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FY2014 Renewable Energy Incentive Program (REIP)

### Sustainable Biopower Competitive Solicitation Appendix A - Application Form

# Application Form: Requirements, Instructions, Terms and Conditions

Before completing the attached Renewable Energy Incentive Program (REIP) Application Form and the related REIP Biopower Technical Worksheet, please carefully read all of the information in sections A, B, and C. below.

#### A. Qualification Requirements

- 1. The proposed system must be installed in New Jersey and interconnected with the electric distribution system serving New Jersey (N.J.A.C. 14:8-2.9).
- 2. The REIP is applicable only for net metered sustainable biopower projects installed behind the meter and sized no greater than 100% of the host's historic annual electric consumption.
- 3. The system must be installed in accordance with requirements specified in the New Jersey's **Clean Energy** Program<sup>TM</sup> REIP Technical Worksheet and it must come with owner's manuals and warranty documentation.
- 4. Only new commercially available and permanently installed equipment is eligible for rebates and RECs.
- 5. System warranty must be all-inclusive for at least 5 years. A copy of the warranty must be submitted with the Technical Worksheet.
- 6. Customer must contribute to the Societal Benefit Charge (SBC).
- 7. The Applicant must receive an approval letter from the Renewable Energy Market Manager acting on behalf of the New Jersey Board of Public Utilities (NJBPU) prior to commencing installation.
- 8. Once approved, REIP applicants will have 18 months from the date of the approval letter to satisfy all program requirements and submit the <u>Final As-Built Packet</u> to request a state inspection.
- 9. The Solicitation Evaluation Committee must approve all incentive requests; projects requesting an incentive of \$500,000 or greater will require an additional approval by the New Jersey Board of Public Utilities.
- 10. Combined Heat and Power (CHP) systems powered by sustainable biomass may be eligible for REIP incentives. <u>Applicants for CHP systems must complete Section C of the REIP Biopower Technical Worksheet</u>. CHP systems powered by a non-renewable fuel source and heat recovery or other mechanical recovery systems may be eligible for incentives through the Commercial and Industrial energy efficiency programs. Visit <u>www.njcleanenergy.com</u> or call 1-866-NJSMART for more information.

#### **B. Instructions for Completing the Application Form**

- 1. Complete all of Sections A through E of the REIP Application Form and all sections of the related REIP Biopower Technical Worksheet. All information is necessary for processing applications.
- 2. All requested signatures on forms or contracts are required.

#### **C. Important Terms and Conditions**

- 1. The "Applicant" is defined as the entity that applies to the REIP, i.e. Applicant could be the developer, system owner, installer, or site host. If the applicant is not clearly communicated to the Market Manager, the default Applicant will be the site host contact.
- 2. The Applicant is responsible for submission of all forms and for communications regarding this application.
- 3. The Applicant must agree to an inspection of their installed biopower electric system by a program representative or designated contractor. The Applicant must also agree to allow the program to verify the facility's energy production for the life of the system.
- 4. The NJBPU reserves the right to modify or withdraw this program. Approved projects will be honored under the terms stated in the approval letter.
- 5. Installation must comply with the host Electric Distribution Company's (EDC) interconnection requirements, which are available online; these include operation/disconnection procedures, liability/indemnity and insurance requirements according to the size of the project. For information on interconnection, please see our website at <u>www.NJCleanEnergy.com</u> or contact your EDC.
- 7. The Applicant must comply with the installation requirements in the REIP Technical Worksheet.
- 8. If anything is changed between the time of application and program inspection, an updated application and/or Technical Worksheet must be submitted PRIOR to the program inspection of the installed system.
- 9. Systems shall be installed according to manufacturer's instructions.
- 10. Portable systems are not eligible to participate in this program.
- 11. Information may be subject to the Open Public Records Act (OPRA) requirements. Aggregated Information will be used in reports and evaluations, and the geographic location will be used to update GIS mapping.
- 12. Applicants must sign a certification form along with this application agreeing to reimburse *New Jersey's* **Clean Energy** *Program* on a pro-rata basis for the rebate if the equipment is transferred for use outside of the state of New Jersey within 10 years of the rebate payment date.
- 13. All installations must comply with all applicable local, state and federal laws, permit requirements and regulations.





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#### Updates to the Program requirements are subject to change.

For more information or updates about New Jersey's Clean Energy Program, please contact the NJBPU at 866-NJSMART or visit www.NJCleanEnergy.com.

All installations must comply with all applicable local, state and federal laws, permit requirements and regulations.

Mail or hand deliver completed package to: (Faxes and e-mails are not accepted.)

Renewable Energy Incentive Program New Jersey Clean Energy Program c/o Conservation Services Group 75 Lincoln Highway, Suite 100 Iselin, NJ 08830





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| A: APPLICANT/SITE HOST CONTACT (V  | Where will the system be insta | lled?)              |  |
|--|--------------------------------|---------------------|--|
| Electric Utility Name:   | Account Number:                |                     |  |
| Gas Utility Name:  | Account Number:                |                     |  |
| Social Security Number/Federal Tax I.D. N  | lumber:                        |                     | (complete if receiving rebate)               |
| Company Name (if applicable):  |                                |                     |  |
| Mr Ms Dr: _ First Name:<br>Daytime Phone:  | La                             | ist Name:           |  |
| Daytime Phone:   | Fax:                           | Email:              |  |
| Installation Address:  |                                |                     |  |
|  |                                | State:              | Zip Code:                                    |
| Building Type: Existing:or New Construct   |                                |                     |  |
| Mailing Address (if different):  |                                | Ctoto               | Zip Code:                                    |
| City:  | fit Dublic School School       | State:              | ZIP Code:                                    |
| Type: Residential Commercial Non-Pro   |                                |                     |  |
| B: SYSTEM OWNER (Who will own the syst   |                                |                     |  |
| Company Name:  |                                |                     |  |
| Mailing Address:   |                                |                     |  |
| City:<br>Daytime Phone:  |                                | State:              | Zip Code:                                    |
| Daytime Phone:   | Fax:                           | Email: _            |  |
| C: REBATE RECIPIENT (Fill in section if rebate check is to be issued to an organization / person other than the Site Host Contact) |                                |                     |  |
| Company Name:  | Contact F                      | Person:             |  |
| Social Security Number/Federal Tax I.D. N  | lumber:                        |                     |  |
| Social Security Number/Federal Tax I.D. N<br>Daytime Phone:  | Fax:                           | Email:              |  |
| Mailing Addrose:   |                                |                     |  |
| City:  |                                | State:              | Zip Code:                                    |
| Applicant Signature:   |                                |                     |  |
| D: CONTRACTOR / INSTALLER  |                                |                     |  |
| Company Name:  | Cont                           | act Person:         |  |
| Daytime Phone:   | Fax:                           | Ema                 | il:  |
| Mailing Address:   |                                | HIC Licer           | nse: YesNo                                   |
| City:  |                                | State:              | Zip Code:                                    |
| Self Installation: Yes No Installe   |                                |                     |  |
| (Option  | n Applicable for Public Se     | ctor Only – App     | licant must attach "Intent to Bid" letter)   |
| E: CERTIFICATIONS  |                                |                     |  |
| The undersigned warrants, certifies and repres   | ents that 1) the information p | rovided in this for | rm is true and correct to the best of his or |
| her knowledge; 2) this is a net metered behind-  |                                |                     |  |
| not exceed 100% of the host's historic annual e  |                                |                     |  |
| operation and maintenance to the system owned  |                                |                     |  |
| all NJBPU rules and applicable laws, and all N.  |                                |                     |  |
| the Customer of Record for the Utility Account;<br>account information, both prior to installation ar                              |                                |                     |  |
| application may be subject to the Open Public  |                                |                     |  |
| applicable REIP Biopower Technical Workshe   |                                |                     |  |
| accurate and system installation will follow the   |                                |                     |  |
| System Owner   | Contractor/Instal              | ler                 | Site Host Contact                            |
| -,   |                                |                     | (if different from system owner)             |
| Signature:   | Signature:                     |                     | Signature:                                   |
| Print Name:  | Drint Name:                    |                     | Print Nama                                   |
|  | Print Name:                    |                     | Print Name                                   |
| Date:  | Date:                          |                     | Date:  |

Key Contact for Public Relations Opportunities: Name: \_\_\_\_\_

\_ Phone: \_\_