



New Jersey Natural Gas Income-Eligible HVAC Program

Income Requirements

# of People in Household	1	2	3	4	5	6	7	8	9
Minimum Annual Income	\$25,532	\$34,492	\$43,452	\$52,412	\$61,372	\$70,332	\$79,292	\$88,252	\$97,212
Maximum Annual Income	\$64,183	\$83,932	\$104,348	\$123,430	\$143,178	\$162,928	\$166,631	\$170,333	\$174,036

The SAVEGREEN Project® HVAC Income Eligible Program Guidelines

NOTE: Prior to submitting this application, applicants must be approved for the New Jersey Natural Gas (NJNG) On-Bill Repayment Program (OBRP). To be eligible for the New Jersey Natural Gas (NJNG) extended On-Bill Repayment loan period (7 ½ years) and NJNG rebate (NJNG Income-Eligible HVAC Program) applicant must be approved for the NJNG OBRP, meet income guidelines above and be a New Jersey Natural Gas customer. Customers may also apply for New Jersey’s Clean Energy Program’s (NJCEP) rebates. All equipment must meet NJCEP’s minimum efficiency guidelines.

Required Documents

1. One valid form of NJ ID such as a valid driver’s license, ID card issued by federal, state or local government agency, U.S. Military or Veteran ID card or voter’s registration card of the primary applicant with current address.
2. First and second page of your previous year’s tax return 1040 for anyone 18 years of age and older in your household not included as a dependent on your previous year’s tax return. Second page must be signed if self-prepared.

Please note: Additional documents may need to be requested once your application is reviewed. Please make sure the application is fully completed, signed and submitted with all required documents. Incomplete applications will not be processed. Applications can be faxed, mailed, scanned/emailed, or dropped off in person.

New Jersey Natural Gas
 Attention The SAVEGREEN Project
 1415 Wyckoff Road
 PO Box 1464
 Wall, NJ 07719
 Phone: 877-455-NJNG (6564)
 Fax: 732-378-4935

Last Name: _____ Social Security #: _____ - _____ - _____
 First Name: _____ Home Phone: () _____ - _____
 Home Address: _____ Cell Phone: () _____ - _____
 City: _____ State: _____ Zip Code: _____
 Email: _____

Household Members of everyone who resides in the household including applicant. First Name, Middle Initial, Last Name	Date of Birth	Relationship to Applicant

MAKE SURE YOU SIGN AND DATE SIDE/PAGE 2 OF THIS APPLICATION.



How did you hear about this program? Direct Mail Family/Friend Contractor Website Other

By signing this application, I certify under oath that the information given in and attached to this application is true, complete and correct. I am aware and understand that if any information contained in or attached to this application is willfully false it will result in the termination of my application. I understand that I must provide the required documentation in order to proceed with the application process and that additional documentation may be needed to confirm my household's eligibility for this program.

Signature: _____ Date: _____

Printed Name: _____

If you are declined for the Income-Eligible HVAC Program you may still apply for The SAVEGREEN Project's rebates and incentives as well as rebates offered by New Jersey's Clean Energy Program (NJCEP) to make energy-efficient upgrades to your HVAC system (terms and conditions apply). Go to www.savegreenproject or call 877-455-NJNG (6564) for more details. *NJCEP rebates and incentives are independent of NJNG and not subject to NJNG supervision or control. See www.njcleanenergy.com for details.

For Office Use Only

Approved. Applicant's income meets eligibility guidelines Date: _____

Declined. Applicant's income does not meet eligibility guidelines* Date: _____

Signature _____