

# CONTRACTOR APPLICATION

## Residential Programs



Please use this form to apply to become a contractor in a NYSERDA residential program(s). If you have specific questions, email us at [residential.programs@nyserda.ny.gov](mailto:residential.programs@nyserda.ny.gov). All fields are required unless otherwise noted.

### APPLICATION STATUS

**Existing Participating Contractor:** If you are already a participating contractor in a NYSERDA residential program, please select the program(s) you currently participate in from the list below. These selections indicate your interest in continued participation under current program rules.

- Comfort Home
- Green Jobs – Green New York (GJGNY) Residential Financing
- Residential Energy Assessment Program
- NY Residential Existing Homes

**New Applicant:** If you are a new applicant, select the programs you would like to participate in. As a first step, please review and ensure that your organization can meet the requirements of the Participation Agreement and relevant manuals for the programs you are applying for.

- Comfort Home
- Green Jobs – Green New York (GJGNY) Residential Financing
- Residential Energy Assessment Program
- NY Residential Existing Homes

### COMPANY INFORMATION

**Legal Business Name** [company name must match the Employer Identification Number (EIN) or Social Security Number (SSN)]  
(If using a d/b/a, certificate must be attached):

Business Name - D/B/A: \_\_\_\_\_

Company Background:

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Street Address (if different)

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Business Website (URL)

\_\_\_\_\_  
Employer Identification Number (EIN)

**Company is a:** (Check all that apply)

- Minority- and Women-Owned Business Enterprises (MWBE)
- Service-Disabled Veteran-Owned Business (SDVOB)

**Counties Served**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Albany County                  | <input type="checkbox"/> Herkimer County             | <input type="checkbox"/> Richmond County (Staten Island) |
| <input type="checkbox"/> Allegany County                | <input type="checkbox"/> Jefferson County            | <input type="checkbox"/> Rockland County                 |
| <input type="checkbox"/> Bronx County                   | <input type="checkbox"/> Kings County (Brooklyn)     | <input type="checkbox"/> Saint Lawrence County           |
| <input type="checkbox"/> Broome County                  | <input type="checkbox"/> Lewis County                | <input type="checkbox"/> Saratoga County                 |
| <input type="checkbox"/> Cattaraugus County             | <input type="checkbox"/> Livingston County           | <input type="checkbox"/> Schenectady County              |
| <input type="checkbox"/> Cayuga County                  | <input type="checkbox"/> Madison County              | <input type="checkbox"/> Schoharie County                |
| <input type="checkbox"/> Chautauqua County              | <input type="checkbox"/> Monroe County               | <input type="checkbox"/> Schuyler County                 |
| <input type="checkbox"/> Chemung County                 | <input type="checkbox"/> Montgomery County           | <input type="checkbox"/> Seneca County                   |
| <input type="checkbox"/> Chenango County                | <input type="checkbox"/> Nassau County               | <input type="checkbox"/> Steuben County                  |
| <input type="checkbox"/> Clinton County                 | <input type="checkbox"/> New York County (Manhattan) | <input type="checkbox"/> Suffolk County                  |
| <input type="checkbox"/> Columbia County                | <input type="checkbox"/> Niagara County              | <input type="checkbox"/> Sullivan County                 |
| <input type="checkbox"/> Cortland County                | <input type="checkbox"/> Oneida County               | <input type="checkbox"/> Tioga County                    |
| <input type="checkbox"/> Delaware County                | <input type="checkbox"/> Onondaga County             | <input type="checkbox"/> Tompkins County                 |
| <input type="checkbox"/> Dutchess County                | <input type="checkbox"/> Ontario County              | <input type="checkbox"/> Ulster County                   |
| <input type="checkbox"/> Erie County                    | <input type="checkbox"/> Orange County               | <input type="checkbox"/> Warren County                   |
| <input type="checkbox"/> Essex County                   | <input type="checkbox"/> Orleans County              | <input type="checkbox"/> Washington County               |
| <input type="checkbox"/> Franklin County                | <input type="checkbox"/> Oswego County               | <input type="checkbox"/> Wayne County                    |
| <input type="checkbox"/> Fulton County                  | <input type="checkbox"/> Otsego County               | <input type="checkbox"/> Westchester County              |
| <input type="checkbox"/> Genesee County                 | <input type="checkbox"/> Putnam County               | <input type="checkbox"/> Wyoming County                  |
| <input type="checkbox"/> Greene County                  | <input type="checkbox"/> Queens County               | <input type="checkbox"/> Yates County                    |
| <input type="checkbox"/> Hamilton County                | <input type="checkbox"/> Rensselaer County           |  |
| <input type="checkbox"/> Other Service Territory: _____ |  |  |

**CERTIFIED STAFF**

I certify that services will be provided by staff holding appropriate certifications within the appropriate categories as outlined in the applicable Program Manual for which the undersigned applicant is applying. I acknowledge that the Program may request a copy of certificates or identification cards for certifications.

Applicant Initials: \_\_\_\_\_

**My company provides the following services:**

- Audits    Shell    Boilers/Furnaces    Air Conditioning    Heat Pumps    Manufactured Housing Improvements

**SUBMISSION**

Has any principal or officer of your company been convicted of a felony within the past 5 years?  Yes  No

Has any principal or officer of your company been under disciplinary action (probation, suspension, and termination) within a NYSERDA program?  Yes  No

Has any principal or officer of your company been debarred by any government agency?  Yes  No

Has any governmental entity made a finding of non-responsibility regarding the individual or entity seeking to apply in the last five years?  Yes  No

Has any governmental entity or other governmental agency terminated or withheld a procurement contract with the above-named Individual or entity due to the intentional provision of false or incomplete information?  Yes  No

Please disclose any staff affiliations with contractors who have been terminated from any NYSERDA program in the past 5 years\*:

Staff Name:

Previous Company:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

### PRIMARY CONTACT INFORMATION

This should be the primary contact person for NYSERDA to inquire about this application and Participation Agreement. Please ensure that the email and phone number used is tied to a single person of contact and not general contact information for the company.

First Name

Last Name

Title

Email

Phone

Extension

### PROGRAM MANUAL(S) AND PARTICIPATION AGREEMENT

Check the box to certify you have read and agree to the terms in the Participation Agreement and Program Manual(s) associated with the program(s) applied for under this Application.

- [Residential Contractor Participation Agreement](#) - Required by all applicants
- [Comfort Home Program Manual](#)
- [Green Jobs – Green New York \(GJGNY\) Residential Financing](#)
- [Residential Energy Assessment Program Manual](#)
- [NY Residential Existing Homes Program Manual](#)

### CERTIFICATION STATEMENT

By signing below, I attest that I have the legal signatory rights to enter into a contractual agreement for the programs selected above on behalf of the organization on whose behalf I sign. I certify that all information provided in this form, including any attachments, is true and correct to the best of my knowledge. I agree to provide any additional materials NYSERDA may ask for during the review process. I have also reviewed and agree to the terms and conditions set forth in the relevant Program Manual(s) and the selected Participation Agreement provided in the links above, and certify that I have the legal authority to bind my organization and the above-listed staff to the terms of these Program Manual(s) and Participation Agreement as well.

Signature

Date

## SUPPORTING DOCUMENTATION/ATTACHMENTS & SUBMISSION INSTRUCTIONS

**Submit this completed and signed application along with the following documents:**

- One copy of your D/B/A certificate (if applicable).
- Employee roster certified employees, including employee name, certification name, and expiration dates.
- Documentation of at least two years relevant experience working in the residential energy efficiency and/or clean energy sector (required for all new applicants and for returning contractors upon NYSERDA request). Applicants with less than two years' experience may apply, but may require additional documentation or reviews of their application.

**EMAIL COMPLETED APPLICATION TO:**

[residential.programs@nyserda.ny.gov](mailto:residential.programs@nyserda.ny.gov)

**-OR- MAIL COMPLETED APPLICATION TO:**

New York State Energy Research and Development Authority  
Attn: NYSERDA Residential Programs  
17 Columbia Circle  
Albany, NY 12203-6399

**Applications missing any of the above required documentation will not be approved.**

After you are approved, you will be asked to provide one copy of your current insurance certificate (general liability, workers compensation and errors and omissions if applicable) with NYSERDA and The State of New York listed as additional insured).

If the information provided on this Contractor Application Form and any attachment changes, it must be reported to NYSERDA, in writing or via email to [residential.programs@nyserda.ny.gov](mailto:residential.programs@nyserda.ny.gov).

To ensure delivery to your inbox, add [residential.programs@nyserda.ny.gov](mailto:residential.programs@nyserda.ny.gov) to your safe senders list.