





# Vermont Small Scale Renewable Energy Incentive Program SOLAR HOT WATER SYSTEM Incentive Reservation Form

SECTION A: CUSTOMER INFORM	MATION			
First Name	Last Name			
Company/Organization (non-residential in	stalls only)			
Daytime Phone Number				
Email Address				
Mailing Address				
City	State	Zip Code		
Utility Company				
Is the customer applying for incenti	ives for more than one system at this ti	me? ☐ Yes ☐ No		
Has the customer (or customer's household) received an incentive reservation from the Vermont Small Scale Renewable Energy Incentive Program since February 2012? ☐ No				
SECTION B: RESERVING SOLAR PARTNER INFORMATION				
Reserving Solar Partner Company Name				
Contact First Name	Last Name			
Contact Email Address				
Daytime Phone Number				
Mailing Address				
City	State	Zip Code		
Plumber Name	Plumbing License #			
RERC USE ONLY: Date Rec'd:	Res. Number:	Date Appryd:		

SECTION C: INSTALLATION	ON INFORMATI	ON		
Installation Address				
City		State	Zip Code	
Installation County				
Type of Installation (check one)	☐ Residential	☐ Commercial/Industrial	☐ Special Category	
System Location (check one)	☐ Rooftop	☐ Ground Mount		
System Type (check one)	☐ New System	☐ Expansion of Old System		
<b>NOTE</b> : If you answer YES to either of the following two questions, additional requirements may apply. See "Section G: State Historic Preservation Act" for more information.				
If the installation is b	ouilding mounted, is	the building fifty years or older	? 🛘 Yes 🗘 No	
Does the installation i	require ground distu	rbance for footings or trenches	?	
SECTION D: SOLAR HOT	WATER SYSTEM	M EQUIPMENT INFORM	IATION	
Solar Collectors:				
Manufacturer		Model #		
Total Rated Output Calculation:				
τοται κατεά Ομτρατ Carcaration	<i>.</i> .	x 365 x .39	=	
SRCC OG-100 Rating (High Radiation / C Conditions, kWh/day)	Quantity	Capacity Factor	Total Rated Output (kWh/year)	
SECTION E: INCENTIVE (	CALCULATION			
Solar Hot Water Incentive Calculation:				
Residential Total Rate	d Output	x \$0.40 =	(capped at \$3,000)	
Commercial Total Rate	d Output	x \$0.40 =	(capped at \$16,500)	
Special Category Total Rate	d Output	x \$0.80 =	(capped at \$45,000) <sup>1</sup>	
Please include major funding of grants/incentives from other sources: \$				

## MAIL, EMAIL, OR FAX SIGNED AND COMPLETED APPLICATION TO:

Vermont Small Scale Renewable Energy Incentive Program
Attn: Incentive Reservation Application
128 Lakeside Avenue, Suite 401 Burlington, VT 05401
Email: <a href="mailto:info@rerc-vt.org">info@rerc-vt.org</a>

Fax to ATTENTION: RERC (802) 658-1643

<sup>1</sup> Special Category <u>incentives have a maximum value of either \$45,000 or 50% of installed cost, whichever is less.</u>

### **SECTION F: SIGNATURES/CERTIFICATIONS**

#### **CUSTOMER CERTIFICATION**

I certify that I intend to purchase the solar hot water system described in this application, to be installed at the location indicated above. I certify that I meet the requirements listed in the current SSREIP Terms, Conditions, and Requirements at rerc-vt.org/fund-availability/incentives-program/application-forms (If you need a printed copy, please contact the RERC at 877-888-7372). I understand that any deliberate attempt to misrepresent information in this application will disqualify me from all claims to incentives offered through Vermont's Small Scale Renewable Energy Incentive Program. I understand that the incentive will be paid directly to the Reserving Partner only after the company has submitted the Final Project Documentation and Incentive Request and received final approval, including any necessary site visits. I also understand that the benefit of the incentive is mine and must be transferred from the Reserving Partner to me in a manner that is agreeable to both parties. I further certify that (must be initialed by the customer):

I have read, understand, and will abide  Terms, Conditions and Requirements.	e by all program requirements listed in the current SSREIP			
Installation has not begun on the proje	ect described in this application.			
	m receiving the increased incentive rate under the Special fying requirements for that Special Category.			
Customer's Signature	 Date			
RESERVING PA	ARTNER CERTIFICATION			
indicated above; this includes designing the systems customer, and employing a qualified installer (either provide an on-site review of the installation commissioning. The system will be installed in a Wermont Plumbing Rules. I understand that an application will disqualify my company from part	system described on the enclosed application at the location stem to be installed, being substantially involved with the ither employed by my company or under direct contract) to and be on-site to complete the final inspection before accordance with the National Electric Code®, and the 2009 by deliberate attempt to misrepresent information in this ticipation in the program and all claims to incentives offered by Incentive Program. I further certify that (must be initialed)			
Installation has not begun on the proje	Installation has not begun on the project described in this application.			
Terms, Conditions and Requirements fo	e by all program requirements listed in the current <i>SSREIP</i> bund here: <a href="www.rerc-vt.org/fund-availability/incentives-ed">www.rerc-vt.org/fund-availability/incentives-ed</a> a printed copy, please contact the RERC at 877-888-7372).			
Company Representative's Signature	Date			
Company Representative Name (Print)				

#### **SECTION G: STATE HISTORIC PRESERVATION ACT**

The State Historic Preservation Act (22 VSA 14) requires that state agencies take into account the effect of projects on any historic property that is listed on the State Register of Historic Places or may contain scientific, historical, or archeological data. If the installation is on a building more than fifty years old or requires ground disturbance for footings and/or trenches, the project plans must be submitted to the Vermont Division for Historic Preservation for review **prior to starting the installation**. Applicants are encouraged to contact the Division early in the planning process to avoid any unnecessary project delays. **To start the review process, please complete this Section and** submit electronic versions of your project review materials to <a href="mailto:ACCD.projectreview@state.vt.us">ACCD.projectreview@state.vt.us</a>. Our preference is for the form and supporting documents to be sent as .pdf files.

Solar Ins	tallatio	n Site/Address:		
		wner Name:		
Installer	Name:			
			Phone:	
Please cl	heck all	that apply:		
		Installation does involve ground disturbance (footings, trenches, etc.)		
		Building is more than fifty (50) years old		
-		_ Building is listed on the State Regis	ter of Historic Places (leave blank if unknown)	
Please e	mail the	e following information, along with	this form, to the address at the bottom of the page:	
		Project Description.		
		Project Location Map and Site Map, showing the location of the installation. This can be as simple as a Google map annotated by hand to show the location of panels and trenches.		
		Project Plans (if available).		
		Archeological and/or historic building reports (if available).		
		Photographs of the project area and the structures involved. For building mounted installations, please include a photograph of the entire front elevation of the house and photographs of the proposed installation area. Photographs can be annotated by hand to show the location and approximate scale of the installation.		
For Inter	nal Use	Only		
			Please email this form and supporting materials to <a href="mailto:ACCD.projectreview@state.vt.us">ACCD.projectreview@state.vt.us</a> If you have questions contact: Jamie Duggan at 802-477-2288 or <a href="mailto:james.duggan@state.vt.us">james.duggan@state.vt.us</a>	