

Quick Home Energy Checkup (QHEC)

Landlord / Management / Condominium Association Permission Agreement

Dear Landlord/Manager:

Your tenants or condominium owners may qualify for the Elizabethtown Gas Quick Home Energy Checkup (QHEC) Program, a program sponsored by Elizabethtown Gas. Through the QHEC Program, we would like to install proven energy conservation measures – **at no cost to you as the owner, or to any eligible tenants or condominium association management that express interest in the program** – located at:

Fill out this section if only permitting work for a single unit

Tenant Name/Condominium Owner (Please Print):				
Street address:	Unit #	City:	State: NJ	Zip code:

Fill out this section if permitting work for the entire complex/building

Name of Complex/Building (if appropriate):		Number of units per building: _____		
Street address:	City:	State: NJ	Zip code:	

Based on QHEC Program guidelines we may (or may not) install energy-saving home improvements such as attic and wall insulation, caulking, and weatherstripping, energy-saving showerheads and light bulbs, water heater insulation, pipe and duct insulation. Some of these measures may be installed in attics, crawl spaces or other areas under Condominium Association jurisdiction. Health and Safety issues will also be identified. All work is guaranteed for a period of two years. You and your tenants/ condominium owners will save energy, money, and your building(s) will be more energy efficient.

I, (please print name) am the Owner, Condominium Association Manager, or Manager of the properties listed above and I agree to permit the Elizabethtown Gas QHEC Program to have its authorized contractors perform an energy conservation survey and install and inspect the conservation measures at NO COST to the participants, owner, or manager. I authorize and grant the QHEC Program access to test and evaluate the unit specified above or, if I've completed the information for the entire complex/building above, all units within the building as determined necessary by Program representatives. I further agree to forever release the utility companies listed below, their respective officers, directors, employees, agents and representatives, successors and/or assigns and to save them harmless from any claim for injury to persons, including death, or damage to physical and personal property in any way resulting from the weatherization services provided by the utilities listed below including, but not limited to all claims and suits directly or indirectly arising out of, resulting from, or related to moisture intrusion, mildew, fungus, spores, or mold of any type, nature, or description, including but not limited to any substance whose presence poses an actual or potential threat to human health. This authorization is valid for three years from the date of the signature and may be canceled at any time by contacting: Elizabethtown Gas at **1.833.493.0692**.

Landlord/Manager Signature _____ Date: _____

If you do not wish to participate in the Elizabethtown Gas QHEC Program, please check the box below, fill out the apartment /condominium complex/building's name and/or address, your name/address, your signature above and return this form.

I do not wish to participate in the Elizabethtown Gas QHEC Program.

Please mail or email to:
 Elizabethtown Gas Quick Home Energy Checkup Program
 c/o Honeywell Smart Energy · 534 Fellowship Road · Mount Laurel, New Jersey 08054
 Phone: 1.833.493.0692
 Email: elizabethtowngas@honeywell.com