

Energy Conservation Assistance Program application

For aboriginal communities and residents of non-profit housing



Bulk reference number Tseshah First nations 2021

To apply for the FREE Energy Conservation Assistance Program, please complete each of the following before submitting the application:

Complete the application in full.

Sign the declaration at the bottom of the page (highlighted in yellow below).

If you require assistance completing this application form please call the program contractor **It's On Electric 1-855-560-3227**.

1. Account holder information

BC Hydro account

First name (on BC Hydro bill)	Last name (on BC Hydro bill)	BC Hydro account number	
Account address	City Port Alberni	Province BC	Postal code
Home phone number	Other phone number	Email address	

FortisBC account

First name (on FortisBC bill)	Last name (on FortisBC bill)	FortisBC account number
-------------------------------	------------------------------	-------------------------

2. Property information

How many people live in your home?	Last name	Name of community Tseshah First nations
------------------------------------	-----------	--

What type of home do you live in?

Detached house Duplex Town house Apartment/condominium* Mobile home

Other:

*Please see terms and conditions for eligible products and measures for apartment units.

Do you rent your home?

Own Rent

(If you selected rent, and rent from a private landlord please complete and attach the Landlord Consent Form and complete the Landlord contact information below)

*If you live in a band-owned home, or non-profit housing you are NOT required to submit a Landlord Consent Form.

3. Income qualification and authorization for disclosure and collection

I understand that in order to qualify as a participant, BC Hydro requires proof that my household income meets the program's income requirement, and/or my building is eligible to participate in the program under the Terms and Conditions. By signing this form, I consent to BC Hydro collecting my personal information (including all items listed on this application form and income qualification status) indirectly from my band/non-profit administration office. Furthermore, I permit my Band/Non-Profit administrative office to disclose that personal information to BC Hydro for the purpose of qualification and for the administration of the program.

MUST COMPLETE

By signing below, I certify that I understand and agree to all of the preceding declarations and all terms and conditions that follow on this application. I certify that all the information is true and complete in every respect and that any willful misstatements may cause the rejection of my application.

BC Hydro account holder signature (BC Hydro account holder)

Date (Yr/Mth/Day)

FortisBC account holder signature
(If there is a FortisBC natural gas account associated with the residence.)

Date (Yr/Mth/Day)

Mail completed application to:
BC Hydro and FortisBC ECAP Operations
PO Box 8910 Stn Terminal
Vancouver, BC V6B 9Z9

OFFICE USE ONLY

Meets LICO threshold

Yes No

Authorized signature _____