

Final Incentive Payment Form - PON 1098 (wind)
35% of Approved Incentive Amount
Attachment F

Name of Eligible Installer _____ NYSERDA Installer Number _____

Installation Address: _____

NYSERDA Customer Number (Provided upon Approval of Incentive Application Form) _____

Installation Date: _____ Interconnection Date: _____

Total Approved Incentive Amount \$ _____

Final Incentive Payment Requested (35% of Total Approved Incentive) \$ _____

This form must be completed (including attachments) to receive the final 35% of the approved incentive value for this customer's PV system. Attach proof of system interconnection from utility provided or date of completed NYSERDA inspection.

Checklist: (This form will be returned if the following are not included)

- Proof of Interconnection
- Proof of approval by all authorities having jurisdiction

Certification Statement- Review and sign for NYSERDA's review.

I certify that all information provided in this form, including all attachments, are true and correct to the best of my knowledge. I certify that installation of the wind system did not commence until NYSERDA approves the incentive application. I certify that I was responsible for the installation of the wind system and that the wind system was installed in compliance with all program requirements, terms, and conditions. I certify that at least one of the Eligible Installer(s) indicated on the Incentive Application (Attachment C) was present for pouring of foundation and for assembly and erection of wind generator system.

Installer Signature _____ Date _____

All installation and interconnection responsibilities have been completed by the installer as agreed to in the Customer Purchase Agreement.

Customer Signature _____ Date _____

All forms and Attachments should be sent to:

New York State Energy Research and Development Authority
ALS- PON 1098: Wind
17 Columbia Circle
Albany, NY 12203-6399

FAXED OR E-MAILED FORMS WILL NOT BE ACCEPTED.

For Internal Use Only

Date Received by NYSERDA _____

Completed Form and All Required Attachments _____ Yes ___ No

Approved _____ Date _____

Denied _____ Date _____