

Application Change Form

Customer information

Customer: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Day phone: _____ Evening phone: _____ E-Mail: _____

Any change cannot cause the project to exceed the approved incentive amount.

Check which change is being requested:

 Change in contractor (include contact info and license #) – Describe reason for request:

 Change in equipment – Explain change in equipment along with CEC equipment listing. Requires re-calculation of system output and incentive request.

The following to be completed by the installing electrical contractor:

 Estimated AC watt output [Module rated output¹ (DC watts) x no. of modules x inverter efficiency² (%) = estimated AC watts output]:

Incentive assignee name and address: _____

Estimated energy production: _____ AC kWh/year

 Service level: choose one Single phase Three Phase

City: _____ State: _____ Zip code: _____

 Configuration: choose one Islanding Non-Islanding

Assignee Federal Tax ID or SS#: _____

¹Module CEC PTC rating

²Inverter efficiency at CEC 75% load

INCENTIVE CALCULATION

For Rocky Mountain Power use only:

Estimated AC watts output _____ x \$2.00/watt = \$ _____ total incentive

Tracking # _____

Estimated PV System Installed Total Cost = \$ _____

Date form received: _____

TIME DATE STAMP BELOW
 Change in incentive assignment:

Name of new assignee and tax ID#: _____

Address: _____

Phone: _____

- Changes in location of equipment (array, inverter)** – In addition to this form, the contractor must submit a revised pre-inspection sketch with the revised equipment location clearly noted.

Describe reason for request:

Installed Azimuth _____ Installed Tilt _____

- Changes in location of disconnect or REC meter** – In addition to this form, the contractor must submit a revised pre-inspection sketch with the revised equipment location clearly noted.

Describe reason for request:

- Change in completion date** – Projects must be completed before December 31, 2010 to be eligible for an incentive.

Calendar days of requested time extension: _____

New project completion date: _____

Describe reason for request: _____

Date: _____

Customer name (print): _____

Customer signature: _____

Contractor name (print): _____

Contractor signature: _____

Submit these documents to:

Rocky Mountain Power
Solar Incentive Program
P.O. Box 1381
Sandy, UT 84091

E-mail: solar@rockymountainpower.net
Fax: 1-866-557-5993