

CONSERVE & \$AVE

COMMERCIAL CUSTOM ELECTRIC REBATE APPLICATION

For projects including, but not limited to, compressed air systems, refrigeration systems, and energy management systems.

RETROFIT NEW CONSTRUCTION *Be sure to include all invoices showing equipment costs with this application!*

1. CUSTOMER INFORMATION (please print)

Business Name	Type of Business ()		
Contact Name	Daytime Phone Number		
Website (optional)	E-mail Address (optional)		
Mailing Address	City	State	Zip Code
Installation address (if different from mailing address)	City	State	Zip Code
Account Number	Tax ID or SSN (Required if non-residential installation)		

Apply rebate to our account. Send us a rebate check.

How did you hear about **CONSERVE & SAVE**? Radio TV Vendor/Retailer Contractor Utility Newsletter
 Newspaper Ad Other _____

I certify that all statements made in the application (including any associated worksheets) are correct to the best of my knowledge. I have read and agree to the Terms and Conditions on the back of this application booklet. I understand that if any equipment in conjunction with this application is ordered, purchased, or installed before approval from The Utility is received, the proposed project may not qualify for a rebate.

Customer's Signature _____ Date _____

2. PROFESSIONAL ENGINEER INFORMATION (please print)

Company's Name	Registration Number ()		
Engineer's Name	Daytime Phone Number		
Address	City	State	Zip Code



I certify that I am a professional engineer licensed in the state in which the aforementioned facility is located. I represent to the Company that I have reviewed the measures and calculations proposed in this application and all associated worksheets. They are, in my professional opinion, appropriate for the type and purpose of the facility in which they will be installed. The information contained in this application and associated worksheets is true, accurate, and complete to the best of my knowledge.

Engineer's Signature _____ Date _____

**PROFESSIONAL
ENGINEER STAMP:**

OFFICE USE ONLY	Date Received _____	Pre-Inspected? <input type="checkbox"/> YES <input type="checkbox"/> NO	Date _____	Initials _____	TOTAL REBATE AMOUNT \$
	TRIAD ID _____	Post-Inspected? <input type="checkbox"/> YES <input type="checkbox"/> NO	Date _____	Initials _____	

TEAMING UP

TO SAVE
YOU MONEY!

3. COMMERCIAL CUSTOM ELECTRIC REBATE PROGRAM APPLICATION WORKSHEET (please print)

This worksheet is designed to summarize the proposed custom measure including equipment, costs, savings, and calculate the potential rebate. The data contained, or attached, with this application must be sufficient to verify the demand and energy reductions described and must include; all assumptions, equipment, hours of use, consideration of measure interaction – if appropriate, consideration of equipment loading, description of models used (e.g. DOE-2, TRACE, ASEAM, BLAST, etc.), complete description of equipment involved, and the intended operating strategy. Attach additional materials as necessary. **Note: Measures with less than a 5 year useful life or measures eligible for existing prescriptive rebate programs are ineligible for a custom electric rebate.**

SECTION 1: PROJECT DESCRIPTION

Describe briefly the specific equipment or improvement being proposed (If a cost/benefit analysis was performed, please include it with this application.):

SECTION 2: CUSTOM MEASURE TOTAL COST

EXISTING EQUIPMENT DESCRIPTION	Measure Life <i>(see Table 1)</i>	Equipment Cost	Labor Cost	Total Cost
1.		\$	\$	\$
2.		\$	\$	\$
3.		\$	\$	\$
4.		\$	\$	\$
5.		\$	\$	\$

NEW EQUIPMENT DESCRIPTION	Measure Life <i>(see Table 1)</i>	Equipment Cost	Labor Cost	Total Cost
1.		\$	\$	\$
2.		\$	\$	\$
3.		\$	\$	\$
4.		\$	\$	\$
5.		\$	\$	\$

**CUSTOM MEASURE
TOTAL COST**

\$

TABLE 1 – MEASURE LIFE (If proposed measure is not listed, provide estimate of useful life and document your source.)	
Measure Description	Measure Life
Building Shell	20 years
Compressed Air	20 years
Downsizing Motors	15 years
Drives on HVAC Systems	15 years
Drives on non-HVAC Systems	10 years
EMS & HVAC Controls	10 years
HVAC Equipment or Systems	20 years
Industrial Refrigeration	20 years
Lighting Control – Dimming	20 years
Process Cooling	15 years
Process Equipment or Systems	15 years
Refrigeration	15 years

SECTION 3: ANNUAL DEMAND & ENERGY SAVINGS

Please summarize the operational characteristics of the equipment associated with the proposed measure. All assumptions made in completing this section must be described. Attach additional materials as necessary.

Month	Operating Characteristics Before Planned Measure		Operating Characteristics After Planned Measure		Monthly kW Savings	Monthly kWh Savings
	A (kW)	B (kWh)	C (kW)	D (kWh)	E (A - C)	F (B - D)
January						
February						
March						
April						
May						
SYSTEM PEAK PERIOD	June					
	July					
	August					
	September					
October						
November						
December						
TOTAL ANNUAL DEMAND & ENERGY SAVINGS:						

SECTION 4: ANNUAL BILL SAVINGS

To determine the annual bill savings associated with the measure, taking the monthly demand and energy savings from columns E & F in SECTION 3 and apply your demand and energy charge to estimate monthly bill savings. Monthly demand and energy rates should be available on your bill. Rates in certain classes may vary by season. If you have difficulty in identifying your demand and energy rates, please contact your local utility.

Month	A Monthly kW Savings <i>(Column E from SECTION 3)</i>	B Monthly Demand Rate (\$/kW)	C Monthly Demand Savings (A x B)	D Monthly kWh Savings <i>(Column F from SECTION 3)</i>	E Monthly Energy Rate (\$/kWh)	F Monthly Energy Savings (D x E)	G Monthly Bill Savings (C + F)
January		\$	\$		\$	\$	\$
February		\$	\$		\$	\$	\$
March		\$	\$		\$	\$	\$
April		\$	\$		\$	\$	\$
May		\$	\$		\$	\$	\$
June		\$	\$		\$	\$	\$
July		\$	\$		\$	\$	\$
August		\$	\$		\$	\$	\$
September		\$	\$		\$	\$	\$
October		\$	\$		\$	\$	\$
November		\$	\$		\$	\$	\$
December		\$	\$		\$	\$	\$
TOTAL ANNUAL BILL SAVINGS:							\$

SECTION 5: REBATE CALCULATION

The potential rebate is the lesser of the two following calculations: **Method 1)** Determine the payback of the measure by dividing the CUSTOM MEASURE TOTAL COST (Section 2) by the TOTAL ANNUAL BILL SAVINGS (Section 4). Then multiply the CUSTOM MEASURE TOTAL COST by the PAYBACK REBATE PERCENT from the table below. **Method 2)** Multiply the highest kW reduction from the SYSTEM PEAK PERIOD (Section 3, column E) by \$240/kW. Enter the lesser of the two calculations in the box.

Method 1:

$$\frac{\$ \text{ [] }}{\text{CUSTOM MEASURE TOTAL COST (FROM SECTION 2)}} \div \frac{\$ \text{ [] }}{\text{TOTAL ANNUAL BILL SAVINGS (FROM SECTION 4)}} = \text{PAYBACK []}$$

$$\text{CUSTOM MEASURE TOTAL COST (FROM SECTION 2)} \times \text{PAYBACK REBATE PERCENT (Table 2)} = \text{POTENTIAL REBATE (Method 1) []}$$

Method 2:

$$\text{[] HIGHEST kW REDUCTION FROM SYSTEM PEAK PERIOD (JUNE - SEPT) (SECTION 3, COLUMN E)} \times \text{\$240 /kW REBATE} = \text{POTENTIAL REBATE (Method 2) []}$$

TABLE 2

Payback	Rebate Percent
0 - 1.9 Years	5.0%
2 - 2.9 Years	15.0%
3 - 5.9 Years	25.0%
6 Years and Up	N/A

REQUESTED REBATE: \$ []

LESSER OF POTENTIAL REBATE AMOUNTS (Method 1 vs. Method 2)

4. TERMS AND CONDITIONS

1. ELIGIBILITY

All projects must be pre-approved to qualify for a rebate. Rebates are available to non-residential electric customers of Austin Utilities, Owatonna Public Utilities, and Rochester Public Utilities (herein referred to as The Utility). All products must be new and in use in facilities in The Utility service territory.

2. APPLICATION

Program is offered January 1 through December 31 of the respective calendar year. **Due to limited funding, this rebate offer can be changed or withdrawn at any time without notice and is available on a first-come, first-serve basis.** All sections of the rebate application must be read, filled out completely, and signed and stamped by a professional engineer or application will be returned. Data contained in the application, worksheet, or attached materials must be sufficient to verify the costs and the demand and energy savings described in the applications. Additionally, manufacturer's kW per ton certification data is required to be submitted with invoices.

3. INSPECTION AND VERIFICATION

Equipment installations are subject to inspection by The Utility personnel prior to qualifying for rebate. The Utility reserves the right to inspect the pre- and post-installation condition of the customer's facility. The Utility also reserves the right to perform pre- and post-installation monitoring of the installed measure in order to determine actual kW reduction and kWh energy savings.

4. INSTALLATION AND REBATE AMOUNTS

Installations must be completed within three (3) months of application approval (see #2). In no case will the rebate paid by The Utility exceed the purchase price of the equipment. The minimum rebate application is \$5.00. The maximum rebate amount is \$5,000 per commercial (up to 999 kW) customer location per year and \$10,000 per industrial (1,000 kW and above) customer location per year. The Utility can, at its sole discretion, increase rebate amounts.

5. INVOICE AND PAYMENT

Following inspection and verification (see #3) and completed installation, the customer must notify The Utility and submit original invoices specifying the quantity and price of all materials purchased, the date ordered, installation costs, and applicable taxes. After satisfactory review of the application and invoices, a rebate check or bill credit will be issued to the customer. Please allow 6-10 weeks from the date of post-inspection for delivery of rebate check or bill credit.

6. EQUIPMENT ELIGIBILITY REQUIREMENTS

To be eligible for a rebate, all equipment to be purchased as part of the custom measure shall include documentation as to the type, make, model, and efficiency. This may require documentation of nameplate data and/or applicable test data.

7. TAX INFORMATION

The Utility will not be responsible for any tax liability imposed as a result of the rebate payment(s). Customers are advised to consult their tax advisors for details. Customers must submit the appropriate Tax ID or Social Security Number on the application form.

8. DISCLAIMER

The Utility does not guarantee that the implementation of energy-efficient measures or use of the equipment purchased or installed pursuant to this program will result in energy or cost savings. The Utility makes no warranties, expressed or implied, with respect to any equipment purchased or installed including, but not limited to, any warrant of merchantability or fitness for purpose. In no event shall The Utility be liable for any incidental or consequential damages. Customers are solely responsible for the proper disposal of existing equipment. Consult the Minnesota Pollution Control Agency (MPCA) office for details at (612) 297-8363.

9. ENDORSEMENT

The Utility does not endorse any particular vendor, manufacturer, product, or system in promoting this rebate program. Listing a vendor or product does not constitute an endorsement, nor does it imply that unlisted vendors or products are deficient or defective in any way.

10. PRIVACY

Information contained in this rebate application may be shared with the Minnesota Department of Commerce and our co-op partners.

RETURN COMPLETED APPLICATION AND REQUIRED DOCUMENTATION TO YOUR UTILITY PROVIDER:

Austin Utilities
400 - 4th Street NE
Austin, MN 55912
(507) 433-8886
(507) 433-5045 fax
www.austinutilities.com

Owatonna Public Utilities
P.O. Box 800
Owatonna, MN 55060
(507) 451-2480
(507) 451-4940 fax
www.owatonnautilities.com

Rochester Public Utilities
4000 East River Road NE
Rochester, MN 55906-2813
(507) 280-1500
(507) 280-1542 fax
www.rpu.org

