



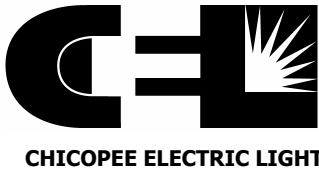
PHOTOVOLTAIC REBATE APPLICATION FORM	
OWNER INFORMATION	
Customer Name	Chicopee Electric Light Account Number:
Street Address:	Phone #:
City, State & Zip Code:	Email:
SYSTEM REPRESENTATIVE INFORMATION (RESPONSIBLE FOR REPORTING TO CEL – MAY BE SAME AS OWNER)	
System Representative (monthly reporting to CEL):	Phone #:
Company (if applicable):	Email:
Street Address:	City, State & Zip:
CONTRACT AND INSTALLER INFORMATION – IF MORE THAN ONE CONTRACTOR LIST THEM ALL	
Contractor/Vendor Company:	Date Contract Signed:
Contractor/Vendor Contact:	Contractor License #:
Street Address	Phone:
City, State & Zip:	Email:
AMOUNT OF REBATE REQUESTED	
\$	
Applicants Signature:	Date:

In addition to this completed rebate application from with original signatures the following supporting materials must be submitted at the time of application:

- _____ Applicable technical worksheet(s) including production estimates
- _____ Site plan showing orientation and location of critical components
- _____ One line electrical diagram showing all major components and interconnections
- _____ Budget and cost estimates, and/or copies of quotations from vendors
- _____ Manufactures specification sheets for all major components including warranty information
- _____ Copy of contract or proposal between the customer/facility owner and the installer/vendor

I certify that the statements made in this application, including all attachments and exhibits, are true and correct to the best of my knowledge.

Applicant (Printed Name and Address of Applicant):	Signature of Authorized Representative:
Name of Authorized Representative (Printed):	Title of Authorized Representative:
Daytime Phone #:	Date of Application Submittal:
Anticipated Project Start Date:	Anticipated Project Completion Date:



PV Technical Worksheet	
System Owner/Applicant:	Project/System name:
PV Manufacturer:	Quantity of PV Units:
PV Model#:	Rated Output (per unit) at STC: <small>STC=standard test conditions</small>
PV Panel Rate Efficiency: <small>watts output/m² ÷ (1000 watts input / m²) = % efficiency</small>	Total Array Surface Area (m ²):
Inverter Manufacturer:	Quantity of Inverters:
Inverter Model:	Max Rated Inverter Output (per unit):
Inverter Location:	Location of AC Disconnect Switch:
Storage System (if any):	Storage Capacity (if any):
Maximum Rated System Output (kW):	Estimated Annual Production (kWh): <small>(provide back-up from PVWatts or other source)</small>
Array Type: <input type="checkbox"/> Fixed <input type="checkbox"/> Single axis azimuth tracking <input type="checkbox"/> Dual axis tracking <input type="checkbox"/> Inclination adjusted seasonally	Array Location: <input type="checkbox"/> Rooftop <input type="checkbox"/> Pole or ground mount <input type="checkbox"/> Other (describe):
Azimuth: <small>(must be between 90° and 270°; 180° = true south)</small>	Inclination or Tilt: <small>(flat on roof = 0° ; vertical on wall = 90°)</small>
Other Notes on PV System:	Average # of Hours/Day Array in Shaded:

PC Incentive Calculation Table		
Base Incentive:		2.50 per Watt
Rated Output Watts:		
TOTAL REBATE REQUESTED:		Base Incentive X Rated Output Watts

ATTACHMENT I – SIMPLIFIED PROCESS INTERCONNECTION

CERTIFICATE OF COMPLETION

INSTALLATION INFORMATION

Check if Owner Installed

Interconnected Customer: _____ Contact Person: _____

Mailing Address: _____

Location of Facility (if different from above): _____

City: _____ State: _____ Zip Code: _____

Telephone (Daytime): _____ Telephone (Evening): _____

Facsimile Number: _____ Email Address: _____

ELECTRICIAN

Name (please print): _____ Signature: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Daytime): _____ Telephone (Evening): _____

Facsimile Number: _____ Email Address: _____

License Number: _____

Date Approval of Install Facility granted by CEL: _____

Application Number: _____

LOCAL ELECTRICAL INSPECTION

The system has been installed and inspected in compliance with the local Building/Electrical Code of the City of Chicopee. System includes proper interconnection and disconnection equipment.

Signature of City of Chicopee Electrical Wiring Inspector

Printed Name of City of Chicopee Electrical Wiring Inspector

As a condition of interconnection you are required to send this form along with a copy of the signed electrical permit to:

Jeffrey R. Cady, General Manager
Chicopee Electric Light
725 Front St.
Chicopee, MA 01013
Email: jcady@celd.com