

## Home Energy Assistance Program Vendor Agreement HEAP Vendor Information Form

Company Name:	Federal ID:
Doing Business As (DBA): Please attach any additional pages if necessary, to list	all your DBAs with their locations and contact information.
Contact Name:	Telephone Number:
Email:	
General Public Telephone Number:	
Physical Address:	Mailing Address:

## Please check all counties or New York City boroughs where your company is willing to provide services:

Albany	Delaware	Madison	Putnam	Sullivan
Allegany	Dutchess	Manhattan	Queens	Tioga
Bronx	Erie	Monroe	Rensselaer	Tompkins
Brooklyn	Essex	Montgomery	Rockland	Ulster
Broome	Franklin	Nassau	St. Lawrence	Warren
Cattaraugus	Fulton	Niagara	Saratoga	Washington
Cayuga	Genesee	Oneida	Schenectady	Wayne
Chautauqua	Greene	Onondaga	Schoharie	Westchester
Chemung	Hamilton	Ontario	Schuyler	Wyoming
Chenango	Herkimer	Orange	Seneca Yates	
Clinton	Jefferson	Orleans	Staten Island	
Columbia	Lewis	Oswego	Steuben	
Cortland	Livingston	Otsego	Suffolk	

1. Is your company a woman or minority owned business enterprise?	Yes	No		
2. Will your company accept new customers?	Yes	No		
3. Are there conditions to accepting new customers?  If yes, what are the conditions?		No		
4. Do you have any of the following certifications or affiliations?  NYSERDA EMPOWER				
BPI				
NORA				
NATE				
5. Other services your company provides:				
Heating Equipment Repair				
Heating Equipment Replacement				
Annual Service Contracts				
Chimney Cleaning Services				
Clean & Tune Services				

These questions are for Information purposes only. They do not alter the terms of the Vendor Agreement.

Other