INCENTIVE APPLICATION

FOR PROJECTS COMPLETED BY 12/31/2022

Complete all sections. Incomplete applications cannot be processed and will delay payment of incentives. Applications must be submitted within 60 days of completed project installation, no later than January 31, 2023. For additional copies of this form, visit focusonenergy.com/catalogs.



ACCOUNT AND CUSTOMER INFORMATION

Tour Islam Alfina Allam Normalian (Objective and	O FEIN	0 001
Tax Identification Number (Check one)	O FFIN	or (2.55)

If you use a Social Security Number (SSN) as your Tax Identification
Number, do not provide it below. You will be contacted by the Program
via email to provide a copy of your W-9 using a secure online portal, it
it is not already on file. You must list an email address in Section 3.

F	ΕI	IN

BUSINESS CLASSIFICATION OF CUSTOMER

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

- O Sole Proprietorship O Individual O Single-Member LLC
- O C Corporation O S Corporation O Partnership
- O Limited Liability Company C Corp
- O Limited Liability Company S Corp
- O Limited Liability Company Partnership

Other			

COMPANY NAME

LEGAL ADDRESS (AS SHOWN ON COMPANY W-9)

STATE

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

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

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



JOB SITE INFORMATION

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

JOB SITE BUSINESS NAME

ELECTRIC UTILITY AT JOB SITE ELECTRIC ACCOUNT #

GAS UTILITY AT JOB SITE

GAS ACCOUNT #

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

JOB SITE ADDRESS

CITY STATE ZIP



CUSTOMER CONTACT INFORMATION

SECTIONS	OSSISIER SONIASI IN SAMATON				
	JOB SITE CUSTOMER CONTACT NAME				
	PRIMARY PHONE # E-MAIL ADDRESS				
	O I opt in to receive program updates via text message.				
	Preferred method of contact: O Call O E-mail O Text If Focus on Energy has a question about this application, we should contact:				
	O Customer O Trade Ally O Other				
section4	TRADE ALLY INFORMATION TRADE				
	TRADE ALLY CONTACT NAME				
	PRIMARY PHONE # E-MAIL ADDRESS				
	TRADE ALLY COMPANY NAME				
	ADDRESS				
	CITY STATE ZIP				
section5	BUSINESS PAYMENT INFORMATION				
S25.15.1.3	Make incentive check payable to:				
	O Customer O Trade Ally (complete item A) O Other Payee (complete item B)				
	Payee is responsible for any associated tax consequences. Mail check to: O Customer Address O Job Site Address O Trade Ally Address O Alternate Address or Other Payee (complete below)				
	COMPANY NAME				
	ADDRESS				
	CITY STATE ZIP				
	ATTENTION TO (ODTIONAL)				
	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): O Tenant O Building Owner O Other (specify) 				
	3. Select your business classification. (Check one. Required for all businesses, including non-profits.)				
	O Sole Proprietorship O Individual O Single-Member LLC O C Corporation O S Corporation O Partnership O LLC - C Corp O LLC - S Corp O LLC - Partnership				
	O 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):				



BUSINESS PROPERTY TYPE

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

O Equipment Upgrades & Retrofits O New Construction & Major Renovations

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

O Agriculture Producer O Dairy - Traditional	O If Dairy, how	GovernmentGrocery/Convenience	O Manufacturing (product):	O Restaurant O Retail	
O Dairy - Robotic	many milking	Store	O Multifamily	O Vehicles Sales/Service	
O Other:	cows do you have (includes	O Health Services	O Office	O Water/Wastewater	
O Education	dry cows;	O Hotels & Lodging	O Religious & Spiritual	O Other:	
O Financial Institution	excludes heifers	O Information, Technical &	Organization		
Timanolar maticulon	not yet fresh)?:	Scientific Services	With K+ Daily Education		
			O No K+ Daily Education		



INCENTIVE PRODUCT INFORMATION

Refer to:

- · Applicable incentive catalog at focusonenergy.com/catalogs for incentive codes, incentive per unit and product eligibility requirements.
- focusonenergy.com/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 N	IAME	MODEL #	UNIT MEASURE	# OF UNITS (A)	INCENTIVE PER UNIT (B)	REQUESTED INCENTIVE (A X B)
(Example) L3111	STARK LIGHTING		LED5VZP	Fixture	10	\$ 15.00	\$ 150.00
						\$	\$
						\$	\$
						\$	\$
						\$	\$
						\$	\$
						\$	\$
						\$	\$
						\$	\$
Manufacturer Specifications Attached (if applicable): Yes		Yes O				Incentive Product heet (if applicable)	\$
Itemize	ed Invoice(s) Attached:	Yes O	PROJECT COMPLETION DATE:	/ /	/ INCENTIVE TOTAL*		\$



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.

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