

JOINT-LEAP EMERGENCY FINANCIAL ASSISTANCE PARTICIPANT APPLICATION

Complete this Participant Application ("Application") if you have already qualified to receive Low-Income Assistance Program Emergency Financial Assistance (LEAP-EFA) within the last 12 months.

If you are interested in participating in the HOME ASSISTANCE PROGRAM, whether you rent, own or lease your home, you must submit this completed Application. If you rent or lease, you must also submit a completed Building Owner/Manager Basic Consent to be considered for the HOME ASSISTANCE PROGRAM.

OR

If your Building Owner/Manager has invited Kingston Hydro to canvas the building offering energy audits, you may complete this application when Kingston Hydro visits your door. Your Building Owner/Manager will already have submitted the Building Owner/Manager Basic Consent.

If your application is approved by **Kingston Hydro**, **Kingston Hydro** will conduct a free energy audit of your home to determine opportunities to make your home more energy efficient. Where opportunities are identified by the energy audit and subject to the availability of funds, energy efficient devices and products may be provided and/or installed at no cost to you. The energy efficient products and devices can help make your home more comfortable and help you better manage your electricity costs.

If you need assistance completing this form, please contact:

Kingston Hydro Home Assistance Program Intake
c/o Brianna Rustige
P.O. Box 790
Kingston, ON
K7L 4X7
Fax: 613-542-1463
homeassistance@kingstonhydro.com

Completed forms should be submitted to:

By Mail	By Fax	By Email
Kingston Hydro Home Assistance Program Intake c/o Brianna Rustige P.O. Box 790 Kingston, ON K7L 4X7	613-542-1463 Attn: HAP Intake	homeassistance@kingstonhydro.com

FOR OFFICE USE ONLY

HAP FILE ID: _____ - _____ DATE: ____/____/____ INPUT BY: _____



**Kingston
Hydro**

P.O. Box 790 Kingston,
Ontario Canada K7L 4X7
p. 613.546.0000
www.kingstonhydro.com

1. Your (Participant) Information:

First Name:	Last Name:
Street Address (Home):	Apartment/Unit Number:

Occupancy Status	<input type="checkbox"/> Own	<input type="checkbox"/> Rent/Lease
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If you own your home, do you confirm that your home has not received any energy efficient devices or products from HOME ASSISTANCE PROGRAM or from the Aboriginal Conservation Program Home Assistance Program	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you rent/lease do you live in Social and/or Assisted Housing:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you do not live in Social and/or Assisted Housing, you must own the existing refrigerator, freezer, portable dehumidifier or window air conditioner to receive an energy efficient replacement.

If you do not live in Social and/or Assisted Housing, you must own your home to have insulation installed.

2. Home Information:

Do you pay the heating bill?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you pay the electricity bill?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Approximate year your home was built:		

You must be the primary or secondary account holder or you must be a resident of Social and/or Assisted Housing (as confirmed by Your Building Owner/Manager)

Electric Utility:	Account Number:
What type of heating do you have:	<input type="checkbox"/> Electric <input type="checkbox"/> Natural gas <input type="checkbox"/> Other



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Only homes that are heated by electricity are eligible to receive the programmable thermostat, draftproofing or insulation through the HOME ASSISTANCE PROGRAM.

If you heat with natural gas, your provider is:	<input type="checkbox"/> Enbridge	<input type="checkbox"/> Union	<input type="checkbox"/> Kingston	<input type="checkbox"/> Kitchener	<input type="checkbox"/> NRG	<input type="checkbox"/> Other
Water Heating:				<input type="checkbox"/> Electric	<input type="checkbox"/> Natural gas	<input type="checkbox"/> Other

Only homes that have electric water heating are eligible to receive the efficient showerheads, aerators, hot water tank pipe insulation and hot water tank insulation.

3. Income Qualification:

- ☐ Utility LEAP Grant
- ☐ Documentation confirming LEAP Grant is attached
- ☐ Documentation confirming Building Owner/Manager Consent is attached

Participant Name:		Unit:	
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4. Energy Efficient Device or Product

By completing and submitting this Application you agree that your local electricity provider and/or its contractors may enter your home and conduct an energy audit to determine which (if any) energy efficient devices or products that you and your home would benefit from. **Kingston Hydro** reserves the right not to approve your Application for any reason in its sole discretion.

Kingston Hydro may refuse to provide energy efficient devices and products at any time and for any reason, including, but not limited to, due to conditions in the home such that energy efficient devices and products would not result in electricity savings; failure to meet **HOME ASSISTANCE PROGRAM** terms and conditions; safety conditions; or lack of funding. **Kingston Hydro** MAY DETERMINE AT ITS SOLE DISCRETION WHICH ENERGY EFFICIENT DEVICES AND PRODUCTS WILL BE PROVIDED AND MAY REFUSE TO PROVIDE ANY ITEM FOR ANY REASON.

If you and your home are offered any energy efficient products or devices, you must also complete the Participant Consent to receive any such items.

5. Terms & Conditions

By signing and submitting this Participant Application,

1. You confirm that all information contained in this application is complete, true and accurate.
2. You confirm that you live in your home full time.
3. You authorize **Kingston Hydro** to verify income or benefits received by your household for purposes of confirming eligibility.
4. You authorize **Kingston Hydro** and/or its contractors to enter your home and conduct an energy efficiency audit at no cost to you.



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5. You agree that **Kingston Hydro** and/or its contractors may install the energy efficient devices and products in your home at no cost to you.
6. YOU UNDERSTAND THAT **Kingston Hydro** DETERMINES AT ITS SOLE DISCRETION WHICH ENERGY EFFICIENT DEVICES AND PRODUCTS, IF ANY, YOUR HOME WILL RECEIVE AND IS UNDER NO OBLIGATION TO PROVIDE SUCH PRODUCTS OR DEVICES.
7. Your information will not be shared except as set out in this Application.
8. You authorize **Kingston Hydro** and/or the Independent Electricity System Operator (IESO) to provide your information to related programs (including gas utility programs) that may benefit you.
9. You agree that the IESO, **Kingston Hydro** and their HOME ASSISTANCE PROGRAM contractors can collect, use, disclose, share and handle your information including your records showing historical energy consumption (Your Information) to operate, to administer, to assess, to analyze or to report on this HOME ASSISTANCE PROGRAM, provided that the IESO and **Kingston Hydro** may only use documentation supporting your income to confirm eligibility.
10. You agree that the IESO, **Kingston Hydro** and their respective contractors (the "Initiative Operators") can contact you, including by phone or by visiting you and your home, and that you will participate in all follow up surveys, studies, audits, verifications and evaluations conducted by the Initiative Operators in connection with the HOME ASSISTANCE PROGRAM including for the purpose of proper administration, monitoring and verification of delivery of the energy efficient product(s), evaluation of the HOME ASSISTANCE PROGRAM or to assess the performance of HOME ASSISTANCE PROGRAM, and you agree to provide reasonable access to the Initiative Operators to your records and your home for such purposes.
11. **Kingston Hydro** will make best efforts not to damage your home or its contents in the course of delivering HOME ASSISTANCE PROGRAM. Nevertheless, you agree that neither the IESO nor **Kingston Hydro** nor any of their respective officers, directors, affiliates or employees and such affiliates' respective officers, directors or employees (together the "Representatives") will be liable for any injury, damage or loss to persons or property (including without limitation any economic loss, loss of profits, loss of goodwill or any direct, indirect, special or consequential damages, costs, losses, expenses, fines, liabilities, obligations, actions, causes of action, suits, proceedings, debts, penalties and demands arising therefrom or connected therewith, of any nature or kind whatsoever, arising from or related to the audit, installation or the use of the energy efficient devices and products, whether in accordance with the manufacturer's instructions or otherwise, or from any actions, omissions, negligence or misconduct by **Kingston Hydro**, the IESO or their respective Representatives, and you hereby release the IESO, **Kingston Hydro** and their respective Representatives of, from and against any of the foregoing.
12. All environmental/green credits that may result from these energy efficient devices and products will be the property of the IESO.
13. There are no representations, warranties, or conditions of **Kingston Hydro** or the IESO, express, implied, statutory or otherwise, regarding any matter, including any implied warranties or conditions of quality, workmanship, safety, legal compliance or fitness for a particular purpose. Without limiting the generality of the foregoing, you acknowledge that your participation in the HOME ASSISTANCE PROGRAM is based upon your own assessment of HOME ASSISTANCE PROGRAM and not on any reliance on anticipated or projected results, and that such participation may not result in the achievement of any electricity savings or demand savings, which are expressly disclaimed by you.

I confirm that I can consent to and agree to comply with and be bound by all of the above.

Signature _____ Date: _____

Were you referred to the HOME ASSISTANCE PROGRAM? ☐ Yes ☐ No

If yes, which LEAP referral agency? _____ Signature of referral agency representative: _____



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