

ID#:



## Energy CENTS Coalition Electric Appliance Replacement Program

### PLEASE PRINT

Name: \_\_\_\_\_ Phone : \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

### Income Verification

Have you received a grant from Energy Assistance since October 1, 2014? \_\_\_ YES \_\_\_ NO  
**\*If yes, no proof of income is required\***

If you have *not* received Energy Assistance, please provide proof of income. You can either provide a copy of your latest federal tax return (no schedules required) or one-month's proof of income from all sources – wages (check stubs, letter from your employer), social security (copies of deposit slips or automatic deposits), public assistance, etc.

What is the household's annual (yearly) income (all people / all income sources)? \_\_\_\_\_

How many people live in your home? \_\_\_\_\_

Do you own the appliance you wish to replace: YES, I own \_\_\_\_\_ NO, I do not own \_\_\_\_\_

What is the approximate age of the appliance(s) you wish to replace:

Refrigerator: \_\_\_\_\_ Freezer \_\_\_\_\_ Window A/C \_\_\_\_\_ Wall A/C \_\_\_\_\_

You **MUST** include your **Xcel account number**: \_\_\_\_\_

If you cannot locate it please call Xcel at 1-800-895-4999.

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By signing this document, I am signing up for the Energy Conservation 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.

Signature \_\_\_\_\_ Date \_\_\_\_\_

823 East Seventh Street, St. Paul, MN 55106

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