OMB Control No. 2060-05280 Expiration Date: 1/31/2022



ENERGY STAR® Participation Form for Retailers of ENERGY STAR Eligible Products:

Partner Name:		
Date:		
Organization Type: (Hold Ctrl to select multiple)		
Partner will promote the following ENERGY STAR products. Please select only those check boxes relevant for your organization. If your retail organization also owns a brand and intends to certify products as ENERGY STAR, please fill out the Product Brand Owner Participation Form found at www.energystar.gov/join .		
Product Offerings		
Residential Appliances	Other Products	
☐ Major Appliances	☐ Electrical Vehicle Supply Equipment	
□ Small Appliances	☐ Laboratory Grade Refrigerators and Freezers	
	☐ Pool Pumps	
Commercial Food Service Equipment	☐ Smart Home Energy Management Systems	
□ Commercial Food Service	☐ Water Coolers	
	☐ Vending Machines	
Heating, Ventilation, and AC Products		
□ Ceiling Fans	Water Heaters	
☐ Heating and Cooling	☐ Water Heaters	
☐ Thermostats	·	
□ Ventilation	Office Equipment	
	□ Computers	
Home and Building Envelope Products	□ Datacenter Products	
☐ Insulation Products	☐ Office Equipment	
□ Residential Storm Windows		
☐ Windows, Doors, and Skylights	Lighting Products	
	☐ Decorative Light Strings	
Home Electronics	☐ Lighting	
□ Flectronics		

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Primary Contact (if same as signatory contact, leav	e this blank)
Contact Name	Role in Company (Hold Ctrl to select multiple)
Title	
Company	
Address	
City	
State	
Zip	
Country	
Phone	
Email	
Additional Contact 1 (optional)	
Contact Name	Role in Company (Hold Ctrl to select multiple)
Title	
Company	
Address	
City	
State	Role in ENERGY STAR Program
Zip	
Country	
Phone	
Fmail	

Return completed Participation Form to:

join@energystar.gov or ENERGY STAR c/o ICF 1725 Eye Street, NW, Suite 1000 Washington, DC 20006

Additional Contact 2 (optional) Role in Company (Hold Ctrl to select multiple) **Contact Name** Title Company Address City State Role in ENERGY STAR Program Zip Country Phone **Email** Additional Contact 3 (optional) **Contact Name** Role in Company (Hold Ctrl to select multiple) Title Company **Address** City State **Role in ENERGY STAR Program** Zip Country Phone **Email**

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ENERGY STAR Participation Form

EPA Form No. 5900-34