

Program deadline is March 31, 2012. Focus incentives are subject to change. Please visit focusonenergy.com/incentives/business to ensure you are using the most current form. **Questions:** Call 800.762.7077

SECTION 1: CUSTOMER LEGAL INFORMATION

Company Legal Name:		Tax Identification Number (Complete ONE only, must be 9 digits): FEIN #: _____ - _____ - _____ OR SSN: _____ - _____ - _____		
Legal Mailing Address:		City:	State:	Zip Code:
Business Classification of Customer (Check ONE only. Required for all businesses, including non-profits): <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship-Individual <input type="checkbox"/> LLC <input type="checkbox"/> Other _____				Owner Name (Corporations excluded)

SECTION 2: PAYMENT INFORMATION

Make Incentive Check Payable to: <input type="checkbox"/> Company <input type="checkbox"/> Business Owner's Legal Name (Only if Sole Proprietor)				
Mail Check to: <input type="checkbox"/> Company Legal Address <input type="checkbox"/> Job Site Address <input type="checkbox"/> Alternate Address (complete below):			Attention To:	
Alternate Pay Address:		City:	State:	Zip Code:

SECTION 3: JOB SITE INFORMATION (where retrocommissioning will occur)

Job Site Name:		Project Contact Name:	
Job Site Street Address (physical location):		Project Contact E-mail:	
City:	State: WI	Zip Code:	Project Contact Telephone:
Electric Provider at Job Site:		Electric Provider Primary Acct #:	
Natural Gas Provider at Job Site:		Natural Gas Provider Primary Acct #:	
Describe Building Use (example: Food processing plant):			

SECTION 4: FACILITY INFORMATION

Annual kWh Usage:	Annual Therm Usage:
Peak kW and Month in which it occurs:	Average Percent Occupancy of Conditioned Area:
Year of Construction:	Number of Floors:
Total Floor Area (ft ²):	Total Conditioned Area (ft ²):
Age of Energy Management System (EMS):	Is system capable of trending and storing multiple points?
List components controlled by Direct Digital Control (DDC):	Components controlled, not just actuated by pneumatics:

What HVAC systems does the facility have? (Check all that apply):

Cooling Systems

Chiller, Air Cooled Chiller, Water Cooled Water Source Heat Pump Condenser Other: _____

Heating Systems

Boiler, Hot Water Boiler, Steam Rooftop Furnace Electric Baseboard Other: _____

Ventilation and Distribution

Central AHU VAV with Reheat Dual Duct Economizers Other: _____

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SECTION 5: INCENTIVE INFORMATION

- The Focus on Energy Retrocommissioning Program is available to qualifying commercial, industrial, schools and government facilities. The goal of this program is to help you identify opportunities to improve the efficiency of major HVAC systems and reduce energy costs without adversely affecting facility or system operations.
- The Retrocommissioning Program may also offer cash incentives to buy-down implementation costs for identified and accepted measures that exceed a 1.5-year simple payback.
- For complete guidelines on participant and service provider requirements please see the program documentation at focusonenergy.com/rcx.

Please confirm that you meet the following minimum eligibility requirements before submitting an application to participate in the program:

- Do you spend at least \$400,000 annually on electricity and/or natural gas from a Wisconsin energy provider which participates in the Focus on Energy program?
 YES
- Do you have an existing building automation system or Building Automation System (BAS) with Direct Digital Control (DDC)?
 YES
- Is the facility free of major problems or planned major system renovations or retrofits?
 YES
- Are you willing to commit funding to meet the implementation requirement as defined in the 2010 RCx Participant Manual?
 YES
- Are you able to meet the implementation requirement within one year of project kick-off?
 YES
- Are you willing to dedicate at least 40 hours of O&M staff support to assist with the RCx process?
 YES

If you answered yes to the questions above please complete the application and submit to Focus on Energy for consideration. In reviewing your application, Focus on Energy will be looking for cost effective retrocommissioning opportunities at your facility. Focus on Energy's decision regarding selection of program applicants into the program will be final and binding for all parties.

SECTION 6: CUSTOMER SIGNATURE (Please Read & Sign)

I have read and understand the obligations of program participants, including the commitment to implement energy efficiency measures and agree to make a good faith effort to comply with all requirements if selected for participation in the program. To the best of my knowledge, the statements made on this application are correct, and I have submitted the appropriate supporting documentation to receive an incentive.

Customer Signature:

Customer Name (Print):

Date:

SECTION 7: APPLICATION SUBMITTAL

Select the building type that represents where equipment was installed or service was performed (check **ONE** only). Send or fax form to corresponding address or e-mail BPforms@focusonenergy.com.

Industrial (manufacturing, food processing, paper mill, etc.)
Focus on Energy Incentives
5609 Medical Circle, Suite 201
Madison WI 53719
Fax: 608.277.2947

Commercial (retail office, bar/restaurant, lodging, healthcare, vehicle/repair, etc.)
Focus on Energy Incentives
10535 N Port Washington Rd., Suite 201
Mequon WI 53092
Fax: 262.240.0825

Schools & Government (public/private schools, government buildings, municipalities, etc.)
Focus on Energy Incentives
2923 Marketplace Drive, Suite 108
Fitchburg WI 53719-5320
Fax: 608.467.1417

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SECTION 1: TRADE ALLY INFORMATION

Company Name:	Telephone:		
Facility Address:	City:	State:	Zip Code:
RCx Services Provided in House:	RCx Services Subcontracted:		

SECTION 2: RETROCOMMISSIONING TEAM LEAD

Project Team Lead Name:	Title & Certifications:
Project Team Lead Telephone:	Project Team Lead E-mail:

Please list references for previous RCx projects performed by team lead

Contact Name:	Contact Title:
Contact Name:	Contact Title:
Contact Name:	Contact Title:
Contact Name:	Contact Title:

SECTION 3: ADDITIONAL RESOURCES (Please provide the names of supporting team members)

Energy Engineering and Analysis:	Title & Certifications:
Lead Technician:	Title & Certifications:
Other:	Title & Certifications:
Other:	Title & Certifications:

Please select samples of work included: Current Facility Requirements Testing Plan Bin Data Based Calculation
 Systems Manual TOC Training Plan Trend Analysis

SECTION 4: TRADE ALLY ACCEPTANCE OF APPLICATION TERMS

By signing below, I certify that:

- I have read and understand the requirements of the RCx program as identified in the Service Provider Manual.
- I have the resources and training available to meet the program requirements and deliver RCx services.

Trade Ally Signature:	Trade Ally Name (Print):	Date:
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SECTION 5: APPLICATION SUBMITTAL

Select the building type that represents where equipment was installed or service was performed (check **ONE** only). Send or fax form to corresponding address or e-mail BPforms@focusonenergy.com.

<input type="checkbox"/> Industrial (manufacturing, food processing, paper mill, etc.) Focus on Energy Incentives 5609 Medical Circle, Suite 201 Madison WI 53719 Fax: 608.277.2947	<input type="checkbox"/> Commercial (retail office, bar/restaurant, lodging, healthcare, vehicle/repair, etc.) Focus on Energy Incentives 10535 N Port Washington Rd., Suite 201 Mequon WI 53092 Fax: 262.240.0825	<input type="checkbox"/> Schools & Government (public/private schools, government buildings, municipalities, etc.) Focus on Energy Incentives 2923 Marketplace Drive, Suite 108 Fitchburg WI 53719-5320 Fax: 608.467.1417
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