

# PROPANE AND ELECTRIC INCENTIVE APPLICATION

FOR PROJECTS COMPLETED BY 12/31/2021

Complete all sections. Incomplete applications cannot be processed and will delay payment of incentives. Applications must be submitted **within 60 days** of project installation no later than January 31, 2022 or before funding is exhausted, whichever occurs first. For an electronic copy of this form, visit [focusonenergy.com/propane](http://focusonenergy.com/propane).

1

## ACCOUNT AND CUSTOMER INFORMATION

**TAX IDENTIFICATION NUMBER** (Check one. If you use a Social Security number as your tax identification number, leave blank. You will be contacted by a program representative via email to provide a copy of your W-9. You must list an email address in Section 3.)

FEIN **or**  SSN \_\_\_\_\_  
FEIN

### BUSINESS CLASSIFICATION OF CUSTOMER

(Check one. Required for all businesses, including non-profits.)

- Sole Proprietorship  Individual  Single-Member LLC  
 C Corporation  S Corporation  Partnership  
 Limited Liability Company - C Corp  Limited Liability Company - S Corp  
 Limited Liability Company - Partnership  Other \_\_\_\_\_

OWNER NAME (REQUIRED IF SSN IS USED AS TAX IDENTIFICATION NUMBER)

COMPANY NAME

LEGAL ADDRESS (AS SHOWN ON COMPANY W-9)

CITY STATE ZIP

WHO DID YOU WORK WITH FROM FOCUS ON ENERGY ON THIS PROJECT? (CONTACT NAME)

How did you hear about us? (Check one.)

- Community Association/Agency  Distributor/Supplier  
 Focus Direct Mail/Postcard  Focus Email  Focus Event  
 Focus Staff/Energy Advisor  Focus Website  Internet Search  
 Manufacturer  National Rebate Administrator  Newspaper  
 Past Participation  Radio  Social Media  Trade Ally/Contractor  
 Trade Show/Fair  TV  Utility Bill Insert/Direct Mail  Utility Contact  
 Utility Email  Utility Website  Word of Mouth - Referral  
 Other: \_\_\_\_\_

2

## JOB SITE INFORMATION

(Refer to your utility bills for account numbers below.)

JOB SITE BUSINESS NAME

TYPE OF FUEL DISPLACED (EXAMPLE - PROPANE, DIESEL, ELECTRICITY)

PROPANE SUPPLIER AT JOB SITE

- Job Site Address is same as Legal Address  
 Job Site Address is different (complete below.)

JOB SITE ADDRESS

CITY STATE ZIP

ELECTRIC UTILITY/GAS UTILITY ACCOUNT #

3

## CUSTOMER CONTACT INFORMATION

JOB SITE CUSTOMER CONTACT NAME

PRIMARY PHONE # E-MAIL ADDRESS

I opt in to receive program updates via text message.

Preferred method of contact:  Call  E-mail  Text

If Focus on Energy has a question about this application, we should contact:

Customer  Trade Ally  Other \_\_\_\_\_

4

## TRADE ALLY INFORMATION



TRADE ALLY CONTACT NAME

PRIMARY PHONE # E-MAIL ADDRESS

TRADE ALLY COMPANY NAME

ADDRESS

CITY STATE ZIP

5

## BUSINESS PAYMENT INFORMATION

Make incentive check payable to:

Customer  Trade Ally (complete item A)  Other Payee (complete item B)  
Payee is responsible for any associated tax consequences.

Mail check to:  Customer Address  Job Site Address

Trade Ally Address  Alternate Address or Other Payee (complete below)

COMPANY NAME

ADDRESS

CITY STATE ZIP

ATTENTION TO (OPTIONAL)

### A. For Trade Ally Payee

To receive payment, a Trade Ally must be registered with a current W-9 on file. Provide the Trade Ally's Tax Identification Number. If you use a Social Security number as the company tax ID, do not provide it here.

FEIN

### B. For Other Payee

1. Individual Contact Information:

NAME EMAIL ADDRESS

2. Specify relationship to utility account holder (this is required if check is payable to someone other than the Customer or Trade Ally):  
 Tenant  Building Owner  Other (specify) \_\_\_\_\_

3. Select your business classification. (Check one. Required for all businesses, including non-profits.)

- Sole Proprietorship  Individual  Single-Member LLC  C Corporation  
 S Corporation  Partnership  LLC - C Corp  LLC - S Corp  
 LLC - Partnership  Other \_\_\_\_\_

4. A representative of Focus on Energy will reach out to you via email with a method to securely provide a copy of your W-9. This is required to receive payment. Provide the email address (if different than the one provided above):

4



**focus on energy**®

Partnering with Wisconsin utilities

6

**BUSINESS PROPERTY TYPE**

Select one only. If applying for both existing and new construction equipment incentives complete two separate applications.

- Equipment Upgrades & Retrofits
- New Construction & Major Renovations

Select one (1) property type that best describes your business:

- Dairy – Traditional
- Dairy – Robotics
- Livestock
- Greenhouses
- Crop Farming
- Other:



If Dairy, how many milking cows do you have? (including dry cows, excludes heifers not yet fresh)

7

**INCENTIVE PRODUCT INFORMATION**

Refer to:

- **Applicable incentive catalog at focusonenergy.com/catalogs** for incentive codes, incentive per unit and product eligibility requirements.
- **focusonenergy.com/business/qpls** for qualified products lists.
- **Your invoice** for Manufacturer and Model Number.
- **Incentive Product Information Sheet at focusonenergy.com/catalogs** if additional lines are needed.

INCENTIVE CODE	MANUFACTURER NAME	MODEL #	UNIT MEASURE	# OF UNITS (A)	INCENTIVE PER UNIT (B)	REQUESTED INCENTIVE (A X B)
L3111 (example)	STARK LIGHTING	LED5VZP	Fixture	10	\$ 15.00	\$ 150.00
					\$	\$
					\$	\$
					\$	\$
					\$	\$
					\$	\$
					\$	\$
					\$	\$
					\$	\$
					\$	\$
					\$	\$
					\$	\$
<b>Manufacturer Specifications Attached</b> (if applicable):		Yes <input type="radio"/>	<b>RESERVATION CODE(S)</b> (if applicable):		Subtotal from Incentive Product Information Sheet (if applicable)	
<b>Itemized Invoice(s) Attached:</b>		Yes <input type="radio"/>	<b>PROJECT COMPLETION DATE:</b> / /		<b>INCENTIVE TOTAL*</b>	

8

**CUSTOMER SIGNATURE**

I, the undersigned Customer, agree the stated energy-efficiency measure(s) was (were) installed at the job site address listed above as part of the Focus on Energy Program. I have read and agreed to the provisions set forth herein and to the Terms and Conditions posted at focusonenergy.com/terms. I understand Focus on Energy may revise these Terms and Conditions at any time, and I will not be notified in the event changes are made. To the best of my knowledge, the statements made on this application are complete, true and correct, and I have submitted the appropriate supporting documentation to receive an incentive.

If the Customer is identified as the Payee in Section 5, the following certifications are required for this form to substitute for the Internal Revenue Service (IRS) form W-9. Under penalty of perjury, I certify that:

- The number shown on this form is the correct taxpayer identification number.
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.
- I am a U.S. person.

**The IRS does not require my consent to any provision of this document other than the certifications required to avoid backup withholding.**



CUSTOMER SIGNATURE \_\_\_\_\_ NAME (PRINT) \_\_\_\_\_ DATE \_\_\_\_\_



**Submit applications and supporting documentation to:**

**MAIL:** Focus on Energy  
725 W. Park Avenue  
Chippewa Falls, WI 54729

**E-MAIL:** business@focusonenergy.com

\*Incentive may be adjusted based on project caps. See measure requirements and Terms and Conditions for more information.