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| **ATTACHMENT A** |

**HeatSmart Westchester Community**

**Contact and Authorized Signature Form**

**I. Applicant Information**

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| **Applicant Community** | |
| **Name of Municipality:** | **Mailing Address:** |
| **If applying as part of a coalition, list other up to three communities (villages and / or towns) applying:** | |
| **Primary HeatSmart Westchester Project and Coalition Lead Contacts, if applicable**  *If your community is selected, this person will serve as the primary contact on behalf of your municipality, taking a leadership role among the Core Team members and sharing their contact information on outreach material. If part of coalition, this person will be the key contact for the coalition of communities. Please also list the Project Lead for each community, if applying as a coalition.* | |
| **Contact Name of Project Lead for Community or Coalition** | **Title:** |
| **Telephone:** | **Email:** |
|  |  |
| **If part of a Coalition, Contact for Community Lead #1: (specify community):** | **Title:** |
| **Telephone:** | **Email:** |
|  |  |
| **If part of a Coalition, Contact for Community #2: (specify community):** | **Title:** |
|  | **Title:** |
| **Telephone:** | **Email:** |
|  |  |
| **If part of a Coalition, Contact for Community #3: (specify community):** | **Title:** |
| **Contact Name Community #3 Lead (specify community):** | **Title:** |
| **Telephone:** | **Email:** |
| **List Names of Other Core Team Members:** | |

**II. Core Team Background**In this space, please provide details about each Core Team member and describe why s/he was chosen for the Core Team in your community. List relevant experience, role in the HeatSmart Westchester campaign, interest in clean heating and cooling (CH&C) technology, etc. (No more than 2 pages).

**III. Authorized Signature** (This form should be signed by the same individual who signed the required letter of commitment as part of the municipality’s application.)

The undersigned is authorized by the municipality listed above. I certify:

* The applicant has read and understands the RFI requirements.
* The information contained in this RFI, and any related correspondence or documentation, is true, accurate, and complete, to the best of my knowledge.

Community 1:

|  |  |
| --- | --- |
| **Printed Name and Title:** | |
| **E-mail:** | **Phone:** |
| **Signature:** | **Date:** |

Community 2: (If more than 1)

|  |  |
| --- | --- |
| **Printed Name and Title:** | |
| **E-mail:** | **Phone:** |
| **Signature:** | **Date:** |

Community 3: (if more than 2)

|  |  |
| --- | --- |
| **Printed Name and Title:** | |
| **E-mail:** | **Phone:** |
| **Signature:** | **Date:** |