



# Customer Solutions

## Commercial Program Application

### SECTION 1 CUSTOMER INFORMATION

Business Name (as it appears on your EWEB account)										
Installation Address					City		State	OR	Zip	
Name of Authorized Contact Person						Title				
Phone Number				Email Address (for EWEB use only)						
Mailing Address					City		State		Zip	
Tax Status associated with EWEB account (check one)	<input type="checkbox"/> Individual/Sole Proprietor		<input type="checkbox"/> C Corporation		<input type="checkbox"/> S Corporation		<input type="checkbox"/> Partnership			
	<input type="checkbox"/> Trust/Estate		<input type="checkbox"/> LLC		<input type="checkbox"/> Exempt Payee		<input type="checkbox"/> Other			
Tax ID Number associated with EWEB account								<input type="checkbox"/> Employer Identification Number		<input type="checkbox"/> Social Security Number

### SECTION 2 LOCATION & PROGRAM INFORMATION

Please tell us which programs you are applying for		<input type="checkbox"/> Lighting <input type="checkbox"/> HVAC Systems <input type="checkbox"/> Food Services <input type="checkbox"/> Refrigeration <input type="checkbox"/> Other								
Building Use Type (for example: office, retail, automotive, church, etc.)										
Weekly Hours of Operation	Su	M	T	W	Th	F	Sa	Does this location have a natural gas meter? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Heating Systems (check all that may apply)			<input type="checkbox"/> Electric Zonal (i.e., baseboard, wall)			<input type="checkbox"/> Heat Pump		<input type="checkbox"/> None		
			<input type="checkbox"/> Electric Furnace			<input type="checkbox"/> Gas Furnace		<input type="checkbox"/> Other		
Cooling Systems (check all that may apply)			<input type="checkbox"/> Central A/C		<input type="checkbox"/> Room A/C		<input type="checkbox"/> Heat Pump		<input type="checkbox"/> Other <input type="checkbox"/> None	

### SECTION 3 REBATE PRODUCT INFORMATION – OPTIONAL

Not for lighting or custom projects.

Enter the EWEB code number (if applicable), manufacturer name, model number, number of units, rebate per unit, and rebate total in the table below. Please read the product specifications carefully before proceeding with your purchase.

EWEB CODE#	MANUFACTURER	MODEL #	# OF UNITS	REBATE PER UNIT	REBATE TOTAL

## TERMS AND CONDITIONS

1. For the purposes of this application "install", "installation", or similar phrases mean complete installation such that the product(s) are fully functional and operational.
2. Rebates over \$2,500 require pre-approval by EWEB before installation. Rebate caps may apply. Project cost is the purchase price combined with the cost of installation, not including in-house labor costs.
3. Program offerings and rebate amounts may change at any time, and rebates are based on offerings and rebate amounts applicable at the time of submission. Products that are resold, rebuilt, rented, received from warranty or insurance claims, exchanges, or won as a prize do not qualify for a rebate. This program may be modified or terminated by EWEB at any time without notice.
4. I understand that installed qualifying product(s) will meet energy-efficiency eligibility requirements.
5. Rebates may be taxable. EWEB is not responsible for any taxes, the payment of those taxes, or their applicability that may be imposed on you or your business as a result of receipt of this rebate. EWEB will report rebates in accordance with IRS 1099 reporting requirements.
6. I understand that this signed Application, all appropriate proof(s) of purchase and all other required program-specific documents must be sent to EWEB in order for the rebate to be considered. Incomplete or inaccurate applications will not be approved and may be returned to the submitter for additional information. A rebate check for qualifying product(s) is typically mailed 4-6 weeks after EWEB verifies the installation.
7. I authorize, if requested by a representative of EWEB or any authorized third party, reasonable access to my property to verify the installation of the product(s) before a rebate is paid. I understand that the rebate will not be paid if I refuse to participate in any required verification. I agree to allow EWEB to contact the qualifying product vendor and/or product installer, if needed, to verify purchase and/or installation and to provide my name and/or address to complete this verification.
8. As a qualified Eugene Water & Electric Board (EWEB) customer, I certify that purchased energy-saving products will be installed in my business facility according to the program specifications. This rebate in no way implies any ownership or the acceptance of any liability by EWEB for the products or equipment or makes any implied warranty of the products, their installation, or the desired results. I understand that I am responsible for any necessary permits that may apply to the installation of these products and the proper disposal of any and all removed materials and equipment.
9. If a tenant/lessee, I understand I am responsible for obtaining the property owner's permission to install the product/equipment for which I am applying for a rebate payment. My signature on this Application indicates that I have obtained this permission and/or am authorized to conduct business with EWEB regarding this installation.
10. I certify any documents attached to this Rebate Application are authentic proof of purchase by me or my authorized business representative(s) for the referenced installation herein. I also certify that the information on this Application and any attached documentation is true and accurate. I understand that the rebate payment will be sent to the payee listed in Section 1.

## AUTHORIZATION

I have read and agree to the terms and conditions above.

<b>SIGN HERE</b>		<b>Date</b>	
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Please sign and mail to: EWEB Customer Solutions, PO Box 10148, Eugene, Oregon, 97440 or fax to 541-685-7303

### For Office Use Only

<input type="checkbox"/> <b>Attachment A</b>	<input type="checkbox"/> <b>Attachment B</b>	<input type="checkbox"/> <b>Attachment C</b>
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# Connected Thermostat- Initial Install

## Project Information Form

For Commercial, Industrial, and Agricultural Applications



Instructions: Complete this form and submit it to the serving electric utility. Incentives are only available for retrofits; new construction projects are not eligible.

### BUSINESS AND SITE INFORMATION

Customer Name				
Installation Address (Street, City, State, Zip)				
Customer Phone Number				
Building Type (Please check one)	<input type="checkbox"/> Office	<input type="checkbox"/> Retail	<input type="checkbox"/> Grocery	<input type="checkbox"/> Lodging
	<input type="checkbox"/> Warehouse	<input type="checkbox"/> Food Service	<input type="checkbox"/> Hospital	<input type="checkbox"/> School
	<input type="checkbox"/> Residential Care	<input type="checkbox"/> Assembly	<input type="checkbox"/> Other (describe):	
Heating System Type (Please check one)	<input type="checkbox"/> Electric			
	<input type="checkbox"/> Gas			

### INITIAL INSTALL INFORMATION

For additional equipment, use an additional form.

Project Information	
Thermostat Manufacturer	
Thermostat Model	
Quantity of Thermostats	
Location(s) of Thermostat	
Installed cost (per attached invoice)	
Order/purchase date (per attached invoice)	

1. The installed Connected Thermostat must be on the BPA Qualified Products List (<https://www.tradeallynetworknw.com/program-offerings/hvac/connected-thermostats/>)
2. The connected thermostat must be confirmed to be programmed as follows:
  - a. Thermostat is connected to the internet
  - b. Simultaneous heating and cooling is eliminated in cases where two or more systems serve spaces that are not separated by physical barriers (i.e., "invisible zones").
  - c. Temperature setback is used for unoccupied hours (heating and/or cooling, as applicable).
  - d. Fan schedule uses 'auto' mode for unoccupied hours (e.g. during unoccupied hours, holidays, or fan only runs when there is a heating or cooling call).
  - e. Override duration set to three hour or less.
  - f. For heat pumps, auxiliary resistance heat lock-out is enabled with appropriate temperature set-point.
3. The installation contractor invoice showing order/purchase date and installed cost must be submitted with this form.

Additional terms, conditions, and requirements may apply.

Effective date: October 1, 2019

### INSTALLER SIGNATURE

Signature	
Name	
Company	
Date	

By signing this form, I confirm that the above information is correct to the best of my knowledge.