

ATTACHMENT B

NEW YORK ENERGY \$SMART<sup>SM</sup> COMMERCIAL LIGHTING PROGRAM
PROJECT INSTALLATION AND DESIGN INCENTIVE APPLICATION FORM

Section 1. Applicant Information
Business Partner ID#
Business Partner Type: Contractor ESCO Distributor Designer Other (Manufacturer or Rep)
Business Name Contact Name
Applicant Address Phone
City State Zip Fax
Federal Tax ID# E-mail

Section 2. Co-Applicant Information
Business Name of Co-Applicant #1 Contact Name
Co-Applicant #1 Federal Tax ID# Business Partner ID#
Business Name of Co-Applicant #2 Contact Name
Co-Applicant #2 Federal Tax ID# Business Partner ID#

Section 3. Project Site Information
Building/Project Name Contact Name
Project Address Contact Phone Fax
City State Zip Estimated Square Footage of Project
Electric utility Provider:
Rochester Gas & Electric New York State Electric & Gas Corp. Con Edison (Eligible for Bonus)
National Grid Central Hudson Gas & Electric Corp. Orange and Rockland Utilities
Will other NYSERDA Program Incentives be applied for under this project? Yes No
If yes, which Program? PON#

Section 4. Mailing Information (if different from above)
Business Name Contact Name
Address Phone
City State Zip Fax

Section 5. Which of The Following Best Describes This Lighting Project?
Remodel/renovation in an existing building New equipment for new occupancy (3)
New equipment for expanding operation (2) Unexpected fixture replacement (4)
How long since the last lighting upgrade? years How long has occupant been in this space? years
Age of Building years

Section 6. Incentive(s) Requested
Project Installation Incentive
Design Incentive (Business Partner Designers Only)
Bonus for projects in Con Edison Territory
Break the Ice Incentive (Contractors Only)

Section 7. Required Supporting Documentation Checklist
Project Information Worksheets or other authorized documentation of criteria compliance
Fixture/Equipment specification sheets Equipment Invoices (not required for Design Phase I)

Section 8. Certification Statement: I certify that all information provided in this application, including all items required by Section 7, is true and complete. It is understood that the terms and Conditions included in the Business Partner Participation Agreement apply to this application. I further certify that I have met all of the requirements applicable to the requested incentive.
Applicant Signature Date
Co-applicant #1 Signature (if applicable) Date
Co-applicant #2 Signature (if applicable) Date