## Multifamily Buildings Program 2017 – 2018 Participation Form





## **Property eligibility**

Completing this form is the first step in determining whether or not your property will be eligible for the Multifamily Buildings Program. In order to be eligible you must have a multifamily building that is five or more units. Buildings with less than five units may qualify for other programs. Please submit the completed form via email to assessments@fcgov.com. For more information or questions, call 970.416.2032 or email assessments@fcgov.com.

Property information					
Buildings with multiple entrances and addresses th	nat are all under one	roof are considered on	e building.		
Property name					
Property address(es)					
		City		State	ZIP
Number of buildingsTotal numb	er of units	Number of floo	rs per building	Year built	
Approx. number of 1 bedrooms	_ Approx. number of	f 2 bedrooms	Approx. numb	er of 3 bedrooms	
Water heater fuel source:	I Gas Other				
Water heater type: Individual Central		Water heater loca	ation: 🔲 In-unit 🔲 Co	ommon area	
leating system: Central Individual None Cooling system: Central Individual None					
Renovation in last 3 years: (check all that apply)	Heating system	Cooling system	Water heaters	tilation	iency showerheads
	Lighting - Commor	n area 🔲 Lighting - I	n unit 🗌 Other		
Condo/HOA: Yes No					
Affordable housing: Yes No Unknown	1				
Parking: Lot Underground Detached g	jarage 🗌 Attached	I garage  None			
Building Certifications: Energy Star LEED	Other		-		
Property Owner/Customer or Property Manage	r				
Name_					
Contact name					
Contact phone					
Address					
City		State		ZIP	
Utility information					
In order to be eligible for participation, buildings m	ust have natural gas	service through Xcel E	nergy and electric servic	ce through Fort Collin	s Utilities.
Does property receive natural gas service from Xca	el Energy?: Yes	☐ No Does proper	ty receive electric service	e from Fort Collins Ut	ilities?: Yes
Natural gas meters:  Individual  Master		Electric meters:	☐ Individual ☐ Maste	er	

## Agreement

Property owner agrees to participate in the Multifamily Buildings Program and understands that this program provides FREE products and installation of LEDs, high efficiency shower heads, and high efficiency faucet aerators for kitchen and bathroom sinks in-unit where applicable. Property owner agrees to work with the Multifamily Buildings Program implementer, Franklin Energy Services, LLC ("Franklin Energy"), to notify the residents of program participation through various means, including, but not limited to, posters in common areas and letters distributed to each unit or residence. Property owner will support these efforts by either posting notice in accordance with legal/state/county requirements or by providing Franklin Energy with access to distribute in common areas and to each unit or residence. Property owner agrees to provide personnel to escort the Franklin Energy technicians throughout the property and to provide access to all units or residences when the resident is not home or the residence is unoccupied.

PROPERTY OWNER ALSO AGREES THAT IN CONSIDERATION OF ITS PARTICIPATION IN THE PROGRAM AND RECEIPT OF FREE PRODUCTS, CITY OF FORT COLLINS, COLORADO; XCEL ENERGY; AND FRANKLIN ENERGY WILL NOT BE RESPONSIBLE IN CONTRACT, TORT OR OTHERWISE FOR ANY LOSSES OR DAMAGES OF ANY KIND INCURRED, ARISING OUT, OF OR RELATED TO THIS PROGRAM. NOT WITHSTANDING THE FOREGOING, FRANKLIN ENERGY WILL BE RESPONSIBLE FOR DIRECT COSTS OF LOSS OR DAMAGE INCURRED TO THE EXTENT CAUSED BY THE GROSS NEGLIGENCE OR WILLFUL MISCONDUCT OF FRANKLIN ENERGY. NO ACTION MAY BE COMMENCED BY PROPERTY OWNER AGAINST FRANKLIN ENERGY UNLESS WRITTEN NOTICE HAS BEEN GIVEN TO FRANKLIN ENERGY WITHIN TEN (10) DAYS AFTER THE OCCURRENCE GIVING RISE TO SUCH CAUSE OF ACTION. PROPERTY OWNER AGREES THAT UNDER NO CIRCUMSTANCES WILL THE CITY OF FORT COLLINS, XCEL ENERGY, OR FRANKLIN ENERGY BE RESPONSIBLE FOR ANY INDIRECT, CONSEQUENTIAL, INCIDENTAL, REMOTE OR SPECULATIVE DAMAGES ARISING FROM THE PROGRAM. THE UNDERSIGNED HAS READ AND UNDERSTANDS THE ABOVE AND HAS AUTHORITY TO SIGN THIS AGREEMENT AS OR ON BEHALF OF THE PROPERTY OWNER OF THE BELOW IDENTIFIED PROPERTY.

Customer signature				
Please submit completed application to the Multifamily Buildings Program via email at <b>Assessments@fcgov.com.</b> If you have any questions, please call a member of our program team at <b>970.416.2032</b> .				
Property owner or authorized property manager signature				
Name of property owner or authorized property manager (print)	_ Date			