

2020 Commercial Custom Program

Colorado: Commercial Natural Gas Customers

Email applications & itemized invoices to:
custom@mesapointenergy.com

Pre-approval Checklist

Get your rebate check faster by checking off these easy steps before mailing your application form. Incomplete applications may be delayed. **All Custom projects require pre-approval before purchase and installation.**

- Completely fill out application (mandatory)**
- Provide in-depth description of existing conditions and proposed project
- Provide manufacturer's equipment cut sheets
- Provide project energy savings calculations (if available)
- Provide project cost detail (if available)
- Make and retain copies for your records
- Send all documents to correct address listed on application (sending application to billing address will delay your rebate)

Rebate Checklist

- Start your project after receiving your pre-approval letter
- Complete project installation
- Post-Installation Verification: A sales receipt (itemized invoice for equipment and labor) or other documentation indicating date of installation, dealer/ contractor name, equipment manufacturer name, and model number must accompany the rebate application.
- Make and retain copies of all documents

Terms and Conditions

General Eligibility

1. Rebates are awarded to help Black Hills Energy commercial/industrial customers implement natural gas efficiency measures.
2. **Purchase and installations must be completed between Jan. 1, 2020 and Dec. 31, 2020. Applications for work done in 2019 must be received by Jan. 31, 2021.**
3. **All Custom projects require pre-approval before purchase and installation.**
4. The commercial/industrial Custom Rebate Program buys down energy-efficient upgrades to a two-year payback, or up to one-half of the incremental cost of the equipment, whichever is less. There is a \$6 per MCF-saved cap.
5. All projects will be individually reviewed by Black Hills Energy for cost effectiveness and must pass the cost effectiveness test.
6. Funding for these rebates is limited. Applications will be processed on a first-come, first-served basis. Additional information or assistance in completing your rebate applications can be obtained by calling 303-661-0159.
7. Rebates may be subject to federal and/or state income tax reporting. Applicant is responsible for contacting a qualified tax advisor to determine tax liability. Black Hills Energy is not responsible for any tax consequences of the rebate program.

Disclaimer

Black Hills Energy does not guarantee that installation of equipment qualifying for rebates will result in reduced energy usage or demand, or in cost savings. The Customer will hold harmless Black Hills Energy and its officers, directors, shareholders, agents, employees, and representatives from all claims, liabilities, fines, interest, costs, expenses, and damages incurred by the Customer, for any damage, injury, death, loss or destruction of any kind to persons or property, to the extent the damage, injury, death, loss or destruction arises out of or is related to the conduct, negligence, willful misconduct, misrepresentation, breach of warranty or other breach of this rebate form on the part of Black Hills Energy.

Account Information

Account Number

(Located in upper right-hand corner of Black Hills Energy natural gas bill)

--	--	--	--	--	--	--	--	--	--

Please check if you are a:

Owner Lessee Developer Other _____

Business Name _____
(Please print)

Contact Person _____

Title _____

Telephone _____

Evening _____ Best time to call _____

Email _____

Address _____

City _____ State _____ ZIP _____

Facility Information

(If different than account information or location)

Company Name _____
(Please print)

Contact Person _____

Title _____

Telephone _____

Evening _____ Best time to call _____

Address _____

City _____ State _____ ZIP _____

Where did you learn about our rebates?

- Bill insert Billboard Door Hanger Email Event
 Facebook Flyer Newspaper Article Print Ad
 Radio TV Twitter Website Youtube

Other (please specify) _____

Referral by: Evaluator Contractor/Dealer/Installer

Friend/Family Other (please specify) _____

Facility information (Mandatory)

(To be completed by dealer/contractor/installer)

Complete new equipment information on back.

Type of Facility: New Existing Addition

Year Built _____ Square Footage Own Rent

Building Type:

- Office Retail Health Care Restaurant Education
 Lodging Grocery Warehouse Other _____

Equipment Type: New Replacement

Space Heating Type:

- Forced Air Furnace Approximate age of old unit _____
 Boiler Approximate age of old unit _____
 Electric Heat/Other Approximate age of old unit _____

Central Air: Yes No Approximate age of old unit _____

Water Heating Fuel: Natural Gas Electric Other
Approximate age of old unit _____

Customer Agreement

I certify that I have read and agree to the Terms and Conditions of the rebate program.

Customer Signature _____

Date _____

Email completed application and itemized invoices to:

custom@mesapointenergy.com

ADDITIONAL INFORMATION

Additional information or assistance in completing your application can be obtained by calling **303-661-0159** or by visiting **Energy-Ready.com**.

BRIEF DESCRIPTION OF PROJECT

Existing & New Equipment Information

Please list all **NEW** equipment on this form so Black Hills Energy can calculate your rebate. Make a separate entry for each unit. If more than one measure is being applied for, please photocopy this form and attach with your application.

	Existing or Industry Standard To be completed by dealer/contractor	New Equipment To be completed by installer
Equipment Type <input type="checkbox"/> Forced Air Furnace <input type="checkbox"/> Boiler <input type="checkbox"/> Water Heating <input type="checkbox"/> Other _____		
Manufacturer		
Model #		
Serial #		
Age of Equipment		
Efficiency (AFUE, CAE, TE, EF, etc.)		
MBTUH		
Gallons		
R-value or U-value		
Quantity		
Annual Operating Hours/Estimated Equipment Life (yrs.)		
Installation Date		
	Cost Breakout	Cost Breakout
Equipment Cost		
Engineering Cost		
Installation Cost		
Other (please explain)		
Total Cost		
Estimated Savings		

Customer Signature:

(typing in name below is the same as signing)

I confirm intent to proceed with installation of measures outlined in this application within 6 months from the date of submittal, and prior to December 31st of this calendar year.

Signature _____

Date _____

Installer/ Contractor Information

Name _____
(Please print)

Installer's name _____

Dealer address _____

City _____ State _____ ZIP _____

Telephone _____

Email _____

Signature _____

Incentive Request Form/ Certificate of Completion

To be filled in by customer once project is completed and submitted with final invoice(s).

Customer and Facility Information:

Customer Organization Name _____
(Please print)

Customer Organization Address _____

Customer Contact Name _____

Customer Contact Name _____

City _____ State _____ ZIP _____

Contact Telephone _____

Contact Email _____

Signature _____

Date _____

Customer Signature:

(typing in name below is the same as signing)

I confirm intent to proceed with installation of measures outlined in this application within 6 months from the date of submittal, and prior to December 31st of this calendar year.

Signature _____

Date _____

Installer/ Contractor Information

Name _____
(Please print)

Installer's name _____

Dealer address _____

City _____ State _____ ZIP _____

Telephone _____

Email _____

Signature _____

Incentive Request Form/ Certificate of Completion

To be filled in by customer once project is completed and submitted with final invoice(s).

Customer and Facility Information

Customer Organization Name: _____

Customer Organization Address: _____

Customer Contact Name: _____

Contact Email: _____

Contact Telephone Number: _____

Facility Address: _____

Black Hills Energy Account Number(s): _____

Customer Signature:

I certify that the indicated equipment was installed per the Terms and Conditions of this program at the address shown. All Terms and Conditions of the program have been met. I certify that all equipment information provided in the application is correct. Black Hills Energy reserves the right to inspect and verify any equipment before or after issuing rebates.

Signature: _____ **Date:** _____

(typing in name below is the same as signing)

Post-Installation Verification: A sales receipt (itemized invoices for equipment and labor) or other documentation indicating date of installation, dealer/ contractor name, equipment manufacturer name, and model number must accompany this Incentive Request Form. Black Hills Energy reserves the right to verify installation of equipment.

INTERNAL USE ONLY:
Project Name:
Description:
Annual Savings (therms):
Incentive (\$):