

Owner

Gazifère
Une société ENBRIDGE

Participation form

Supplement for Low-Income Households

IDENTIFICATION OF THE OWNER

Name

Telephone

Address (where the energy efficiency measure has been implemented)

Email address

ADDITIONAL INFORMATION

How would you prefer to be contacted?

Telephone

Email

I apply as a low-income owner : Yes No

If you check "yes":

How many adults live at this address? _____

How many children (under 18) live at this address? _____

I file an application to participate as the owner of a rental property with one or more low-income households as tenants: Yes No

If you check "yes", attach a list with the names of the tenants and the corresponding housing numbers.

ENERGY EFFICIENCY PROGRAMS

Check the program for which you received financial assistance from Gazifère

Condensing Unit Heater

Condensing Boiler

Infrared Heaters

Feasibility Study

Support for Initiatives

INFORMATION ON THE BUILDING

Apartment building / Number of dwellings: _____

Commercial building

Other, please specify : _____

FINANCIAL ASSISTANCE INFORMATION

Financial assistance should be send to the attention of: _____

To the following address:

AUTHORIZATION OF THE OWNER

I understand that the information provided will be treated in accordance with Gazifère's privacy policy available at gazifere.com

I declare that the information provided in all the documents transmitted as part of my participation in this program are accurate.

Signature of the owner

____ / ____ / ____
Date

Send in the duly completed form either:

by mail: C/O: Energy Efficiency Programs, 706 boulevard Gréber, Gatineau, Quebec, J8V 3P8

by email: Programmes.Efficacite.Energetique@gazifere.com