

# WASHINGTON COMMERCIAL INDUSTRIAL REBATE APPLICATION

## CUSTOMER INFORMATION

|  |      |   |   |
|--|------|---|---|
| Company name                                   |      | Project number                                  |   |
| Contact name                                   |      | Title   |   |
| Mailing Address                                |      |   |   |
| Telephone                                      | Cell | Website   |   |
| Email  |      |   |   |
| How did you hear about the CNG rebate program? |      | CNG EE Dept <input type="checkbox"/>            | Installer/Contractor <input type="checkbox"/> |
| CNG Website <input type="checkbox"/>           |      | Equipment Manufacturer <input type="checkbox"/> | Community Event <input type="checkbox"/>      |
| Trade Association <input type="checkbox"/>     |      | Newspaper <input type="checkbox"/>              | Electric Utility <input type="checkbox"/>     |
| Electric Utility <input type="checkbox"/>      |      | Bill Insert <input type="checkbox"/>            |   |

## PROJECT/FACILITY INFORMATION

|  |   |
|--|---|
| PLEASE ANSWER THESE QUESTIONS - REQUIRED FOR ELIGIBILITY | Gas use type: Heat <input type="checkbox"/> Water <input type="checkbox"/> Other _____  |
|  | Is the site heated by an electric heat pump with natural gas backup? Yes <input type="checkbox"/> No <input type="checkbox"/> |
|  | If yes, this is considered a dual fuel system and does not qualify for CNG rebates.   |

|                               |               |                    |  |
|-------------------------------|---------------|--------------------|--|
| Square footage                | # of Floors   | Electric Utility   |  |
| Cascade Natural Gas account # | Rate Schedule | 504, 505, 511, 570 |  |
| Project name                  | County        |                    |  |
| Site address                  |               |                    |  |

## BUILDING USE TYPE

Education  Lodging  Restaurant  Warehouse  Grocery  Retail  Agriculture  Healthcare  Office   
 Manufacturing  Other \_\_\_\_\_

## HOURS OF OPERATION

| Mon | Tue | Wed | Thur | Fri | Sat | Sun | Weekly Hours | Total Annual Hours |
|-----|-----|-----|------|-----|-----|-----|--------------|--------------------|
|     |     |     |      |     |     |     |              |                    |

## SELECT YOUR REBATE

**EQUIPMENT TYPE EXAMPLES: Furnace, Heater, Boiler, Boiler Vent Damper, Boiler Steam Trap<sup>1</sup>, Domestic Hot Water<sup>4</sup>, Ozone Laundry<sup>4</sup>, Motion Control Faucet<sup>4</sup>, Oven, Griddle, Steamer, Fryer, Dishwasher<sup>4</sup> and Recirculation Controls<sup>4</sup>**

| Equipment Type                    | Model | Serial # | Size | New, Retrofit Replacment? | Installation Date | Rebate | Quantity | Total Rebate Amount             |
|-----------------------------------|-------|----------|------|---------------------------|-------------------|--------|----------|---------------------------------|
|                                   |       |          |      |                           |                   |        |          |                                 |
|                                   |       |          |      |                           |                   |        |          |                                 |
|                                   |       |          |      |                           |                   |        |          |                                 |
| Existing equipment being replaced |       |          |      | Model #                   |                   |        |          | Existing Estimated Efficiency % |

| DEMAND CONTROL VENTILATION <sup>2</sup> |                        |         |     |                         |                                    |                      |                     |
|---|------------------------|---------|-----|-------------------------|------------------------------------|----------------------|---------------------|
| HVAC Unit Number                        | HVAC Unit Manufacturer | Model # | Age | Cooling Capacity (Tons) | DCV Unit/Controller (Make/Model #) | Rebate @\$20 per ton | Total Rebate Amount |
|   |                        |         |     |                         |                                    |                      |                     |
|   |                        |         |     |                         |                                    |                      |                     |

| INSULATION <sup>3</sup> - Insulation Types are Batts/Roll, Foam, Rigid, Loose Fill, Piping |                          |                       |                   |                         |             |              |                        |   |                    |
|--|--------------------------|-----------------------|-------------------|-------------------------|-------------|--------------|------------------------|---|--------------------|
| Type   | Area                     | Roof Type             | Installation Date | CNG Rebate (\$/sq. ft.) | Pre-R Value | Post-R Value | Square Footage of Area | Total Rebate Amount (\$/sq. ft. x Square Footage) | Total Project Cost |
| Batts/roll, foam, rigid, loose fill, piping  | Wall, Attic, Roof, Pipes | Pitched, Flat or Both |                   |                         |             |              |                        |   |                    |
|  |                          |                       |                   |                         |             |              |                        |   |                    |
|  |                          |                       |                   |                         |             |              |                        |   |                    |

| WINDOWS- Pre-Existing must be single pane; Post must be ENERGY STAR <sup>®</sup> Northern Zone, U Factor ≤ 0.27 |              |                         |                        |   |
|---|--------------|-------------------------|------------------------|---|
| Type  | Install Date | CNG Rebate (\$/sq. ft.) | Square Footage of Area | Total Rebate Amount (\$/sq. ft. x Square Footage) |
|   |              |                         |                        |   |

- Insulation projects in spaces with existing, functional insulation do not qualify
- The building/ space insulated must be heated with natural gas provided by CNG
- If existing insulation is damaged to the point of ineffectiveness or applied in spotty coverage, the insulation must be removed and the condition that led to the ineffectiveness/damage must be corrected before a rebate will be considered
- Insulation R value must meet specifications of current CNGC tariff

#### GENERAL QUALIFICATIONS

- New or existing commercial or industrial customer of Cascade Natural Gas on one of the following rate schedules: **504, 505, 511, 570**
- High efficiency equipment, i.e. heating, water heating & cooking equipment installed as a replacement, retrofit or new, in place of standard efficiency
- Custom incentives are available, contact program representative if the equipment being installed is not on the prescriptive incentive list attached
- ♦ **Rebates effective for installs on or after February 19, 2019**
- ♦ **Each Piece of equipment may only receive one incentive**
- Rebates are subject to change and are only applicable for tariff-approved measures in place at the time of installation
- Installation must comply with all federal, state and local code requirements
- Call **866-450-0005** or visit **www.cngc.com/energy-efficiency/commercial** or Email **conserve@cngc.com** to review qualifications and eligibility

- 1 - Regular steam trap maintenance and replacement every seven (7) years is required, retrofit only
- 2 - For Existing Packaged HVAC with Gas Fired Furnace and Direct Expansion Cooling Sections DCV; Controller must meet Joint Utility Advanced Rooftop Control Guidelines
- 3 - Minimum value of Post R-11 applies only where existing walls have an internal insulation cavity
- 4 - Eligibility contingent upon use of natural gas-fired domestic water serving the specific measure equipment or fixture

#### APPLICATION REQUIREMENTS CHECKLIST

W-9  Invoice with model number and cost  Equipment Specifications  Signed Application

#### ACCEPTANCE OF TERMS AND CONDITIONS

By signing below, Participant agrees to the terms and conditions available at: [www.cngc.com/energy-efficiency/commercial](http://www.cngc.com/energy-efficiency/commercial). Participant represents to CNGC that all energy-saving measures have been completed satisfactorily and Participant meets the eligibility requirements shown under the "general qualifications" section. CNGC and/or its representatives may request access to the property on which energy-saving measures have been completed and/or installed in order to do quality control inspections. Customer understands that CNGC and/or its representatives may review and evaluate the project during and after completion. Participants agree to provide access to the property for the purpose described above.

**Sign Here**

|  |  |
|--|--|
| <b>Participant Signature</b>   | <b>Date</b>  |
| Mail: CNGC c/o TRC Companies<br>1180 Nw Maple Street Suite 310<br>Issaquah, WA 98027 | Questions? Phone: 866-450-0005<br>Fax: 877-671-2998<br>Email: <a href="mailto:conserve@cngc.com">conserve@cngc.com</a> |