



BRONX SHEPHERDS RESTORATION CORPORATION
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WEATHERIZATION ASSISTANCE PROGRAM APPLICATION COVER PAGE

Bronx Shepherds Restoration Corporation can provide this building and its tenants, FREE Energy saving measures through **The Weatherization Assistance Program**, which is funded by The US Department Of Energy and US Department of Health and Human Services, and administered by The New York State Division of Housing and Community Renewal's Energy Services Bureau. DHCR/ESB (**Buildings must first qualify as Low-income, using current HEAP guidelines for each individual apartments**)

Funds are limited and applicants will be served on a first come first served basis. Energy saving measures may include but is not limited to repair or replacement of boilers, Exterior doors, water saving devices, pipe insulation, attic and wall insulation, windows, florescent lighting, refrigerators etc. (based on a computerized energy evaluation).

I am an Owner Tenant of the address listed below and I am interested in the **FREE** Weatherization services offered.

_____ Building # _____ Street/Avenue _____ Zip Code _____ Cross Street

_____ Owner name _____ Owner address _____ Phone

_____ Superintendent _____ Apt # _____ Phone

of Apartments in Building _____ Number of Floors _____

Con Edison Account number. (or copy of Con-Ed bill) _____

Copy of Proof Of Ownership enclosed. Yes No

Proof of ownership must include the building Block and Lot; (property tax bill, water bill, deed etc)

Has any of the following been replaced in the last 5 years?

Boiler Yes No Don't Know

New Roof Yes No Don't Know

Windows Yes No Don't Know

Other major work done within the last year. _____

Has this Building Ever Received Weatherization Yes No Don't Know

If yes, give approximate date. - _____

Buildings are prohibited from receiving re-weatherization without prior State approval.

If Weatherization was done prior to September 1993, the building may be eligible again.

My building is in need of the following **energy conservation** services:

My name is _____ Phone _____ Date _____

Mail completed application to address above. All other forms must be attached, including Permission to enter premises, and Fuel authorization forms.