This form indicates the eligibility of an existing manufactured home resident to benefit from the Existing Manufactured Homes program no-cost services. Completed forms should be sent to: [manufacturedta@energytrust.org](mailto:manufacturedta@energytrust.org) for verification of eligibility for services. A Prequalification Form signed by an authorized Residential program representative indicates that a specific property has or has not been previously serviced by the Residential program. This does not take into account other eligibility requirements. See program requirements for details. Sections in grey to be filled out by Residential program staff only.

**Trade Ally Information**

|  |  |
| --- | --- |
| Company Name | Email Address |
| Authorized Company Representative/Technician | Phone |
| Date |

**Site Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Park Name**  **(if applicable)** |  | | | **Residential Program Use** | |
|  |  | | | **Unit Qualifies** | |
| **Customer Name** | **Address with Unit #** | **City** | **ZIP** | **Yes** | **No** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Approved by Authorized Existing Homes Representative** | | | | **Date** | |