



GROTON UTILITIES
Bozrah Light & Power Company

Lighting Program Application for New Construction
 & Major Renovation - 2019-2020

CUSTOMER INFORMATION

| | | | |
|--|---|---|--|
| DATE | CUSTOMER/COMPANY NAME | ELECTRIC UTILITY COMPANY NAME | ELECTRIC ACCOUNT NO. (As Stated on the Bill) |
| FACILITY ADDRESS | CITY | STATE | ZIP CODE |
| CONTACT PERSON/TITLE | TELEPHONE NO. (WITH AREA CODE) | FAX No. (WITH AREA CODE) | E-MAIL |
| FEDERAL TAX ID # OR SOCIAL SECURITY NUMBER | INCENTIVE PAYMENT PREFERENCE | PLEASE ASSIGN PAYMENT TO VENDOR INDICATED BELOW | |
| | CHECK <input type="checkbox"/> PAY VENDOR DIRECTLY <input type="checkbox"/> | CUSTOMER SIGNATURE _____ | |

APPLICATION INSTRUCTIONS

1. Read "Terms and Conditions" on the reverse side of this form.
2. Fill out all applicable information on this side of the form.
3. Attach invoice(s) (proof of purchase) indicating place of purchase, make(s) and model(s), and date(s) of purchase.

All rebates are granted at the sole discretion of Groton Utilities and are subject to change at any time.

NEW FIXTURES

| FIXTURE CODE | FIXTURE DESCRIPTION | NO. OF NEW FIXTURES INSTALLED | X | REBATE PER FIXTURE | = | TOTAL FIXTURE REBATE (\$) |
|-----------------|---|-------------------------------|---|--------------------|------------|---------------------------|
| NEWT8FIX/LEDFIX | NEW T8 FLUORESCENT FIXTURE WITH ELECTRONIC BALLAST (1 - 4 LAMPS) or LED | | | \$15 | \$0.00 | \$0.00 |
| NEWT5FIX | NEW T5 FLUORESCENT FIXTURE WITH ELECTRONIC BALLAST (1 - 4 LAMPS) | | | \$30 | \$0.00 | \$0.00 |
| NEWT5HOFIX | NEW T5 HIGH-OUTPUT FLUORESCENT FIXTURE WITH ELECTRONIC BALLAST (1 - 4 LAMPS) | | | \$30 | \$0.00 | \$0.00 |
| SUPERT8 | T8 FIXTURE UPGRADE - SUPER T8 LAMPS AND BALLAST. ADDITIONAL REBATE PER NEW T8 FIXTURE. | | | \$7 | \$0.00 | \$0.00 |
| PULSEMH | NEW PULSE-START METAL HALIDE FIXTURE | | | \$20 | \$0.00 | \$0.00 |
| | | | | | TOTAL (\$) | \$0.00 |

BALLASTS (ELECTRONIC AUTOMATIC CONTROLLABLE)

| BALLAST CODE | BALLAST DESCRIPTION | NO. OF NEW BALLASTS INSTALLED | X | REBATE PER CONTROLLABLE BALLAST | = | TOTAL BALLAST REBATE (\$) |
|--------------|---|-------------------------------|---|---------------------------------|--------|---------------------------|
| DIMBALL | NEW DIMMABLE BALLAST (DAYLIGHT HARVESTING WITH PHOTOCELL CONTROL) | | | \$40 | \$0.00 | \$0.00 |

OCCUPANCY SENSORS

| BALLAST CODE | FIXTURE DESCRIPTION | NO. OF FIXTURES CONTROLLED | X | REBATE PER FIXTURE CONTROLLED | = | TOTAL FIXTURE REBATE (\$) |
|--------------|--|----------------------------|---|-------------------------------|--------------|---------------------------|
| OCCSEN | WALL OR CEILING MOUNTED OCCUPANCY SENSOR | | | \$10 | \$0.00 | \$0.00 |
| OCCSENHB | HIGH-BAY OCCUPANCY SENSOR | | | \$30 | \$0.00 | \$0.00 |
| OCCSENDT | DUAL TECHNOLOGY UPGRADE - SENSORS WITH INFRARED & ULTRASONIC CAPABILITY. ADDITIONAL | | | \$2 | \$0.00 | \$0.00 |
| | | | | | TOTAL (\$) | \$0.00 |
| | | | | | TOTAL REBATE | \$0.00 |

Rebate not to exceed 35% of total project cost or 20 cents per annual KWH saved, whichever is less. Maximum annual rebate \$100,000.

CUSTOMER INFORMATION AND APPROVAL

| | |
|-----------------------|----------------------|
| CUSTOMER/COMPANY NAME | CONTACT PERSON/TITLE |
| CUSTOMER SIGNATURE | DATE |

VENDOR INFORMATION (IF APPLICABLE)

| | | | |
|--------------------------------|--------------------------|--|----------|
| VENDOR COMPANY NAME | CONTACT PERSON/TITLE | | |
| STREET ADDRESS | CITY | STATE | ZIP CODE |
| TELEPHONE NO. (WITH AREA CODE) | FAX No. (WITH AREA CODE) | FEDERAL TAX ID # OR SOCIAL SECURITY NUMBER | |

GROTON UTILITIES USE ONLY

| | | | |
|--|---|------------------------------|-----------------------------|
| ELECTRIC ACCOUNT NO. (As Stated on the Bill) | APPLICATION REFERENCE NO. | DATE RECEIVED | INSPECTION REQUIRED: |
| GROTON UTILITIES APPROVAL DATE | GROTON UTILITIES MANAGEMENT APPROVAL (INITIALS) | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

HOW AND WHERE TO SEND YOUR APPLICATION

MAIL OR FAX TO:
 GROTON UTILITIES
 ATTN: ENERGY CONSERVATION PROGRAM
 295 MERIDIAN STREET
 GROTON , CONNECTICUT 06340
 FAX: (860) 446-4098
 TEL: (860) 446-4000