OMB Control Number: 2060-0586 OMB Expiration Date: 1-31-2024

Your Organization

Your Partnership

Oversight Org.

Contacts

Review

Sign and Submit

Next Steps

About Your Organization

To get started, please enter the information below.

* Organization Name	* State		
		Please Select	*

Continue

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Your Organization

Your Partnership

Oversight Org.

Contacts

Review

Sign and Submit

Next Steps

About Your Organization

Please provide the following information about your organization.

Organization Name:		* Organization Phone Number:	ext:
Test Man Tester			
Country:		Website: 🛈	
United States	•		
Address:			
	6		
Postal Code:			
Search Postal Codes	Q		

About Your Partnership

There are separate ENERGY STAR partnership programs for Accredited Rating Providers and Home Energy Raters.

Organization Type

To qualify for partnership as an Energy Rating Company, your organization must be either an Accredited Rating Provider or a Home Energy Rater.

- * Please select the option that best describes your organization.
- Accredited Rating Provider
- Home Energy Rater

Additional Partnership Opportunities - Indoor airPLUS

Did you know that EPA offers special recognition to builders, raters and providers who commit to offering Indoor air-PLUS to their home buyers? This commitment will be denoted with a special Indoor airPLUS icon on the ENERGY STAR New Homes Partner Locator.



Yes





Oversight Org.

Select Your Residential Oversight Organization

* Select your Residential Oversight Organization:

Energy Rating Companies that intend to certify homes as ENERGY STAR using an ERI compliance path must be working under the oversight of an EPA-recognized Home Certification Organization (HCO). Select the HCO below that you will initially be working with for your ENERGY STAR certification activity. However, note that this selection does not bind your organization to work with the same HCO throughout the term of your ENERGY STAR partnership and Energy Rating Companies are not precluded from working with multiple HCOs, depending on their needs. EPA neither encourages nor discourages working with any specific HCO.

Contacts

Review

Home Certification Oversight Organization (HCO) Name:

Please select	•

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Next Steps

Sign and Submit

EPA Form Number: 5900-188

About You (Partnership Agreement Signatory)

As the person submitting this Partnership Agreement, you will be considered the **Signatory** and a **Primary Contact** for this Organization. Please provide the information below. You will also have the opportunity, if you wish, to provide contact information for others in your organization.

Please note, to submit your Partnership Agreement you must have at least one Rater/Field Inspector contact that has completed ENERGY STAR Version 3 training and for whom you can upload their training certificate.

refix:	* Contact Type: i		
-None	Signatory, Primary		
First Name:	* Email Address:		
Last Name:	* Verify Email Address:		
tle:	* Primary Phone:	ext:	* type:
	Secondary Phone:	ext:	type:
* Role(s) in Organization:			None
Administrative	* Mailing Address:		
Architect	Select Address		

Review

Sign and Submit

Next Steps

Review ENERGY STAR Partnership Agreement Application

Please review the information and make any necessary edits.

Organization Information

Organization Name: Test Man Tester

Address: 1200 Pennsylvania Ave

Washington, District of Columbia

20004

United States

Website:

Organization Phone Number: (202) 256-8934

Display on Partner Locator: Yes

Partnership Information

Organization Type:

Accredited Rating Provider

Edit

Edit

Next Steps

Sign ENERGY STAR Partnership Agreement

Please follow the instructions below to complete the final step in submitting your ENERGY STAR Partnership Agreement.

E-signature
Signatory: Test Test Man
* As a representative of Test Man Tester, I have read the <u>ENERGY STAR Partnership Agreement terms and conditions</u> and the <u>Indoor airPLUS Partnership Agreement terms and conditions</u> , and I am authorized to sign the Partnership Agreement on behalf of my organization. I recognize that by checking this box, I am binding the organization to the terms of the agreement.

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Submit Partnership Agreement

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EPA Form Number: 5900-188

Next Steps

Your ENERGY STAR and Indoor airPLUS Partnership Agreements Have Been Submitted

Thank you for submitting your application to become an ENERGY STAR and Indoor airPLUS partner. Your Partnership Agreement Reference Number is **PA-0005810-20231229**. Please save this number or print this page for reference.

Here is what to expect next:

• Once your Partnership Agreement is approved, those individuals designated as Primary Contacts will receive an email with a username and password for accessing partner-only resources on the ENERGY STAR and Indoor airPLUS websites, including program logos and co-brandable resources.

Until then, please review the <u>ENERGY STAR website for New Construction Professionals</u> and the <u>Indoor airPLUS website for Builders, Raters, and Providers</u> for additional information about working with the programs. If you have any additional questions about the programs or the status of your Partnership Agreement, please contact us at <u>ENERGY STAR</u> or <u>Indoor airPLUS</u>, as appropriate.