OMB Control No. 2060-0528 Expiration Date: 1/31/2022



ENERGY STAR® Participation Form for Energy Efficiency Program Sponsors:

Partner Name:			
Date	e:		
	tner will participate in the program(s) checked below. Please select only those check boxes relevant for r organization.		
Pro	mote ENERGY STAR as an Energy Efficiency Program Sponsor* in the:		
	Consumer Product Market		
	Residential New Construction Market (ENERGY STAR Certified Homes)		
	Existing Residential Market (Sponsor Home Performance with ENERGY STAR Programs)		
	Existing Residential Market (ENERGY STAR Verified HVAC Installation)		
	Existing Commercial Buildings Market		
	New Commercial Buildings Market		
	Industrial Market		
* Such as states, utilities, or regional program coordinators			
	ase provide the zip codes that your organization serves to benefit from ENERGY STAR resources. Separate h zip code with a space.		
:	Zip Codes:		
	-		

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Partner Name:		
Date:		
	Primary Contact (if different than Signatory Contact listed in the Partnership Agreement)	Secondary Contact
Contact Name		
Title		
Company		
Address		
City		
State		
Zip		
Country		
Phone		
Email _		
	Secondary Contact	Secondary Contact
Contact Name		
Title		
Company		
Address		
City		
State		
Zip		
Country		
Phone		
Email		

Return completed Participation Form to:

join@energystar.gov

Or

ENERGY STAR c/o ICF International 1725 Eye Street, NW, Suite 1000 Washington, DC 20006