2024 COMMERCIAL CUSTOM PROGRAM

COLORADO: COMMERCIAL NATURAL GAS CUSTOMERS

Pre-approval Checklist

All Custom projects require pre-approval before purchase and installation.

Get your rebate check faster by checking off these easy steps before mailing your application form. Incomplete applications may be delayed

- □ Completely fill out application to avoid delays.
- Provide description of existing conditions and proposed project
- Provide manufacturer's equipment brochure or spec sheets
- Provide project documentation (bids, const. drawings, etc.)
- □ Provide project cost detail (if available)
- $\hfill\square$ Make and retain copies for your records
- Send all documents to <u>custom@mesapointenergy</u>.
 <u>com</u> (sending application to BHE billing address will delay your rebate)

Rebate Checklist

- □ Start your project after receiving notice of approval
- □ Complete project installation
- Post-Intallation 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 numer must accompany the Incentive Request Form/Certificate of Completion to be submitted once project is completed.
- Make and retain copies of all documents for your records

NEED HELP?

Mesa Point Energy is the Program Administrator of Black Hills Energy's Custom Program Additional information or assistance in completing your application can be obtained by calling **303-661-0159** or via email at **custom@mesapointenergy.com**

Terms and Conditions

General Eligibility

- 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, 2024 and Dec. 31, 2024. Applications for work done in 2024 must be received by Jan. 31, 2025.
- 3. All Custom projects require 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. There is a \$50,000 per project 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.
- 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(s) - (Located in upper right-hand corner of Black Hills Energy natural gas bill)

Please check if y	/ou are a:			
Owner DLe	essee 🗖 De	veloper 🛛	Other _	
Business Name_	(Please print)			
Contact Person				
Title				
Telephone				
Email				
Address				
City				

Incentive Instructions

Where incentive check should be sent, if different from Account Billing Information. May require Third Party Responsibility Form.

Business Name	(Please print)		
Contact Person	(
Title			
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) _____

Customer Signature

(typing in name below is the same as signing)

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

Print Name_____

Date _____

Facility information (Where equipment is being installed, if different from Account Information)
Company Name
(Please print) Contact Person
Title
Telephone
Email
Address
City State ZIP
Type of Facility:
□ New □ Existing □ Addition
Year BuiltSquare 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 □ Boiler □ Electric Heat
Approximate age of old unit
Central Air: 🗆 Yes 🗆 No
Water Heating Fuel:
□ Natural Gas □ Electric □ Other
Approximate age of old unit

Where to submit your application:

For instruction on how to submit your application, email - **custom@mesapointenergy.com**

ADDITIONAL INFORMATION

Additional information or assistance in completing your application can be obtained by calling **303-661-0159** or by visiting <u>Energy-Ready.com</u>. **Equipment Type:** \Box New \Box Replacement Provide brief description of the project:

Existing & New Equipment Information

HVAC Equipment (e.g. - boiler, furnace, energy recovery system, demand control ventilation)

	Existing Equipment	New Equipment (High Efficiency) When possible, please provide product spec sheets
Equipment Type		
Manufacturer		
Model #		
Age of Equipment		
Efficiency (%)		
Nameplate Capacity (kBtu/h)		
Quantity		
Equipment Cost (\$)		
Installation Cost (\$)		
Boiler Controls (Example: outside temp. reset)	Describe existing controls:	Describe new controls:

Domestic Hot Water			
	Existing Equipment	New Equipment (High Efficiency)	
Equipment Type			
Manufacturer			
Model #			
Age of Equipment			
Efficiency (%)			
Nameplate Capacity (kBtu/h)			
Storage Tank Size (gal) Or Tankless			
Quantity			
Equipment Cost (\$)			
Installation Cost (\$)			
Number served by DWH	Schools: # of Students Foo	d Services: # of meals per day	
	Lodging: # of beds and # of rooms		
	Healthcare: # of beds Lau	ndry: # of washes/day	
	Office or Other: # of Occupants		

Envelope Upgrade (Insulation, Windows, Garage Doors, Air Sealing)			
Envelope Upgrade 1 (description of existing and new)			
Existing Insulation R-Value			
Retrofit Insulation R-Value			
Total Square feet of Roof or Wall			
Envelope Upgrade 2 (description)			
Existing Insulation R-Value			
Retrofit Insulation R-Value			
Total Square feet of Roof or Wall			
Envelope Upgrade 3 (description)			
Existing Insulation R-Value			
Retrofit Insulation R-Value			
Total Square feet of Roof or Wall			
Total materials Cost (\$)			
Total labor (and directs) Cost (\$)			

Other (Examples: Low flow faucets, showerheads, pre-rinse spray valves, smart thermostats, room energy management system, EnergyStar kitchen equipment, etc.)			
	Existing Equipment	New Equipment (High Efficiency)	
Equipment Type			
Manufacturer			
Model #			
Age of Equipment			
Efficiency (%)			
Flow Rate (GPM)			
Nameplate Capacity (kBtu/h)			
Quantity			
Equipment Cost (\$)			
Installation Cost (\$)			

List of Attachments (Bid document, construction drawings, equipment spec. sheets, etc.)

Installer/Contractor Information

Business Name		
Contact name	(Please print)	
Address		
City	State	ZIP
Telephone		
Email		