

Site Registration Form FY2016

ALL FIELDS REQUIRED - ENTER N/A IF NOT APPLICABLE

Construction Site (Unit) Information			Projected Participation Level:		See Attachment
Development Name:		Projected HERS Score:			
Street Address:		MS Unit#:			
City:		NJ	ZIP:		
Permit/Contract Date:		Est. Construction Start:		Est. Construction End:	
Building Type:	Single Family (SF) <input type="checkbox"/> (detached units)				
	Multi-Single (MS) <input type="checkbox"/> (2+ units with separate external entrances)				
	<input type="checkbox"/> Multifamily (MF) (3+ units up to 3 floors above grade/garage w/common external entrance(s); Includes most apartment buildings)				
	<input type="checkbox"/> Multifamily High Rise (MFHR) 4+ Stories (click here to see additional requirements) submitted through EPA Attach a separate list of Multifamily unit numbers in the building; Each building must have its own Site Registration Form				
Check if: <input type="checkbox"/> Modular – Document incl. <input type="checkbox"/> State funded affordable development <input type="checkbox"/> Gut Rehab					
Est. Unit Size:		sq.ft. CFA	Total Units in Building:		Number of Floors in Building:
Rating Type:	<input type="checkbox"/> Individually confirmed <input type="checkbox"/> Sampled		<input type="checkbox"/> MF Sample Tested		<input type="checkbox"/> MF High Rise – Performance Path
Electric Utility			Gas Utility		
Space Heat Fuel			Water Heating Fuel		

Builder/General Contractor						
<input type="checkbox"/> Check here if Homeowner is GC & enter "N/A" for Business Name					TIN#:	
Site Business Name:					<input type="checkbox"/> Check if Incentive Recipient	
Builder Name (if different):					<input type="checkbox"/> Check if Incentive Recipient	
Contact First Name:				Last Name:		
Address 1:				Address 2:		
City:			ST:		ZIP:	
Office Phone:				Cell:		
E-mail:				Fax:		

Rating Company						
Business Name:						
Contact First Name:				Last Name:		
Phone:				E-mail:		

Developer (if applicable)						
					<input type="checkbox"/> Check if Incentive Recipient	
Business Name:				TIN#:		
Phone:				E-mail:		

Architect (for Zero Energy Ready Homes)						
Business Name:				Check if other architects are also used*		
Contact First Name:				Last Name:		
Phone:				E-mail:		

HVAC Contractor						
Business Name:						
Contact First Name:				Last Name:		
Phone:				E-mail:		

For all projects registered on or after 9/1/2015 please submit construction documents in accordance with R103.2 of the 2015 IECC.

Site Registration Signature:

Builder/GC Rating Company **Date:** _____ **Signature:** _____

Submit completed forms to, or for more information please contact the program at RNCNJCEP@NJCleanEnergy.com