



Application # AEC10-XXX

Commercial, Industrial & Agricultural
Agricultural Ventilation Custom Energy Grant
2010 Rebate Application

Agralite Electric Co-op, 320 E. Hwy 12, Benson, MN 56215-0228 (320) 843-4150

Business Name: _____

Mailing Address: _____ **Phone** _____

City _____ **State** _____ **Zip** _____

Installation Address: _____
(if different from above)

Account Number: _____

Contact Name: _____ **Phone** _____

Email Address: _____

VENDOR INFORMATION

Vendor Name: _____

Mailing Address: _____

City, State, ZIP: _____

Vendor Contact Name: _____ **Phone:** _____

The undersigned does hereby certify that 1) The undersigned, and not Agralite Electric Co-op, is solely responsible for the accuracy of the information contained in this application, 2) all rules of the program have been followed, and 3) the installation is complete. Further, the undersigned acknowledges that nothing contained in the application shall impose any liability on Agralite Electric Co-op for the work performed and information presented by the customer's engineer, contractor, or vendor.

Warranty Information

Rebate qualifications do not imply any representation or warranty of such equipment, design, or installation by Agralite Electric Co-op. Agralite Electric Co-op shall not be responsible or liable for any personal injury or property damage caused by this equipment. Agralite Electric Co-op does not guarantee that a specific level of energy or cost savings will result from the implementation of energy conservation measures or the use of products funded under this program. In no event shall Agralite Electric Co-op be liable for any incidental or consequential damages.

Other Important Program Rules

1. Installation must be complete before funds will be issued for the rebate.
2. Customers and vendors must submit itemized equipment invoices along with rebate applications, and worksheet to Agralite Electric Co-op. To ensure that the equipment installed meets Agralite Electric Co-op performance standards, these invoices must itemize labor charges, quantity and price of the equipment installed, and information regarding the manufacturer and model numbers for all equipment included in the rebate.
3. Agralite Electric Co-op reserves the right to conduct random inspections of installations.
4. The customer is responsible for checking with Agralite Electric Co-op to determine whether funding is available and to verify program parameters.
5. Rebate must comply with all program specific rules and qualifications (see complete list of rebate specific rules).
6. Qualifying customers must apply for Year 2010 rebates no later than November 30, 2010.
7. Pre-approval from Agralite Electric Co-op is required.

Customer Signature: _____ **Date:** _____



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Custom Energy Efficiency Grant Guidelines

1. This program is applicable to the commercial / industrial and agricultural customers of Agralite Electric Co-op.
2. Customers and vendors must submit itemized equipment invoices along with grant applications and worksheet. To ensure that the equipment installed meets Agralite Electric Co-op performance standards, the invoices must include: itemized labor charges, quantity, equipment price, model numbers, and manufacturer for all equipment included in the grant.
3. Customers must apply for 2010 Custom Energy Grant no later than November 30, 2010.
4. The installation must be complete before funds will be issued for the grant.
5. Agralite Electric Co-op reserves the right to conduct random inspections of installations.
6. The customer is responsible for checking with Agralite Electric Co-op to determine whether funding is available and to verify program parameters.
7. The maximum rebate amount shall be the lesser of 50% of the project cost or \$100,000.



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Business Name: _____ 0 _____

Existing System Description (E)

Describe the existing system in terms of demand and energy requirements, efficiency, operating hours and the number of units being replaced. This data may be supplied in terms of production. Include supporting documentation and specifications as attachments as required.

# fans	cfm/fan	cfm/W	Hrs/year	% of hours	
				at full load	kWh/yr
0	0	0.00	0	0%	-
0	0	0.00	0	0%	-
0	0	0.00	0	0%	-
0	0	0.00	0	0%	-

# fans	hp	kW
0	0.00	0.00
0	0.00	0.00
0	0.00	0.00
0	0.00	0.00

Project Type (E)	Maximum Demand (kW)	Summer Coincidental Demand (kW)	Annual Energy (kWh)
	Total -	-	-

New System Description (N)

Describe the new system in terms of demand and energy requirements, efficiency, operating hours and the number of units being replaced. This data may be supplied in terms of production. Include supporting documentation and specifications as attachments as required.

# fans	cfm/fan	cfm/W	Hrs/year	% of hours		kWh/yr	Recommended minimum efficiencies for energy efficient agricultural ventilation fans			
				at full load			Static Press(in.H20)	Fan Efficiency (cfm/W)		
0	0	0.00	0	0%	-	0.00		24 in.	36 in.	48 in.
0	0	0.00	0	0%	-	0.05	12.9	18.3	19.7	
0	0	0.00	0	0%	-	0.10	11.9	16.2	17.6	
0	0	0.00	0	0%	-	0.15	10.9	14.1	15.4	
0	0.00	0.00				0.20	9.7	11.4	12.6	
0	0.00	0.00				0.25	8.2	8.6	9.8	
0	0.00	0.00				0.00	HVLS (16 ft. minimum) - 200			
0	0.00	0.00								

Project Type (N)	Maximum Demand (kW)	Summer Coincidental Demand (kW)	Annual Energy (kWh)
	Total -	-	-

Estimated Project Savings:

<i>GRE Representative use only</i>
Initial: _____
Date: _____



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Worksheet Instructions: Enter required data in shaded area only.

Environmental Assurances

Describe how hazardous wastes which may result from this project will be handled:

Power Quality

Does the project meet power quality requirements:

Power Factor: yes / no

Harmonic Distortion: yes / no

If "yes" in either case, the cooperative should have a copy of the specification sheets on file at their office.

Removed Equipment

Describe how removed equipment will be made inoperable.

Demand & Energy Savings Calculations

Summer Coincidental Demand Savings: kW(E) - kW(N) = - kW
 Average Demand Savings: kW(E) - kW(N) = - kW
 Average Annual Energy Savings: kWh(E) - kWh(N) = - kWh

Estimated Annual Demand Savings:

_____ kW	\$ _____	/ kW x	_____	=	\$ _____
	Demand Rate - \$/kW		Months		
_____ kW	\$ _____	/ kW x	_____	=	\$ _____
	Demand Rate - \$/kW		Months		

(Second line - two tier or seasonal rates)

Total Demand Cost Savings \$ _____

Estimated Annual Energy Savings:

_____ kWh/mth	\$ _____	/ kWh x	_____	=	\$ _____
Annual kWh /	Energy Rate - \$/kWh		Months		
12					
_____ kWh/mth	\$ _____	/ kWh x	_____	=	\$ _____
Annual kWh /	Energy Rate - \$/kWh		Months		
12					

(Second line - two tier or seasonal rates)

Total Energy Cost Savings \$ _____

Estimated Total Savings: \$ _____

(Enter required data in shaded area only)

ENTER Total Project Cost:	\$ _____	<i>(Incremental Cost: Standard vs. High Efficient)</i>
ENTER Grant Amount Requested:	\$ _____	<i>(The maximum rebate amount shall be the lesser of 50% of the project cost or \$100,000 (\$150,000 for retrofit with</i>
Benefit Cost Ratio:	#DIV/0!	<i>(Must be ≥ 2.00 - Increase BCR to meet all criteria)</i>
After Grant Project Cost:	\$ _____	<i>(Project cost - Grant amount requested)</i>
Simple Payback after Grant (yrs)	#DIV/0!	<i>(SPB Must > 1 yr. Total Savings / After grant project cost)</i>

<i>GRE Representative use only</i>
Initial:
Date:

Cooperative Representative

Date