

ELIGIBILITY APPLICATION

NY-Sun Affordable Solar Incentive



NY-Sun

Affordable Solar, part of the NY-Sun initiative, provides income-eligible homeowners with additional financial incentives for solar electric installations. To qualify for this program, you must:

- Own and occupy a single-family home or multifamily home of up to four units (depending on service classification of your electric meter).
- Have a household income that is at or below 80% of the State Median Income (SMI) or Area Median Income (AMI), whichever is greater.

NOTE: You may also be eligible for free or discounted home energy improvements through NYSERDA's EmPower or Assisted Home Performance with ENERGY STAR® programs. Visit nyserdera.ny.gov/program-finder or call 1-866-NYSERDA.

A. HOME INFORMATION

Address (of proposed solar electric system installation):

Street Address	Unit #	City	County	State	Zip
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Number of units:
(5+ does not qualify)

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Single-Family Home | <input type="checkbox"/> 2-Family Home | <input type="checkbox"/> 3-Family Home | <input type="checkbox"/> 4-Family Home |
| <input type="checkbox"/> Mobile Home | <input type="checkbox"/> Co-op | <input type="checkbox"/> Condo | <input type="checkbox"/> Mixed Use |

Number of people in household: _____ Gross Annual **Household** Income*: \$ _____

*Provide current gross annual income for **all residents of the household over age 18 who are not full time students**. For wage income, list gross earnings (income prior to any deductions, including taxes and benefits); for self-employment, business, rental or farming income, include income or losses after operating expenses. Later in the process, you may be asked to provide support for the income amount listed.

B. APPLICANT INFORMATION

Applicant must be the property owner and the utility account holder.

Mr./Mrs./Ms.	Last Name	First Name	Middle Initial	Jr./Sr./II/III
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Primary Phone Number	Secondary Phone Number	Email Address
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Mailing Address (if different from installation address):

Street Address	Unit #	City	County	State	Zip
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C. ELECTRICITY SUPPLIER INFORMATION

Attach a copy of your most recent electric utility bill.

I have attached the following: Electric Utility Bill

D. PROJECT PARTNER INFORMATION

Solar Contractor Name (if known)

Community-Based Organization providing assistance (if applicable)

E. INCOME DOCUMENTATION

Are you currently eligible for, or have you received within the past 12 months, services through: EmPower, Weatherization Assistance Program, HEAP, food stamps, public assistance, or supplemental security income.

Yes - If yes, please attach an award letter.

No - **If no, please provide the following information:**

Eligibility is based upon the total gross annual household income. In the table below, list the legal names of all household members who are over the age of 18 and are not full-time students.

Last Name	First Name

F. CONSENT AND SIGNATURES

I certify, under the penalties of law, that the statements made in this application (including statements made in any accompanying papers) have been examined by me and are true and complete. I acknowledge that NYSERDA has retained Energy Finance Solutions (EFS), a service offered by Wisconsin Energy Conservation Corporation (WECC), to process and underwrite my/our income qualification application. I authorize EFS and WECC to release to an income verification service company, chosen by EFS and WECC, my/our financial or other information that I/we have supplied to EFS and WECC in connection with determining eligibility for this program. If necessary, I further agree to provide additional information to EFS and WECC to make such verification. I understand that my signature on this form gives permission for NYSERDA, 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 the Affordable Solar incentive will be granted but will be used in determining eligibility for the incentive. Whether or not an eligible applicant will be granted the incentive will depend in part upon whether the solar installation project submitted by an approved solar contractor meets the guidelines and requirements of NY-Sun and Affordable Solar, the number of applications received, and the remaining incentive funding available.

All household members over the age of 18 are required to sign and date below:

_____ Signature	_____ Date

Submit Completed Application to:

Energy Finance Solutions

431 Charmany Drive

Madison, WI 53719

Fax: 608-249-5788

For more information, please contact Energy Finance Solutions (EFS), a service offered by Wisconsin Energy Conservation Corporation:

Toll Free: 1-800-361-5663

Email: efs@energyfinancesolutions.com

Or visit nyserd.ny.gov