Home Winterproofing Program - Enbridge Energy Affordability Program - Save On Energy

Online form only - print version does not support dropdown menus

Before you begin

Please verify that your postal code begins with L or N. For postal codes beginning with other letters, kindly refer to the contacts below:

Postal codes beginning with K - Envirocentre: 1-877-580-2582 - Ext. 2 Postal codes beginning with M or P - Ecofitt: 1-888-341-9778

Part A - Program Basics & Contact Information

- There are two programs you can apply for: The Home Winterproofing Program from Enbridge Gas and Save On Energy's Energy Affordability Program on the electricity side. We can deliver both programs if you qualify and are interested.
- To find out if you qualify for the program, this form will ask questions about government benefits you may receive, your home's characteristics, and your income. Qualifying means you are eligible for an in-home visit. During our visit, we will:

A. Install basic upgrades as necessary - these are things like efficient lighting, water efficient showerheads, water efficient tap aerators, advanced power bars, pipe/tank insulation for hot water tanks, and a carbon monoxide alarm.

- B. Record the age and efficiency of the following: thermostats, fridges, freezers, dehumidifiers, and A/C.
- **C.** If eligible (based on the age of your home and insulation details) we will record your home's actual insulation levels (basement, exterior walls, attic) as well as its air tightness and air leak locations.
- After our visit, we will use the assessor's notes and photographs to determine if you qualify for appliance upgrades and winterproofing upgrades (air sealing your home and insulating basements, exterior walls, and/or attics). You can expect a response within 10 business days of the visit.

Full Name (the "Participant")

E-mail Address				Phone Number
Street Address				Apartment / Suite Number
City	Province			Postal Code
Preferred Mode of Communication:	Best time to re □ Morning	each you by phor	ne?	3
How did you hear about the program?	If you selected	l other, please sp	becify:	



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Part B - Income Verification

1. Are your currently enrolled for any of the following government benefits?

Ontario Electricity Support Program	□ Ontario Works
Ontario Disability Support Program	\Box Allowance for Seniors
□ Guaranteed Income Supplement	□ Allowance for Survivors
□ Healthy Smiles	□ LEAP Emergency Financial Assistance (past 12 months)
If yes, continue directly to Part C - skip questions 2, 3, and 4	

2. Have you ever participated in any of the following programs in the past 12 months?

<u>Please note:</u> past participation in one program enables eligibility in the other. However, Participants may not reapply for the same program

- \Box Home Winterproofing Program
- □ Energy Affordability Program (Previously The Home Assistance Program)

If yes, continue directly to Part C - skip questions 3 and 4

3. How many people live in your home?

4. Please select your income tier using the table below for reference

No. of people living in your home	Tier 1	Tier 2
1	Under \$42,437	\$42,438 - \$55,654
2	Under \$60,014	\$60,015 - \$67,409
3	Under \$73,501	\$73,502 - \$79,164
4	Under \$84,872	\$84,873 - \$90,919
5	Under \$94,890	\$94,891 - \$102,674
6	Under \$103,947	\$103,948 - \$114,429
7 or more	Under \$112,275	\$112,275 - \$126,184

Tier 1 Participants - We will verify your income during our in-home visit. If you are unable to provide verification onsite, our field staff will not initiate an assessment. Please proceed to Part C

Tier 2 Participants - You may qualify for an Energy Savings Kit! Please call 1-888-341-9778 to determine if you qualify.

Over Listed Income Thresholds - Unfortunately, you do not qualify for the program. Please consider participating in the Home Efficiency Rebate Plus instead. You can <u>click here</u> to be taken directly to the program page.

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Part C - Home	Eligibility				
		our primary residence e eligible for the progra			
□ Yes	□ No				
6. Do you own or ren	t your home?				
□ Own	🗆 Rent	🗆 Rent from a Socia	al Housing Prov	vider	
[Renters Only] - Kind	ly provide your la	indlord's contact inform	nation. We will	need them to co-sign the program f	orms
Landlord Name or Co	rporation Name				
Landlord's Email Addr			Landlard'a [Phone Number:	
Landioru s Email Addi	255.		Lanuioru si	none number.	
				ne's gas and/or electric bills?	
<u>Please Note</u> : If you only program. If you pay bot			the EAP progra	m. If you only pay a gas bill, you will on	ly for the HWP
8. Who is your natura	al gas provider?				
🗆 Enbridge	□ Other	🗆 I do not have	gas in my hom	e.	
			g		
[Enbridge Customers	only] - Please e	nter your account num	ber		
9. Please select answ	vers for each que	estion below			
a. What type	e of home do you	live in?			
b. What fuel	primarily heats y	our home:			
c. What kinc	of heating syste	m do you have?			
d. What fuel	heats your water	?			
e. What type	e of thermostat d	o you have?			
		-			
f. Does your	home have Wi-F	i?	□ Yes	□ No	





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Part D - Energy Affordability Program (Previously Home Assistance Program)

Choose an option		les	🗆 No		
Enter a year (if applicable)					
1. What kind of lights are installed in	n your home?				
\Box Incandescent	🗆 Halogen			□ Compact	Fluorescent Light (CF
	□ Other			🗆 Don't Kno	w
2. Which of the following appliance	s do you own and use?				
🗆 Fridge	🗆 Freezer			□ A/C	
🗆 Dehumidifier	□ Block Heater				
art E - Home Winterpro	ofing Program				
Part E – Home Winterpro	ofing Program	-	st? If so, ∙	what year?	
f you selected fridges] - Tell us how r Part E - Home Winterpro 3. Have you participated in the Hom Choose an option Enter a year (if applicable)	ofing Program	-		what year?	
Part E – Home Winterpro 3. Have you participated in the Hom Choose an option Enter a year (if applicable)	ofing Program	-		what year?	
Part E – Home Winterpro 3. Have you participated in the Hom Choose an option Enter a year (if applicable)	ofing Program	-		what year?	
Part E - Home Winterpro 3. Have you participated in the Hom Choose an option Enter a year (if applicable) 4. What decade was your home buil Choose a decade:	ofing Program	/es	□ No	-	bu don't know
Part E - Home Winterpro 3. Have you participated in the Hom Choose an option Enter a year (if applicable) 4. What decade was your home buil Choose a decade:	ofing Program	/es	□ No	k 'unsure' if yc	bu don't know Unsure
Part E – Home Winterpro 3. Have you participated in the Hom Choose an option Enter a year (if applicable) 4. What decade was your home buil Choose a decade: Pre-1980's Homes Only] – Please ans	ofing Program	/es best as you	Can. Mar	k 'unsure' if yc	

🗆 Yes

🗆 No

e. If it is, how much insulation is in your attic?



d. Is your attic insulated?

□ Unsure

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15. Does your home have a crawlspace? If so, how high is it from the ground?					
Choose an option	□ Yes	□ No			
Enter a height (if applicable)					
16. Does your home have a basement? If so, ho	ow much of the walls are	insulated?			
Choose an option	□ Yes	□ No			
Insulation Level (if applicable)					

17. Congratulations on making it to the end! Here are the next steps:

- a. Return your filled out application to us using one of the methods below:
 - E-mail: <u>ONhomeupgrades@clearesult.com</u>
 - Fax: 1-647-255-5422
 - Mail: CLEAResult Canada 393 University Avenue, Suite 1622, Toronto, ON, M5G 1E6
- b. Incomplete info? Unsure of some of your answers? We'll give you a call back within 3 5 business days from the date of receipt to help you complete your form and schedule your in-home assessment (if you qualify)
- c. In the meantime, we recommend you prepare your proof of enrollment in government benefits or your proof of income, as applicable.

Thank you for applying to the Home Winterproofing Program and Energy Affordability Program - we're looking forward to kickstarting your energy saving journey!

