | | |
| Company Address: | | |
| City, State & Zip Code: | | |
| Phone: | | |
| Fax: | | |
| E-Mail: | | |
| Website Address: | | |
| Tax ID: REQUIRED | | |

FOR ALL Home Performance with ENERGY STAR® PROGRAM PARTICIPANTS

Please provide disclosure of prior participation in NYSERDA's programs. Complete one of the following below.

1. No individual(s) including owners, principles, shareholders, associates and employees affiliated with _____ have previously participated in, or are currently participating

Company Name

In, any of NYSERDA's programs including Home Performance with ENERGY STAR and Assisted Home Performance with ENERGY STAR. Because this is an ongoing requirement, I shall notify NYSERDA immediately of any changes or updates to this information.

2. Below are listed the individual(s) including owners, principles, shareholders, associates and employees affiliated with _____ who have previously participated in, or are

Company Name

participating in, any of NYSERDA's programs including Home Performance with ENERGY STAR and Assisted Home Performance with ENERGY STAR. Because this is an ongoing requirement, I shall notify NYSERDA immediately of any changes or updates to this information.

Name of Individual

NYSERDA Program Name

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

NOTE: This signature form is customized for the Western New York Market Region. If you anticipate providing services in other Market Regions, please sign and submit the appropriate form. Signature forms for all Market Regions are included in this packet.

Participant's Signature

Authorized Signature: _____ Date: _____

NYSERDA Authorized Signature: _____ Date: _____

(New York State Energy Research and Development Authority)

NYSERDA will not accept faxed, copied, and e-mailed documents. Please mail the original completed and signed signature forms to:

**New York State Energy Research and Development Authority
17 Columbia Circle, Albany, NY 12203
ATTN: Residential Efficiency and Affordability Program**