



## Residential New Construction Alternate Incentive Payee

<b>Rating Company</b>						
Business Name:		Contact Name:				
<b>Construction Site (Unit) Information</b>						
Development Name:						
Street Address & Unit:						
City:		<b>NJ</b>	ZIP:			
<b>Builder</b>						
Business Name:					Contact Name:	
Address:						
City:		State:		ZIP:		
Phone:			E-mail:			
<b>Incentive Payee (if other than Builder)</b>						
Incentive Payee:					Tax ID:	
Address:						
City:		State:		ZIP:		
Phone:			E-mail:			

I understand the Builder is the default payee of the Customer Incentive and I am requesting that the payment for the abovementioned project be re-assigned to the Alternate Payee listed in the "Incentive Payee (if other than Builder)" table. I also certify that I am authorized to request this reassignment of the Customer Incentive.

Printed Name, Title:		Date:	
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**Builder:** Please provide signature below.

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