



Cape Light Compact Residential Energy Efficiency Program

Dear Cape Light Compact Customer,

You recently contacted Cape Light Compact to sign up for an energy audit. During the call you indicated that, based on the number of household members, your annual household income was at or below the Enhanced Residential Programs levels.

Please fill out the attached form, attach acceptable 3rd party annual income documentation and return to:

**Housing Assistance Corporation
Energy and Home Repair
460 West Main St.
Hyannis, MA 02601
Attention: C. Finn**

Please contact Cathy Finn at 508-771-5400 ext. 255 with any questions you may have.

2010 Income Guidelines

# OF HOUSEHOLD MEMBERS	ENHANCED RESIDENTIAL PRGM ¹	RESIDENTIAL PROGRAM ²
1	29,126	44,800
2	38,087	51,200
3	47,049	57,600
4	56,011	64,000
5	64,973	69,100
6	73,935	74,250

If your Annual Household Income is greater than the Enhanced Residential Program amount, please contact 1-800-797-6699 for further instructions regarding our Residential Program.

Thank you,
Cape Light Compact

The Cape Light Compact, administered through Barnstable County, is made up of all 21 towns of Barnstable and Dukes Counties. The Compact administers the regional energy efficiency program and works with the combined buying power of the region's over 200,000 electric consumers to offer competitive electricity supply, including a green power option, and other public benefits.



Cape Light Compact Residential Energy Efficiency Program

Enhanced Residential Energy Efficiency Program **60% Income Verification Form**

NSTAR Electric Account #: _____

Name: _____

Property Address: _____

Mailing Address: _____

Phone #: _____

of household members (please circle): 1 2 3 4 5 6

Total Annual Household Income: _____

ACCEPTABLE 3RD PARTY ANNUAL INCOME DOCUMENTATION (PROVIDE ONE):

Annual Household Income is the anticipated gross income from all sources for each adult individual member of the family (individuals 18 years and older).

- IRS tax forms most recent year Form 1040
- Signed employer verification of income statement
- Unemployment Compensation
- Disability Compensation
- Worker's Compensation
- Copies of Social Security earnings statements
- Other annuity or retirement income statements
- Signed local housing authority verification of income statement

Prior to submitting any of the documentation above, customers should remove any information containing social security number, driver's license number or state ID card number, financial account number, credit or debit card number.

Signature of applicant: _____ Date: _____

WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

FOR HOUSING ASSISTANCE CORP. USE ONLY:

Maximum income limit for household size: _____

Is the household eligible: Y / N

Authorized by: _____ Date: _____