## Residential HVAC Trade Ally Information Update



## Trade Ally Information Update/Change Request

Please complete all fields below. Check box to indicate information that has changed.

□ Legal Company Name:		☐ Tax ID Number:	
☐ Company Name (as you would like it displayed in the online directory or on award materials, as applicable):			
□ HVACR Licensee Name:			
☐ HVACR License Number:	☐ Endorsements:	Endorsements:	
☐ Street Address:		☐ Apt/Ste:	
□ City:	☐ State:	□ ZIP:	
☐ Phone:	☐ Fax:	I	
☐ Email (primary program contact):	☐ Website:		
☐ Email (Trade Ally announcements only):			
This form is to be used exclusively for updating and changing information for existing Trade Ally contractors. If you would like to participate in the Residential Heating, Cooling and Water Heating rebate program, please contact us at <b>consumershvac@icf.com</b>			
Company Representative			
Name (please print):			
Title:			
Signature:			
Date:			

Please fax or email this completed form to:

Fax: **517-768-6320** 

Email: consumershvac@icf.com

