New York Property Insurance Underwriting Association 100 William Street, New York, New York 10038 • Telephone: (212) 208-9700 • Outside NYC: (800) 522-3372 • FAX: (212) 208-9861										9861	
Electrical Grant Program Application											
Applicant Information											
Applicant Name(s):								Date	e:		
Last Mailing Address:				First			M.I.				
Street Address							Apartment/Unit #				
City Daytime					Evening	1	State		ZIP Code		
Phone:	(()			Phone: NO	()			E-mail:		
Are you currently employed?				YES VES			ual Salary before Taxes: \$				
Are you retired?				YES		Social Securit	y: \$ Pension: \$				
Do you have rental income?						Rental Income: \$					
Do you have other sources of income? Disability, Worker's Comp, etc.				YES	NO	Amount: \$ Source:					
Property Information											
Property Location:											
Street Address							City				
If different fr	om ma	iling address, e	xplain:			-					
Number of Apts:		🔲 1 Family	2 F	amily	3 Family	4 Family	Other:				
Is the property your primary residence?				YE	S NO	Are mortgage payments up to date?					
Is the property unoccupied any time during YES NO Is property for sale?											
Are property tax payments up to date?											
					Policy Inf	ormation				•	
Please pro	vide yo	our policy num	ber, if kn	own:							
Are there a	dditiona	al owners not n	amed ab	oveoro	on the policy?	Give their name	es and addre	esses:			
Name:						Address:					
Name:						Address:					
Name:						Address:					
						·	·				
				Sign	form and com	plete reverse s	ide.				
I (we) certify to the truth of my (our) statements above. I (we) authorize NYPIUA to verify the											

information contained in this application and to report its transactions to me (us).

Grant Request:

List the electrical repairs or improvements you plan to make with the grant funding. <u>Remember only</u> <u>electrical work will be considered.</u>

Comments:

Mail this application to:NYPIUA100 William Street, 11th FloorNew York, New York 10038Attention: Grant Program