

# Commercial & Industrial Energy Efficiency Retrofits - Non-Lighting Application (Oregon)



For Idaho Power Use Only	
ID#:	Rate:
Rec'd:	CR:

## Customer Information

Customer Name		Pre-Approval		Payment	
Project/Facility Name		(Provide one) Account # or Meter #:			
Building Type (Required)		Medical (non-hospital)		Retail (non-food)	
College/University	Hotel/Motel	Multifamily (>4 units)	Recreational Facilities – 24 hours	School Elementary	School Secondary
Convenience Store	Industrial – Large	Office Building	Recreational Facilities – Non 24 hours	Shopping Mall – Enclosed	Warehouse
Grocery	Industrial – Mid (2 shifts)	Other	Religious Worship		
Hospital	Manufacturing (1 shift)		Restaurant		
Project Site Address		City		State	Zip
Customer Mailing Address (If different)		City		State	Zip
Contact Name		Title			
Phone	Fax	E-mail (Required)			

## Project Description (Required: provide a brief description of what is existing and what the retrofit entails)

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## Supplier or Contractor Information

Company Name		License Number			
Mailing Address		City		State	Zip
Contact Name		Title			
Phone	Fax	E-mail (Required)			

## Other (Example: General Contractor, Engineering Firm, ESCO, etc.)

Company Name		Contact Name			
Phone	Fax	E-mail (required to send application updates and approval notices)			

## Project Information

For Pre-Approval (Estimated):	Project Start Date	Project Completion Date	Project Cost \$	Incentive* \$
For Payment (Actual):	Project Start Date	Project Completion Date	Project Cost \$	Incentive* \$

## Incentive Payment

I, Customer, designate the Idaho Power incentive check for this project be issued to:		Customer	Contractor	Other: _____
Incentive Recipient's Legal Name		Mailing Address		
Official Tax Name (Associated with TIN/SSN)		Federal Tax ID Number (TIN or SSN)		

## Customer Agreement

I, the undersigned, declare that I am a duly authorized representative of the owner of the building described above. I further acknowledge that I have read and agree to comply with the Commercial and Industrial Energy Efficiency Program Terms and Conditions set forth at <http://www.idahopower.com/EnergyEfficiency/Business/termsConditions.cfm>, and the Program requirements set forth at <http://www.idahopower.com/pdfs/EnergyEfficiency/business/PoliciesProcedures.pdf>. I certify that the information provided in this application is true and accurate and that Idaho Power may verify such information at its sole discretion. \*Incentive payment will not exceed 100% of the installed cost.

Customer Name (please print)	Customer Signature	Date

Email this application, worksheet, and other required documentation to: [Retrofit@idahopower.com](mailto:Retrofit@idahopower.com) or fax to 208-433-2817