

ID#:

Energy CENTS Coalition
Energy Savings Program Application



PLEASE PRINT

Name: _____ Phone : _____

Address: _____ City: _____ Zip: _____

1. Homeownership: YES, I own my home _____ NO, I am a tenant _____
2. Housing Type: Single family _____ Duplex _____ Triplex _____ Fourplex _____ Apartment _____ Mobile Home _____
3. How many people live in your home? _____
4. What is your household's gross annual (yearly) income? _____
5. Have you had any insulation added to your home in the past ten years? _____ YES _____ NO
6. Have you had a home audit or weatherization done by Community Action? _____ YES _____ NO
7. What is the approximate age of your FURNACE/BOILER _____ WATER HEATER _____
8. What is the age of your: REFRIGERATOR _____ WINDOW A/C _____ WALL A/C _____ FREEZER _____
9. Xcel account number: _____

Income Verification

Have you received a grant from Energy Assistance since October 1, 2014? _____ YES _____ NO*

If you did not receive Energy Assistance within the previous two years, please provide proof of income. (A copy of your federal tax return, copies of pay stubs for one month's earnings or proof of public assistance or Social Security payments, etc)

By signing this document, I am signing up for the Energy Savings Program. I also agree to allow the Energy CENTS Coalition to obtain information from Xcel and from other heating utility accounts and share that information with other organizations that provide energy conservation and other relevant services. I verify that all information on this application is, to the best of my knowledge, correct.

Signature _____ Date _____

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WEB