#### **EmPower+ Application**

The EmPower+ Application allows applicants to access and submit either online or paper applications to the program. Applicants can receive assistance from Community Organizations and/or Participant Contractors when submitting an application. Applicants who would like to submit an Online Application must create an Application Portal account first. The instructions below guide you on how to access, complete and submit a EmPower+ Application. To access instructions specific to each step below, click the **learn more...** link to expand the section and review the related materials.

(i) The instructional materials below are intended to guide:

- Applicants when submitting an online application, or
- CLEAResult Shared Services, Community Organizations, NYSERDA Energy Advisors, Participating Contractors, and Participating Utilities when assisting applicants through the online application process.

## **General Information** 1 Applicants can access the online application by clicking the link below and logging into your Salesforce Portal account, then by selecting the EmPower+ Application option. **Submit a New Application** Projects Choose a program **Combined Residential Application** Please complete the following application to see if you qualify for a no-cost energy audit and incentives towards making your home more comfortable and energy efficient. We will ask questions about the number of people living in your home and income sources, your electric and heating fuel providers, and the county where you live to help determine your incentive eligibility. If you are an electric customer of PSEGLI, and have not received a referral letter from NYSERDA, please reach out to your utility for current offers.

2	The application is comprised of seven (7) distinct steps, or pages, that you will navigate as you complete the application. Each page contains required fields and information denoted by a red asterisk.
	Submit a New Application Projects
	Application Number: 0000305887
	Combined Residential Application
	Application Information (Step 1 of 7)
3	Each step, or page, throughout the application contains instructional text at the top of the page. It is highly recommended that you review these instructional texts as they provide clarity regarding the information requested.
4	Every step, or page, throughout the application contains a <b>Save</b> button at the bottom of the page. Click <b>Save</b> before exiting the application if you do not have time to complete it in one sitting.
	SAVE
(5)	To access a <b>Saved</b> and incomplete application:
	<ol> <li>Log back into the Salesforce Portal</li> <li>Select the Enrollment tab</li> </ol>
	NEW YORK STATE OF OFFORTUNITY. Search Search [FirstName LastName] -
	Submit a New Application Projects
	3. Locate the correct application and click the link in the Enrollment Name column
	Submit a New Application Projects
	Sector Combined Residential - All V
	A   B   C   D   E   F   G   H   I   J   K   L   M   N   O   P   Q   R   S   T   U   V   W   X   Y   Z   Other   All
	Action     Project Name †     Application Number     Status     Created Date     Last Modified Date       Edit     0000305887     0000305887     Unsubmitted     6/16/2021     6/16/2021
	<ol> <li>Finally, click the Application Wizard button to return to your incomplete application.</li> </ol>
	Submit a New Application Projects
	Project Printable View
	Notes & Attachments [0]
	Project Detail Application Wizard
1	

# STEP 1: Applicant Information

Complete the Application Information section:

1		First Name and La	ast
2		t your <b>Preferred</b> <b>cant Language</b> fro down.	om the
3	Provid Numb	de your <b>Primary P</b> ber.	hone
4		ner fields are option e completed as ne	
Applicant Info	ormation		
First Name *		Middle Initial	Last Name *
Applicant First Name			Applicant Last Name
Suffix		Primary Applicant Language •	]
Primary Phone *		Secondary Phone	

#### Complete the Site Information section:



Using the **Address** field, begin typing in your street address. Salesforce will suggest verified addresses below this field as you type. Selecting an option from this list will populate all other address fields on the page. Applicants should be aware that, depending on the internet browser used to complete the Online Application, the address fields may pre-populate based on your Browser's auto-form filling functionality, such as with Google Chrome. Applicants should review the address fields if they pre-populate and update with the correct address if necessary.

If your **Mailing** address is different from your **Address**, update the **Mailing Address** fields as needed.

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Select the appropriate response for the **Does the applicant own this site** drop down. This field identifies if the applicant is the owner of the dwelling associated with the address entered into the application.

Select the option from the **Dwell ing Type** drop-down that most closely identifies what type of dwelling exists on the site.

The Number of Units field becomes required if you select Multi-Family (5+ units) as the Dwelling Type.

Site Information		
Address *	Mailing Address *	
City *	Mailing City *	
State *	Mailing State *	
-None v	Aailing State *	
Zip *	Mailing Zip *	
County *	Does the applicant own this site? *	
None v	None 🗸	
Dwelling Type *	Number of Units	
-None v		

#### Save & Continue:



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To advance to the next step, click **Continue** at the bottom of the page. It is recommended that you click **Save** before clicking **Continue**.

SAVE

## **STEP 2: Utility Information**

Complete the Utility Information section:

Select the Electric Utility Provider and the Primary Heating Fuel Type for the site.

Selecting either **Natural Gas** or **Other** from the **Primary Heating Fuel Type** drop-down will enable an additional required field for this section that must be completed. CONTINUE

Include Electric Utility and Primary Fuel Account Numbers. These fields are optional. However, providing NYSERDA with this information will enable us to provide the most accurate and effective recommendations for work that will be performed at the site. 4 If the site has a **Secondary** Heating Fuel Type, select it from the drop-down. This field is optional. 〔5〕 Respond to the Additional Question, if applicable or appropriate, with any additional information that will help NYSERDA reduce your energy consumption or reduce risks to occupant health or special needs. Utility Information Electric Utility Electric Utility Provider Electric Utility Account # ~ --None-Heating Utility Primary Heating Fuel Type \* Primary Fuel Account # --None-Secondary Heating Fuel Type --None-Additional Question Please add any information that we may find helpful in reducing your energy consumption and list occupant health issues or special needs that we need to be aware of (such as roof leak, appliances, etc): Save & Continue: 1 To advance to the next step, click Continue at the bottom of the page. It is recommended that you click Save before clicking Continue. SAVE CONTINUE

### **STEP 3: Partner Information**

#### Complete the Partner Information section:

Select a contractor from the **Contractor Selection** drop-down.

- When selecting a contractor, you can either,
  - Select one that you have been working with,
  - Select the Select Next Available option to have the next available contractor assigned to your project, or
  - Select your preference for a contractor partner from the list.
- Only those contractors that serve your designated area will appear on the list.
  - If you do not see a contractor, it is likely because they do not serve your area.
- If a selected contractor cannot perform the work due to scheduling restrictions, they may not accept the project.

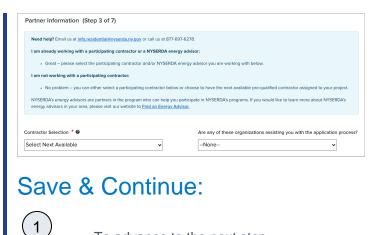
 If so, an alternate will be selected by CLEAResult Shared Services.

- CLEAResult Shared Services selects contractors when they receive Paper Applications or if the Applicant did not select one when applying online.
- When applicants apply using a Campaign Code, the contractor will be selected automatically.
  - Applicants can change the pre-selected contractor at need.

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While not required, you can help NYSERDA understand if an independent organization has been assisting you with the application process. If that organization appears on the **Are any of these organizations assisting you with the application process?** dropdown, select it from the list.



To advance to the next step, click **Continue** at the bottom of the page. It is recommended that you click **Save** before clicking **Continue**.

## STEP 4: Eligibility Screening

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#### Household Information & Demographics

Add Household Members. The Number of Household Members field will automatically generate.

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Complete Household Demographics details fields, selecting all options that apply for all members of the household.

		Applicant Ethnicity *	
	-	-None-	
Household Race Details: Indicate the number o	f household memb	ers. including the applicant, who are:	
American Indian or Alaska Native *		Asian *	
-None-	v	-None-	~
Black or African American *		Native Hawaiian or Other Pacific Islander *	
-None-	~	-None	*
White *		Multi-race (two or more races) *	
-None-	*	-None	*
Other *		Prefer not to answer *	
-None-			
Household Ethnicity Details: Indicate the numb	er of household m	-None	Ű
Household Ethnicity Details: Indicate the numb	er of household m	mbers, including the applicant, who are: Not Hispenic, Latino, or Spenish Origins *	
Household Ethnicity Details: Indicate the numb Hisparic, Latins, or Spanish Origin. * Nono	v er of household m v	where, including the applicant, who are: Not Hapenic, Latino, or Spenish Grigins. * -Nono	v
Household Ethnicity Details: Indicate the numb Hisperic, Latins, or Spanish Origin * Nono Unixnown *	Ÿ	Industry the applicant, who are: Not Hapenic, Latino, or Spenish Grigins. * -Nono- Prefer not to Answer. *	~
Household Ethnicity Details: Indicate the numb Hisparic, Latins, or Spanish Origin. * Nono	v er of household m v	where, including the applicant, who are: Not Hapenic, Latino, or Spenish Grigins. * -Nono	v
Household Ethnicity Details: Indicate the numb Hisperic, Latins, or Spanish Origin * Nono Unixnown *	v	Industry the applicant, who are: Not Hapenic, Latino, or Spenish Grigins. * -Nono- Prefer not to Answer. *	~
Household Ethnicity Details: Indicate the numb Huperic, Latino, or Spanish Origin * Nono Unixnown * None	v	Industry the applicant, who are: Not Hapenic, Latino, or Spenish Grigins. * -Nono- Prefer not to Answer. *	v v
Household Ethnicity Details: Indicate the numb Hisperic, Lettro, or Spanish Origin * -Nono- Unixown * -None- Indicate the number of household members with	v	when, including the applicant, who are: Not Hapenic, Latino, or Spenish Origins * -None Prefer not to Assesser * -None	~
Household Ethnicity Details: Indicate the numb Hisperic, Latins, or Spanish Origin * Nono Unixnown * None Indicate the number of household members wh 60 yeers of ege er older *	v	Industry the applicant, who are: Not Hapenic, Latino, or Spenish Grigins: * -None Prefer not to Assaver: * -None Persons with disabilities: *	~
Household Ethnicity Details: Indicate the numb Hepseric. Latins, or Spanish Origin * Nono Usianown * Nane Indicate the number of household members wit 60 years of age or older * Nane	v	Industry the applicant, who are: Net Hispanic, Letton, or Spanish Origins * -None Prefer not to Answer * -None Prenons with disabilities * -None	-

#### Complete the Referral Code Screening:

If you received a letter from NYSERDA with a **Referral Code**, select **Yes** in response to the question, enter the **Referr al Code** in the provided field, then skip to **Complete the Hou sehold Demographics Section** below. No additional eligibility questions are required.

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- The Referral Code field is only accessible if **Yes** is selected. If you have a Referral Code, enter it in the field that appears.
- Referral Codes are provided to applicants through mailed letters or emails either from the Applicant's Utility, from NYSERDA directly, or from the Office of Temporary Disability Assistance (OTDA).
- Applicants who have a referral code and enter it in the application will not need to provide additional income verification as part of the application process.
- Contractors and/or Community Organizations assisting Applicants with the application process should inquire if the Applicant, or their household, received a Referral Code through email or mail.

However, if you did not receive a letter with a **Referral Code**, select **No**. An additional section will appear on the application titled **Categorical Screening**. Review instructions for that section below.

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Referral Code Screening		^
Have you recently received a letter from NYSERDA with a referral code? *	Referral Code *	

#### Complete the Categorical Screening:

This section of the application will only appear if the applicant answers No to the question in the Referral Code Screening section.

> If you or any household member received an award letter for HEAP, SNAP (food benefits), SSI, TANF, or Public Assistance in the past 12 months, select **Yes**. Categorical eligibility is based on the date within the award letter. Award letters are good for one year from the date provided.

- Multiple options can be selected.
- An award letter, for each option selected, must be submitted as part of this application.

Categorical Eligibility Type	Acceptable Documentation	Acceptable Date Range
HEAP	<ul> <li>Award Letter</li> <li>OTDA provided HEAP list</li> </ul>	Awarded within last 12 months
SNAP	<ul> <li>Award Letter</li> </ul>	Awarded within last 12 months
TANF	<ul> <li>Award Letter</li> </ul>	Awarded within last 12 months
Supplemental Security Income (SSI)	<ul> <li>Award Letter</li> <li>Benefit Statement</li> </ul>	Awarded within last 12 months

 For applicants completing the application online, the award letter can be uploaded during Step 6: Project Documents.

• For Paper Applications, a copy of the award letter can be submitted when mailing the application.

Once completed, advance to the **Household Demographics** section.

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If you, or any household members did not receive any assistance listed above, select **No**. An additional section will appear on the application titled **I ncome Documentation Screening**. Review instructions for that section below.

Categorical Screening			^
Have any household members received HEAP, SNAP (Food Stamps), SSI, TANF or Public Assistance in the past 12 months? *	Check all the apply *	•	
●Yes ○No			

Complete the Income Documentation Screening:

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- This section of the application will only appear if the applicant:

   Chooses not to accept Geo Eligibility determination that indicates the Applicant is Geo Eligible (if applicable), and

   /or
  - Normal State Stat
- Applicants must document income for all members of the household if all previous eligibility requirements could not be met.

Income Type	Acceptable Document	Acceptable Date Range
Social Security	<ul> <li>Award Letter</li> <li>Benefit Statement</li> </ul>	Within 12 months
Social Security Disability (SSD)	<ul> <li>Award Letter</li> <li>Benefit Statement</li> </ul>	Within 12 months
Pension	<ul> <li>Pension check stub showing gross amount</li> <li>Letter from Pension Board</li> </ul>	Within 12 months
Disability (Short Term or Long Term)	<ul> <li>Benefit Statement</li> </ul>	Within 60 days
Child Support / Alimony	<ul> <li>Court Award Letter</li> <li>Printout from Domestic Relations</li> </ul>	Within 12 months (within 60 days if using printout from DR website)
Foster Care Payment	<ul> <li>Statement from Social Services</li> </ul>	Within 60 days
Workers Compensation	<ul> <li>Award Letter</li> <li>Benefit Statement</li> </ul>	Within 60 days
Unemployment	<ul> <li>Letter of Determination</li> </ul>	Within 60 days
Veterans Benefits	<ul> <li>Award Letter</li> <li>Benefit Statement</li> </ul>	Within 12 months
Annuities	<ul> <li>Bank Statement</li> </ul>	Within 60 days
Salaries/Wages	<ul> <li>Pay Stubs</li> </ul>	Four weeks of paystubs from the last 60 days
Interest Income	<ul> <li>Bank Statement</li> </ul>	Within 60 days
Rental Income	<ul> <li>Current Lease</li> <li>Rent Receipt</li> </ul>	Within 12 months
Business or Farm Income	<ul> <li>Tax Return</li> <li>IRS Report of Quarterly Earnings</li> <li>Business records.</li> </ul>	Tax Return: Previous Year IRS Report: Previous 3 months Business Records: Previous 3 months
Tax Documentation	Form 1040, 1040A, or 1040EX	<ul> <li>Most recent Federal Income Tax Return.</li> <li>This is only acceptable if all members of the household who were required to file a tax return did so.</li> <li>Additionally, all sources of income must be documented withir the Tax Return for each household member.</li> <li>If documenting Rental, Business, or Farm income, Applicants must submit corresponding schedules (C, E, and F)</li> </ul>

To add spaces for other members of the household for income documentation purposes, click the Add Household Member option. This will open a modal window for you to document the household member's:

- First Name
- Last Name •
- Age
- If they are a Full-time Student Gross Income Amount
- Income Source
- Income Source Frequency Verification Method

To add an income source for a household member, click the Ad d Another Income Source

option below the household member to document the household member's:

• Age

2

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- If they are a Full-time Student
- Gross Income Amount
- Income Source
- Income Source Frequency
- Verification Method

To edit or delete an income source added to a household member, click the Pencil Icon (edit) or Trash Can Icon (delete) to the far right of the listed income source.

Continue adding household members and income sources as needed.



#### Save & Continue:

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To advance to the next step, click **Continue** at the bottom of the page. It is recommended that you click **Save** before clicking **Continue**.

SAVE

STEP 5: Review Page

#### **Review the Application:**

Review each section of the **Revi ew Page** for your application. If information on the application is incorrect, use the **Previous** button at the bottom of the page to return to previous steps (pages) and update the information as needed. CONTINUE

**Combined Residential Application** 

Review Page (Step 5 of 7)

Need help? Email us at <u>info.residential@nyserda.ny.gov</u> or call us at 877-697-6278 Please review your responses below for accuracy and completeness.

#### Section D: Energy Information:

For Section D: Energy Information, read through the disclaimer and check the I agree to the terms and conditions stated above box.

SECTION D: ENERGY INFORMATION

Property Address

1

ELECTRIC UTILITY: If you are responsible for the electric bill, provide the following:

Utility Name :

1

2

CUSTOMER AUTHORIZATION for Release of Fuel/Energy Bills (for previous two years and future three years)

My signature certifies that I am financially responsible for the account(s) listed on this application. I hereby consent and authorize the electricity and fuel suppliers named in this application to release any and all energy usage information, including account number(s), related to the above property address, to representatives of the New York State Energy Research and Development Authority (NYSERDA), and the Weatherization Assistance Program (NAP), and/or its designated representatives of the period beginning two years prior to the application date and ending three years after program participation. I understand that this information will be kept confidential, to the extent permitted by law, and used only for the purpose of determining program eligibility, estimating energy savings, program implementation, and evaluation, including the evaluation of achieved energy savings.

Central Hudson Gas & Electric

□ I agree to the terms and conditions stated above.

#### Section H: Applicant Information:

After reviewing the complete application, scroll to **Section H: Application Information**,

Read through the disclaimer, then click the **Electronic Signature** button.

Applicants are not required to provide **Electronic Signatures**. However applicants must satisfy one of alternate options below when not providing an **Ele ctronic Signature**:

> Applicants who would prefer to print and mail a hand-signed application can bypass the Electronic Signature and click **Print** at the bottom of the page instead. Applicants must also provide, along with the signed application, any supporting documents required to provide proof of choices made during **Step** 4: Eligibility Screening.

**Energy Audit Application** 

2 Wall Street,

- Albany, New York 12205
- Applicants who would prefer to hand sign the application, but still submit electronically, can click Print at the bottom of the page, hand sign the application, and scan the signed application onto their computer for upload during Step 6: Project Documents.

You will be directed to electronically sign the application through **DocuSign**. When the page loads, check the agreement box and click **Co ntinue** at the top of the page.

croll to the bottom of the application and click the **Sign** option next to the Applicant Signature field.

In the modal window that appears, click **Adopt and Sign** to electronically sign the application. Your **Name**, **Initials** will pre-populate and a, and signature example will already be completed for you.

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Your signature example will now appear on the signature line for the application. Click **Fin ish** to return to the application.

#### SECTION H: APPLICANT AFFIRMATION

I authorize release of my contact information, dwelling information, and income documentation to representatives of NYSERDA, to the NYS Weatherization Assistance Program (WAP) and/or its designated representatives, to any community-based organizations working on behalf of NYSERDA programs, and to my utilities. I understand that the information provided by me will be used for the purposes of assisting me to utilize the programs, determining eligibility for NYSERDA's residential programs and financial incentives, determining eligibility for the NYS WAP, for estimating energy savings potential, and for evaluation purposes. I understand that all information will be keyd conditioned to the extent permitted by law. I understand that if services are provided to me through NYSERDA's residential programs or the no-cost NYS WAP, that my participation in these programs will not affect my social security, public assistance, or any other income.

I understand that this application does not guarantee that assistance will be granted to me. Whether or not services are provided will depend on the number of applications received and the availability of funds and priorities established by the programs.

I agree to provide NYSERDA representatives, the NYS WAP representatives, and independent participating contractors access to my dwelling, at times that are mutually acceptable, to perform program activities including energy inspections, installation of measures, Quality Assurance, and evaluation activities. I understand that participating contractors are independent contractors and provide a one-year warranty on labor for work completed. I further understand that participating contractors and vendors will provide appropriate warranties on any equipment provided and that no additional warranties are provided by NYSERDA or the NYS WAP.

I subscribe and affirm, under the penalties of law, that the statements made on all parts of this application, including statements made on any accompanying documents, have been examined by me and are to the best of my knowledge true and complete.

I understand that my signature on this form gives permission for NYSERDA, representatives of the NYS WAP, and their designees to assure my eligibility for NYSERDA's programs and the NYS WAP. I consent to any inquiry to verify or confirm the information that have given. I understand that II give false information or withhold information in order to receive benefits that I am one entitled to, I can be prosecuted to the fullest extent of the law. I also state that no person named in this application is subject to disqualification for weatherization services under the Immigration Reform and Control Act of 1986 (Public Law 99-063). I have read and understand the provisions of the Personal Privacy Protections Law in Attachment 11.

ELECTRONIC SIGNATURE

#### Print & Continue:



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If you'd like a copy of the application, click **Print**.

 Applicants who prefer to hand sign the application can bypass the Electronic Signature, clicking the Pri nt button to print the application. Hand sign the application then either mail it in along with all required supporting documentation or scan the signed application onto your computer and upload it to the Online Application in the Step 6: Project Documents.

To advance to the next step, click **Continue** at the bottom of the page.

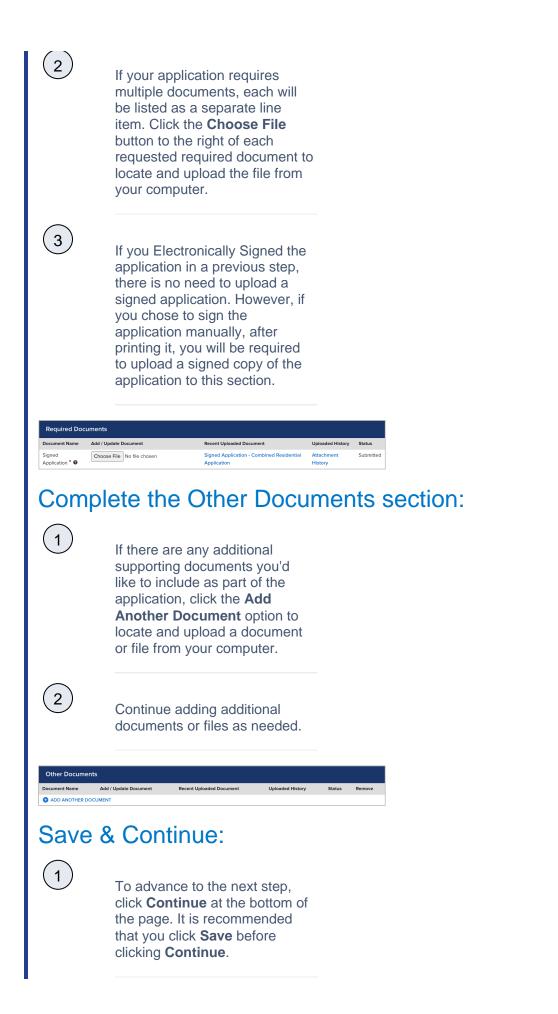


### **STEP 6: Project Documents**

Review the Required Documents section:

#### The Required Documents

section will outline any documents that are required as part of you application.



STEP	7: Submission Page
Subm	it the Application:
1	On the last page of the application, click the <b>Submit</b> button.
2	When you have successfully submitted your application, the page will reload and display <b>Ap</b> <b>plication Status: Your</b> <b>application has been</b> <b>submitted successfully.</b>
Submit a New Application	Projects
Application Number: 00	Residential Application
Submission Page (S	tep 7 of 7)
Please complete the belo	6278, email us at: <u>inforesidential@nyserda.ny.gov</u> w to submit your application electronically to the program. Submitting electronically will allow for the program to immediately begin the
review will not begin until	it electronically, you will need to print and mail in your application and copies of any required income documentation. Your application your signed paper application has been received. Please send printed and signed application along with copies of income Audit Application; 2 Wall Street. Albany, New York 12205
Click on the submit b	utton below to complete this application.
PREVIOUS	SUBMIT

SAVE

### Next Steps Application Review and Approval CLEAResult Shared Services will review your submitted application. If they require additional information or documentation, you will receive an email communication identifying the needed information.

- Applicants should respond to this communication within ten (10) days to provide the request information.
   Applicants where the rest end of the ten (12) days to the initial end of the rest end of the ten (12) days to the initial end of the ten (12) days to the initial end of the ten (12) days to the initial end of the ten (12) days to the initial end of the ten (12) days to ten (12
- Applicants who do not respond after ten (10) days to the initial notice will receive two (2) additional notices (the second at Day 20 and the third at Day 30) to remind them of the required information they must provide.
- Once an applicant responds to any of the 3 (three) communications, the application will continue through the approval process.

• Applicants who fail to respond to any of the three (3) notices will have their application cancelled systematically.

If you application is approved, you will receive an email notice guiding you on next steps.

If you application is rejected, you will receive an email notice outlining the reason for denial.

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