Longs Peak Energy Conservation Application for the *EnergySmart Subsidized Program*

APPLICANT INFORMATION (please print)

Last Name:	First Name:	Middle Initial:
Street Address: (location of home)		Unit # or Mobile Lot #
City:	County: Boulder	Zip:
Home Phone:	Work Phone:	Cell Phone or Message #:
Mailing Address (PO Box)	City:	Zip:
Email Address:		

HOUSEHOLD INFORMATION:

Name (List yourself and all household members. Please attach separate sheet if more than 8 people.)	AGE	Do you have an income?		Are you disabled?		Are you a single parent?	
		Yes	**No**	**Yes**	**No**	**Yes**	**No**

HOME ACCESS AUTHORIZATION:

Access to necessary areas of your home:
☐ I agree

Do you agree to and understand that Longs Peak Energy Conservation technicians and contractors must be given access to all areas of your home necessary for the installation of the energy-saving measures you select, during business hours and on a reasonable schedule for work to proceed?

Permission to photograph work performed:
☐ I agree

Will you allow LPEC technicians to photograph the work for quality assurance and/or for promotional purposes?

Comments:_____

_____

_____

Signature: _____ **Date:** _____

SEND TO:
Longs Peak Energy Conservation
P.O. Box 471, Boulder, CO 80306
Ph: (720) 864-6401 or (800) 200-9006 Fax: (720)864-6419

Date Approved: 05/25/16

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QUALIFICATION INFORMATION:

The EnergySmartPlus program provides qualifying homeowners with financial assistance for adding energy-saving improvements to their homes. The total adjusted gross income of all household members combined must fall within the ranges shown in the chart below, for the number of people who reside in the home. If you have more than 8 household members, or your income falls below the specified range, please call our office for assistance.

You can find each person's adjusted gross income (AGI) on the following line on 2015 tax forms:

Form 1040 – Line 38
Form 1040A – Line 22
Form 1040EZ – Line 4

Please provide a copy of the most recent Form 1040 federal tax document for all household members who had an income. If your financial situation has changed significantly since you filed the tax document, and you believe your current income will qualify for this program, please call our office for assistance.

Household Size	2016 (200% of Poverty Level)	Total household income must fall in the range between:	2016 (80% of Area Median Income (AMI))
1	$23,760	< ----- >	$53,120
2	$32,040	< ----- >	$60,720
3	$40,320	< ----- >	$68,320
4	$48,600	< ----- >	$75,840
5	$56,880	< ----- >	$81,920
6	$65,160	< ----- >	$88,000
7	$73,460	< ----- >	$94,080
8	$81,780	< ----- >	$100,160

**Income levels change annually*

LONGS PEAK ENERGY CONSERVATION

energySMART Your Efficiency Solutions

BOULDER COUNTY HOUSING & HUMAN SERVICES

Boulder County

Hope for the future, help when you need it.

(Do Not Write Below This Line---For Office Use Only)

I certify that this client is eligible under the appropriate funding guidelines JOB #_____ **Date:** _____

_____	_____	_____	_____	_____
Authorized WX Agent Signature	Date Approved	Income Verification	POV Level %	AMI %

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