

AllianceNRG Program™ Application for Design Professionals, Project Developers and Contractors

Company Information			
Company Name *		State/County License Number	
Street Address 1*			
Street Address 2*			
City*	State *	Postal Code *	County
Work Phone *	Mobile Phone *		Fax Number
Email Address *		Website	

Contact Information			
First Name *	Middle Name	Last Name *	
Street Address 1*			
Street Address 2*			
City *	State *	Postal Code *	County
Work Phone *	Mobile Phone *		Fax Number
Email Address *		Website	
Your preferred method of communication			
<input type="checkbox"/> Work Phone	<input type="checkbox"/> Mobile Phone	<input type="checkbox"/> Email	<input type="checkbox"/> Fax

Service Areas and Services			
States *		Counties *	
Service Type (choose one)			
<input type="checkbox"/> Design Professional	<input type="checkbox"/> Project Developer	<input type="checkbox"/> Contractor	<input type="checkbox"/> Engineer
Property Classification			
<input type="checkbox"/> Residential	<input type="checkbox"/> Multi-family	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial
Other Service type or Classifications (describe)			
Business Sector (choose one)			
<input type="checkbox"/> Disaster Mitigation (Seismic, Wind, Flood, etc)	<input type="checkbox"/> Energy Efficiency (HVAC, Roofs, Windows, etc)	<input type="checkbox"/> Renewable Energy (Solar PV or Thermal, Wind, etc)	
Primary Specialization (choose one)			
<input type="checkbox"/> Seismic Mitigation	<input type="checkbox"/> Lighting	<input type="checkbox"/> Solar PV	<input type="checkbox"/> Architecture
<input type="checkbox"/> Flood Mitigation	<input type="checkbox"/> HVAC	<input type="checkbox"/> Solar Thermal	<input type="checkbox"/> General Contractor
<input type="checkbox"/> Wind Mitigation	<input type="checkbox"/> Windows and Doors	<input type="checkbox"/> Wind Energy	<input type="checkbox"/> Energy Auditing
<input type="checkbox"/> Engineering	<input type="checkbox"/> Roofing	<input type="checkbox"/> Alt. Fuel Generation	<input type="checkbox"/> Other:
Other Services (choose all that apply)			
<input type="checkbox"/> Seismic Mitigation	<input type="checkbox"/> Lighting	<input type="checkbox"/> Solar PV	<input type="checkbox"/> Architecture
<input type="checkbox"/> Flood Mitigation	<input type="checkbox"/> HVAC	<input type="checkbox"/> Solar Thermal	<input type="checkbox"/> General Contractor
<input type="checkbox"/> Wind Mitigation	<input type="checkbox"/> Windows and Doors	<input type="checkbox"/> Wind Energy	<input type="checkbox"/> Energy Auditing
<input type="checkbox"/> Engineering	<input type="checkbox"/> Roofing	<input type="checkbox"/> Alt. Fuel Generation	<input type="checkbox"/> Other:
Energy Audit Services (choose all that apply)			
<input type="checkbox"/> Licensed PE	<input type="checkbox"/> BPI certified	<input type="checkbox"/> AEE Certified	<input type="checkbox"/> Utility Certified

Signature	
Name *	Title *
Signature *	Date *

Mail to: **Seismic Retrofit Financing Program, 1405 Western Avenue, Suite 304, Albany, NY 12203**
 Fax to: **855-431-4400**