



COMMUNITY SOLAR SUBSCRIBER FORM

SUBSCRIBER INFORMATION

First Name _____

Last Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

UTILITY BILLING INFORMATION

Account Number _____

Utility Company _____

Name on account _____

Service Street Address _____

City/State/Zip _____

My home address is the same as the property address on my utility bill

PLEASE EMAIL UTILITY BILL TO: INFO@ISLANDCOMMUNITYSOLAR.COM

[For more information on Long Island Community Solar]

We take privacy and security seriously. Check out our [Privacy Policy](#) for more details. By submitting this form, you understand and agree that someone from Bliss Solar may contact you using the email and phone number provided.

