

The BFF (E2F2) non-profit organization with support from members of the Municipal Collaboration\_ and jurisdictions in the Southern and Central District of Maryland are providing weatherization upgrades, funded by a MEA grant, at no cost to the home owner if qualified, that will save you money on monthly utility bills and make your home more energy efficient.

Website: <https://www.edge-gogreen.com/grants/>

Please contact Lt. (Ret) James (Jim) Flynn 240-417-9098 (cell), Fax# 240-786-4186, or Alison Miller 301-908-4079 to verify.

All homeowners must meet income criteria and be willing to provide documentation of income.

Page 1 and Page 2 of Federal Income Tax Return form 1040

Number of People Living in House	Owner(s) Only Annual Income Must Be Less than	Number of People Living in House	Owner(s) Only Annual Income Must Be Less than
1 →	\$69,800.00	2 →	\$79,750.00
3 →	\$89,700.00	4 →	\$99,600.00
5 →	\$107,600.00	6 →	\$115,600.00
7 →	\$123,600.00	8 →	\$131,600.00

The following make the home ineligible for this opportunity: False Income Statements or; Aggressive dogs not being safely handled; Drug use on premises; Threats to auditor; structurally inadequate; rental property; and/or other safety or issues prohibited by grant special conditions.

In addition to the above, the following could (after inspection) also make the home ineligible: Nub and Tub wiring (means you can't install attic insulation); Mold problem; water problem such as a hole in the roof or standing water in the basement; home sealed too tight resulting in the inability of fumes to escape through natural ventilation; major roof issues; major plumbing issues; or a Gas leak.

Veterans and/or Retired Homeowners will be given preference.

See accompanying Income Affidavit and Agreement, complete and then: Fax, email or Mail to: Attn: Lt. (Ret.) James (Jim) Flynn, BFF-E2F2 located 6852 Distribution Drive, Beltsville, MD 20705, 240-786-4186 (fax); email: [JF258@aol.com](mailto:JF258@aol.com) or Alison Miller: [stg\\_am@msn.com](mailto:stg_am@msn.com)



**EmPOWER CLEAN ENERGY Communities Grant Program**

**Blockchain Frontiers Foundation Municipal Collaboration for L/M Income Energy Efficiency Upgrades**

**Maryland Energy Administration Grant No.: 2020- 01 and 02 -331S1**

**Website: <https://www.edge-gogreen.com/grants/>**

**Affidavit of Income**

Applicant’s Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Work: \_\_\_\_\_ email: \_\_\_\_\_

\_\_\_\_ I am a Veteran \_\_\_\_ I am a Senior Citizen

Number of People Living in House	Owner(s) Only Annual Income Less than:		Number of People Living in House	Owner(s) Only Annual Income Less than:
1	\$69,800.00		2	\$79,750.00
3	\$89,700.00		4	\$99,600.00
5	\$107,600.00		6	\$115,600.00

**I certify that there are [ ] persons living in the house** and my/our annual gross income is LESS THAN the stated maximum allowable income identified above in the “Income Table.” Supported by the following document which is attached: \_\_\_\_\_ ( *initial* )

I understand that this information is subject to verification by the State of Maryland.

2018 or 2019 Federal Form 1040 Income Tax Return (***Page 1 and Page 2 only***)

**or**

Social Security Annual Benefit Stub or proof of income (*if you’re not required to file*)

**Utility and Energy Supplier Information**

Gas Utility: \_\_\_\_\_ Account #: \_\_\_\_\_

Electric Utility: \_\_\_\_\_ Account #: \_\_\_\_\_

Other Fuel Supplier: \_\_\_\_\_  Oil  Propane / Account #: \_\_\_\_\_

**Please complete and return the affidavit with your TAX Forms (income verification) to: Lt. (Ret.) James (Jim) Flynn, BFF-E2F2 located 6852 Distribution Drive, Beltsville, MD 20705, 240-786-4186 (fax); email: [JF258@aol.com](mailto:JF258@aol.com) or Alison Miller at email: [stg\\_am@msn.com](mailto:stg_am@msn.com) , for appropriate processing.**

*I understand COVID-19 is contagious and I am comfortable with the contractors performing services while utilizing safety PPE equipment for our safety. I solemnly declare, under oath, and subject to the penalties of perjury, declare that the above information is true and correct to the best of my knowledge, information and belief.*

\_\_\_\_\_  
Signature of Affiant                      Date

\_\_\_\_\_  
Person Receiving Affidavit              Date

