

Affordable Home Electrification Program (AHEP) & Solar for All (SFA) Program Application

Application Instructions:

Please read these instructions in their entirety before starting your application.

Steps to Participate:

1. Determine if your home and income are program eligible.
2. Select your program(s) & complete this application
3. Submit your application with supporting documents:
 - Most recent copy of your Washington Gas and PEPCO Utility Bill.
 - Income verification documentation (see Attachment A).
 - PEPCO authorization form (see Attachment B).
 - AHEP specific documentation:
 - Washington Gas authorization form (see Attachment C).

Eligibility:

General Requirements:

- ✓ I live in the District of Columbia.
- ✓ I am at least 18 years of age and am the primary decision maker for the home.
- ✓ My household either:
 - Receives assistance from at least one of the following:
 - ✓ The Low-Income Home Energy Assistance Program (LIHEAP),
 - ✓ Temporary Assistance for Needy Families (TANF),
 - ✓ Supplemental Security Income (SSI),
 - ✓ Weatherization Assistance Program (WAP),
 - ✓ Utility Discount Programs (UPD): Residential Essential Services,
 - ✓ Utility Discount Programs (UPD): PEPCO Residential Aid Discount (RAD),
 - ✓ Utility Discount Programs (UPD): Customer Assistance Program,
 - ✓ Clean Rivers Impervious Area Charge (CRIAC): CAP1 & CAP2,
 - ✓ Lead/Hazard Reduction Program (LRP),
 - ✓ Solar for All (for households up to four individuals), **or**
 - Meets the income eligibility requirements in Attachment A.
- ✓ I authorize the DCSEU, its assigned Subcontractor(s), the Department of Energy and Environment (DOEE), and the Department of Buildings (DOB) to enter my home to:
 - ✓ Conduct and inspect the work as necessary.
 - ✓ Upload documentation to the DCSEU's secure portal if I cannot do it myself.

Affordable Home Electrification Program (AHEP) Requirements:

- ✓ I live in a, or I am a:
 - Single-family home (townhouse, row house, detached house)
 - Small apartment building (any building with two to four units/apartments or less)
 - Unit owner in a large apartment building (any building with five or more units/apartments)Eligible equipment for individual owner unit upgrades are:
 - ✓ In-unit ducted furnace
 - ✓ In-unit domestic gas hot water heater
 - ✓ In-unit gas clothes dryer
 - ✓ In-unit gas stove/ranges

Please note: If you live in an apartment/multifamily building with 5 or more units, you can only apply through this application if you own your individual unit, the equipment to be replaced resides within your unit, and the electrification process has no impacts to the rest of the building. This will be determined once you are income qualified and a walkthrough is conducted. If you **do not own your unit and have in-unit eligible equipment**, you **should not** apply through this application. However, your building may qualify for the **Affordable Multifamily Electrification Program**.

Solar for All (SFA) Requirements:

- ✓ I do not have a solar system installed on my home, nor have I signed a contract to install one.
- ✓ I do not live in a multifamily (five units/ apartments or more) building that is master metered.
- ✓ My home receives electric services from PEPCO.

To Apply:

By Mail:

Follow the application instructions. Print the application along with the aforementioned documentation and mail to:

DCSEU AHEP & SFA
1 M Street SE
3rd Floor
Washington, DC 20003

Or

Online:

Skip this application & apply for both programs online directly at dcseu.com/ahep-sfa-apply

1. Select the Program(s) You'd Like to Apply For:

*FIELD REQUIRED

This single application allows you to apply to one program or both!

Affordable Home Electrification Program (AHEP)

I'm considering switching my home's heating, hot water system, gas dryer, and/or stove from natural gas or oil to electric. More information about this program can be found online here: dcseu.com/electrifymyhome. **By applying for AHEP, I acknowledge and understand that that this program currently is operating with both local District and federal Department of Energy Home Electrification and Appliance Rebates funds. I also understand and acknowledge that if I participate in AHEP my utility bills may increase.**

*I live in a, or I am a: (select one) *FIELD REQUIRED IF SELECTING THIS PROGRAM

- Single-family detached home (detached house)
- Single-family attached home (townhouse, row house, etc)
- Small apartment building (any building with two to four units/apartments or less). Select the number of units below:
 2 3 4
- Unit owner in a large apartment building (any building with five or more units/apartments). Enter the number of units below:

*Please identify which of the following in your home use natural gas or oil: (select all that apply)

- Water heater/boiler Heating System
- Cothes Dryer Stove/Range
- Other gas equipment No gas equipment

If a DCSEU Approved Contractor contacted you about AHEP, please provide the company name here:

Solar for All (SFA)

I'm interested in installing a free residential net-metered solar system on my home or signing up with DOEE to receive community solar electricity bill credits. More information about this program can be found online here: doee.dc.gov/solarforall.

Would you like to apply for Solar for All Community Solar with the Department of Energy and Environment (DOEE)?

What is this?

This will make you eligible to receive **electricity bill credits** while the DCSEU determines if your home is suitable for rooftop solar.

Please note:

Your answer does not disqualify you from rooftop solar and the income qualification requirements and potential savings are the same.

- Yes, please share my request with the DOEE
- No, I only want to be considered for rooftop solar

If a DCSEU Approved Contractor contacted you about SFA, please provide the company name here:

2. Customer Information:

*FIELD REQUIRED

Mr. Mrs. Ms. Dr. *First Name: *Last Name:

*Installation Address: *Unit/Apt Number:

*City/State: *Zip Code: *Ward:

Mailing Address (if different):

*State: *Zip Code:

*Preferred Method of Contact: Email Primary Phone Alt Phone *What is the primary language spoken in your home?

*Email: *PrimaryPhone: () Best time of day to reach you:

Alt Phone: () Best time of day to reach you:

*Do you pay?: PEPCO No Yes. Account #:

Washington Gas No Yes. Account #:

Oil Company No Yes. Company Name: Account #:

Other Heating Fuel No Yes. Company Name: Account #:

2. Customer Information (continued):

*FIELD REQUIRED

*Do you rent or own your home? Own Rent (Your property owner will need to give their permission)

NOTE: If you are not the homeowner, please provide property owner information below:

Owner First Name: Owner Last Name:

*Owner Mailing Address: *Owner City:

*Owner Zip Code: *Owner Email: *Owner Phone: ()

*Tell us about your family & home:

*1. Is your home "historic or in a historic district?"

- No
 Yes
 Not sure

*2. Is your home located in the Deanwood or River Terrace neighborhoods?

- No
 Deanwood
 River Terrace

*3. I currently have internet access in my home?

- No
 Yes
 Not sure

*4. Does your home have any roof leaks or structural damage?

- No
 Yes
 Not sure

*5. Does your home have any electrical issues?

- No
 Yes
 Not sure

*6. Does your home have any issues with its cooling or heating systems?

- No or not applicable
 Yes (please provide details)

*7. What is your primary heating source?

- Electric Oil
 Gas
 Other:

*8. What type of heating system does your home have?

- Furnace (vents) Electric Baseboard
 Boiler (radiator) None
 Heat Pump Not sure

*9. What type of cooling system does your home have?

- None
 Window Air Conditioning
 Central Air Conditioning
 Heat pump
 Not sure

*10. If you have a gas clothes dryer, are you interested in replacing with an electric heat pump dryer?

- No or not applicable
 Yes

*11. How many bedrooms & bathrooms does your home have?

Number of Bedrooms: Number of bathrooms:

*12. Are you or is your household currently participating in DOE's LIHEAP Program?

- No Yes Not sure

3. Attach Your Income Verification & Supporting Documentation:

Qualifying households must meet the income guidelines below and provide a copy of their most recent energy utility bills.

If you are requesting services for Solar for All (SFA) or Affordable Home Electrification Program (AHEP), **please attach copies of:**

1. Most recent energy bills:

- ✓ PEPCO Bill
- ✓ Washington Gas Bill
 - and/or bill from fuel oil company

2. Income Verification Documentation:

- ✓ A letter of certification dated on or after October 1, 2024, showing that you receive assistance from one of the following:
 - DOEE Low-Income Home Energy Assistance Program (LIHEAP)
 - Temporary Assistance for Needy Families (TANF),
 - Section 8 Housing Voucher
 - Supplemental Security Income (SSI), or
 - Proof of other income eligibility (**see Attachment A**)

3. Signed PEPCO Authorization Release Form:

- ✓ **See Attachment B**

4. For Affordable Home Electrification Program (AHEP) only:

- ✓ Signed Washington Gas Authorization Form (**see Attachment C**)

What happens next?

Affordable Home Electrification Program (AHEP)

- A DCSEU program staff member will contact you within 3 business days to confirm receipt of your application. If your application has incomplete or missing information, we will request the additional documents needed to process it.
- The DCSEU will verify your income qualification documents within 3 business days to inform you of your eligibility to participate in the AHEP program.
- An initial walkthrough of your home with DCSEU Staff and Subcontractor, is scheduled to determine if your home qualifies for program.
- If your home qualifies, a Homeowner Agreement form is issued for your signature before equipment installation can begin
- Subcontractor begins installation
- Upon completion of installation, the District Department of Buildings (DOB, formerly DCRA) inspection is scheduled. Please note DOB inspections require 1 full business day of availability for DC code adherence. Additional days may be required if reinspection needs to take place.
- Upon completion of DOB inspection, a DCSEU Quality Control inspection is scheduled. Please note additional days may be required if reinspection needs to take place.

Solar for All (SFA)

- A DCSEU program staff member will contact you within 3 business days to confirm receipt of your application. If your application has incomplete or missing information, we will request the additional documents needed to process it.
- You can expect a follow-up within 5 business days to inform you of your eligibility to participate in the SFA program. If deemed eligible, the DCSEU will provide essential details regarding the FY2025 program and its timeline.
- A Subcontractor will be assigned to visit your home, if you're eligible to have a solar system installed. During the walk-through, they will assess whether your home is a suitable candidate for a solar system. If any issues are identified during the site visit, they will be communicated to you. If the DCSEU cannot resolve the issues, the DCSEU will provide your information to DOEE to determine if you are eligible to receive community solar bill credits.
- If you and your home are deemed eligible for the program, you will need to sign a homeowner agreement agreeing to the SFA program requirements. Upon signing, the DCSEU will authorize the Subcontractor to proceed with the solar system installation at no cost to you.
- Your home's solar system will generate electricity output to offset your home's electricity use and costs for a period of 20-years, or you will receive community solar electricity bill credits until your income exceeds the income limits.

Please sign telling us that you agree to these terms:

APPLICATION TERMS & CONDITIONS

- I understand that this application is only for the services requested above.
- I understand that this application does not guarantee that I will receive services through AHEP or SFA programs.
- I understand that if I am approved to receive services, I must provide full access to my home so that all DCSEU-authorized
- Subcontractors can install approved measures by the deadline specified by the DCSEU or September 15, 2025, whichever comes first.
- I understand that additional terms and conditions may apply. The DCSEU reserves the right, in its sole discretion, to request information not requested on this application or modify program requirements at any time. The DCSEU will make a good faith effort to keep all applicants informed of additional terms and conditions and any programmatic changes.
- I agree to allow DOEE, or its designee, to use deidentified data from this form and from program administration to conduct research and analysis for the program. This data may be shared with other organizations, agencies, or the public to promote program evaluation and progress.

STATEMENT OF TURTH & AUTHORIZATION FOR VERIFICATION

I swear or affirm I am an adult, and that all information on this application, and all information I submitted or will submit in support of this application, is true, correct, and complete to the best of my knowledge, ability, and belief. I understand I can be penalized by fine and/or imprisonment for making false statements. My signature on this application grants the DCSEU and DOEE permission to contact any government entity, business, or person DOEE deems necessary to verify the information I have provided.

***Home/Property Owner:**

*Signature:

*Print Name:

*Date:

***Tenant (if different than the Home/Property Owner):**

*Signature:

*Print Name:

*Date:

If the applicant is a tenant, this application MUST be signed by the home/property owner.

AHEP AND SFA TERMS AND CONDITIONS

Below are some general terms and conditions that apply to the AHEP and SFA Programs. I understand that additional terms and conditions may apply. I will have the opportunity to review and approve any additional terms and conditions before any work begins in my home.

SITE VISIT

I grant permission to the DCSEU (or its Subcontractor), DOEE and DOB to schedule and complete a site visit at my home to help determine my or my home's eligibility to participate in the program(s) requested above. This may include, but is not limited to, collecting information and photographs about my environmental and sustainability goals, the equipment installed in my home (such as heating, ventilating, air conditioning, electrical panel, etc.), structural elements of my home (e.g., the condition of my roof), and occupancy and comfort requirements. All site visits will be scheduled in consultation with me.

INSTALLATION

- I understand that if I do not own the home listed above, any equipment, materials, and supplies installed by the DCSEU (or its Subcontractor) will become the property of the homeowner. This includes the installation of a Photovoltaic (PV) Solar System and/or Battery Storage System, if applicable.
- Furthermore, I acknowledge that upon determination of my eligibility for a DCSEU Program, I will have the opportunity to review and approve the equipment, materials, and/or supplies to be installed in my home in a Homeowner Agreement between myself (or the property owner, if I am not the property owner) and the assigned installing Subcontractor ("Subcontractor"). The DCSEU neither directly nor indirectly recommends and/or endorses any specific manufacturers or equipment. Therefore, the Homeowner Agreement will only include a general description of the equipment, materials, and/or supplies (e.g., programmable thermostat or heat pump water heater). Additionally, it is important to note that **not all equipment, materials, and/or supplies are eligible for installation under the DCSEU's AHEP Program** (e.g., cold climate heat pumps or WiFi enabled thermostats).
- If I am eligible for the AHEP and/or SFA Program, the Subcontractor and I will enter into the Homeowner Agreement, and the DCSEU will issue a work order to the Subcontractor to complete the installation. I will have the opportunity to coordinate specific installation time(s) and detail(s) with the Subcontractor.

DISPOSAL OF EQUIPMENT

Unless otherwise set forth in a Homeowner Agreement, the DCSEU is not responsible for the proper disposal or recycling of any waste generated as part of my participation in this project. For AHEP related projects, the Subcontractor will be responsible for the proper removal and disposal or recycling of waste generated by the installation as covered in the Homeowner Agreement.

POST-INSTALLATION VERIFICATION, AND QA/QC INSPECTION

I grant permission to the DCSEU (or its Subcontractor), DOEE and DOB to **schedule and complete a post-installation Installation, Quality Assurance/Quality Control (QA/QC) inspection at the home listed on the Customer Application Form** upon completion of my project to verify all equipment has been installed and complies with the DCSEU program requirements (note: the QA/QC inspection is a program specific inspection and completely separate from any inspections completed by the District Department of Buildings). This inspection may include collecting information and photographing any work completed by the Subcontractor before issuing payment to the Subcontractor. I further agree to allow the DCSEU reasonable access to the installed equipment and all documents pertaining to their installation for five years after project completion.

CUSTOMER'S UTILITY DATA AND OTHER INFORMATION

I grant permission to DCSEU (or its Subcontractor), DOEE, and the US Department of Energy (US DOE) **to review my electric (PEPCO) and gas (Washington Gas) account information** associated with the home listed above, as applicable, both prior to installation and after installation for a period up to five (5) years. I also authorize PEPCO and Washington Gas to share online information with DOEE, US DOE, and the DCSEU (or its Subcontractors) for up to five (5) years from my signature date on this application. By signing this Customer Application, I agree that the DCSEU has my permission, without any additional compensation, to use information about and photographs before, during, and after installation for promotional and marketing use.

DISCLAIMER; WARRANTY

Customer acknowledges that any guidance, advice, or estimates of professional services and/or energy savings, costs, and benefits provided by the DCSEU are not guaranteed expressly or implicitly; actual savings and costs may differ from estimates due to many factors, including but not limited to the services performed and the specific details related to your home (e.g., comfort requirements, weather, changes in use, and equipment maintenance, etc.). Customer acknowledges the importance of conducting an independent evaluation and making decisions based on their unique circumstances. The guidance, advice, or estimates provided by the DCSEU shall serve as general information and shall not be a substitute for the Customer's thorough evaluation and decision-making process. The DCSEU does not warrant the performance of equipment installed, and disclaims all warranties, whether express or implied, including any implied warranty of merchantability or of fitness for a particular purpose. Any manufacturer's warranties will be as set forth in the Homeowner Agreement between Customer and Subcontractor. Customer also understands that the incentives provided by the DCSEU (in the form of no-cost installation performed by the Subcontractor) may be considered taxable income. Any taxes or other governmental assessments that result from Customer's receipt of the benefits in this Customer Application or the Homeowner Agreement will be the responsibility of Customer. Customer agrees that the DCSEU (or its Subcontractors) holds the sole rights to all electric system capacity credits and environmental credits associated with the AHEP or SFA project, such credits to be used for the benefit of District of Columbia ratepayers.

***Home/Property Owner:**

*Signature:

*Print Name:

*Date:

***Tenant (if different than the Home/Property Owner):**

*Signature:

*Print Name:

*Date:

If the applicant is a tenant, this application MUST be signed by the home/property owner.

Attachment A: Proof of Other Income

1. Income Eligibility Requirements

Income-qualified property owners or tenants are defined as households with total annual incomes equal to or below 80% of the Area Median Income (“AMI”) as listed in the table below. The household income amounts listed in the eligibility table are effective as of 8/30/2024 but may change. Please visit the D.C. Department of Housing and Community Development (DHCD) website (<https://dhcd.dc.gov/service/rent-and-income-program-limits>) for the most-up-to-date income thresholds.

*Select the check box next to the amount that your annual gross household income falls at or below based on the county that you live in and the number of people in your household. (Select only one row)

Persons in Household	Income Threshold
<input type="checkbox"/> 1	\$86,650
<input type="checkbox"/> 2	\$99,000
<input type="checkbox"/> 3	\$111,400
<input type="checkbox"/> 4	\$123,750
<input type="checkbox"/> 5	\$133,650
<input type="checkbox"/> 6	\$143,550
<input type="checkbox"/> 7	\$153,450
<input type="checkbox"/> 8	\$163,350

2. Household Members

***FIELD REQUIRED**

*Total Household Members:

Household is defined as one or more individuals who live together. Members of the household do not need to be related by blood, marriage or in any other legal capacity. Family members who are away from the household for a certain period of time may be considered part of the household.

*Enter each household member below along with their SSN, age, and annual income.

Member 1:

*First Name: *Last Name:
 *Age: *Income: *Social Security #:

Member 2:

*First Name: *Last Name:
 *Age: *Income: *Social Security #:

Member 3:

*First Name: *Last Name:
 *Age: *Income: *Social Security #:

Member 4:

*First Name: *Last Name:
 *Age: *Income: *Social Security #:

Member 5:

*First Name: *Last Name:
 *Age: *Income: *Social Security #:

Member 6:

*First Name: *Last Name:
 *Age: *Income: *Social Security #:

2. Household Members (continued)

*FIELD REQUIRED

Member 7:

*First Name: *Last Name:

*Age: *Income: *Social Security #:

Member 8:

*First Name: *Last Name:

*Age: *Income: *Social Security #:

Member 9:

*First Name: *Last Name:

*Age: *Income: *Social Security #:

Member 10:

*First Name: *Last Name:

*Age: *Income: *Social Security #:

Member 11:

*First Name: *Last Name:

*Age: *Income: *Social Security #:

Member 12:

*First Name: *Last Name:

*Age: *Income: *Social Security #:

Member 13:

*First Name: *Last Name:

*Age: *Income: *Social Security #:

Member 14:

*First Name: *Last Name:

*Age: *Income: *Social Security #:

3. Submitting Your Income Documentation

When submitting this application to the DCSEU, please include the following:

- A copy of the following for **ALL RESIDENTS** of the household:
 - ✓ **State-issued photo ID**
 - ✓ **Social security card**
- **Income verification.** Refer to the list of applicable forms of countable income below to determine a household's income eligibility for the current program year. Applicants must provide proof of gross annual household income within the past year from the date of application to the program.
 - ✓ You must submit at least one of the following documents from the category list below for **EACH income earner in the household** along with a program application to show proof income for your household.

Please note: 1040s and 1099s are only acceptable documents for proof of self-employment income. All other tax documents, including W2s are not acceptable for proof of income. If you do not have an income please proceed with your application and complete the **Income Affidavit Form** and submit to DOEE. DOEE must approve and verify all proof of no-income directly.

Acceptable forms of documentation:

1040 & 1099 Tax Forms:

- Proof of self-employment income

Account Statements:

- Proof of gross income
- Proof of wages
- Proof of self-employment income
- Proof of unemployment insurance
- Retirement/pension benefits
- One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.
- Supplemental Security Income (SSI) or Disability Insurance Payments
- Social Security Administration (SSA) benefits (Incl. Medicare deduction)**

Agreements, Affidavits, and Court Documents:

- Proof of no income (DOEE Affidavit)**
- Rental income (rental agreement)
- Proof of strike pay (court document with account statement)
- Alimony (court document with account statement)
- Child support (court document with account)

Letters of Certification:

- Supplemental Nutrition Assistance Program (SNAP)**
- Temporary Assistance for Needy Families (TANF)**
- Supplemental Security Income (SSI)
- Low Income Home Energy Assistance Program (LIHEAP)*
- Weatherization Assistance Program (WAP)*
- Utility Discount Programs (UPD): Residential Essential Services*
- Utility Discount Programs (UPD): PEPSCO Residential Aid Discount (RAD)*
- Utility Discount Programs (UPD): Customer Assistance Program
- Clean Rivers Impervious Area Charge (CRIAC): CAP1 & CAP2*
- Lead/Hazard Reduction Program (LRP)*
- Solar for All (for households up to four individuals) *
- Employment through the Workforce Investment Act (WIA) (DC DOES)
- Work study programs

Pay Stubs

- Proof of gross income
- Proof of wages statement

**Categorically approved based on Federal or State Government Assistance

Note: Please attach additional pages as needed for any additional household members.

Attachment B: PEPCO Authorization Release

PEPCO Authorization to Release Customer Usage Information to the DC Sustainable Energy Utility (DCSEU)

Direct all questions for this authorization to the DCSEU at electrify@dcseu.com or by calling 202-479-2222

Customer Information:

*FIELD REQUIRED

*Customer Name: *Company Name:

Contact Person (If applicable):

*Mailing Address:

*City: *State: *Zip Code:

*Email: *Phone Number: ()

*PEPCO Utility Account Number(s):

Insert each account number in a separate single line

*Service Address(es):

Insert each address in a separate single line format: [Street Address, City, State, Zip Code]

Authorization to Release:

*FIELD REQUIRED

I, the above referenced Customer, hereby affirmatively consent to PEPCO disclosing my energy usage (kWh, KVa, KW and 15 minute interval usage) or permitting access to my energy usage through PEPCO's Chief Energy Officer online portal to the DCSEU. This authorization shall remain in effect indefinitely unless otherwise noted.

By signing this authorization, I affirm that I have the authority to make and sign this request on behalf of the Customer for all Account Numbers that are associated with this request.

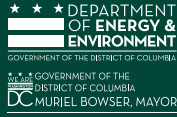
*Signature of Customer(s)/Authorized Representative:

*Printed Name of Customer(s)/Authorized Representative:

*Title: *Date:

For Internal Use Only:

Please return this form to:



Attachment C: Washington Gas Authorization Release

**Washington Gas Authorization to Release Customer Usage
Information to the DC Sustainable Energy Utility (DCSEU)**

Direct all questions for this authorization to the DCSEU
at electrify@dcseu.com or by calling 202-479-2222

Customer Information:

***FIELD REQUIRED**

*Customer Name: *Company Name:

Contact Person (If applicable):

*Mailing Address:

*City: *State: *Zip Code:

*Email: *Phone Number: ()

***Washington Gas Utility Account Number(s):**

Insert each account number in a separate single line

***Service Address(es):**

Insert each address in a separate single line format: [Street Address, City, State, Zip Code]

Authorization to Release:

***FIELD REQUIRED**

I, the above-referenced Customer, hereby affirmatively consent to Washington Gas disclosing my energy usage (therms) in csv format to the DCSEU. This authorization shall include my usage for a period starting three years prior to the date of my signature below, and will remain in effect for a period of three additional years from my signature date.

By signing this authorization, I affirm that I have the authority to make and sign this request on behalf of the Customer for all Account Numbers that are associated with this request.

*Signature of Customer(s)/Authorized Representative:

*Printed Name of Customer(s)/Authorized Representative:

*Title: *Date:

For Internal Use Only:

Please return this form to: