

Design 2000_{plus} Dry Type Transformers

2006 Project Information Form for Rhode Island

This Project Information Form provides a template to collect project systems and equipment information and specifications. In addition, this form serves as a guide to terms for Dry Type Transformers and identifies energy efficiency improvement products and incentives. Contact your Business Services representative to complete an application and to determine the incentive for this project.

Customer Facility Information

Customer Facility Name: _____ Date of Application: _____
 _____ Sq. Ft. Covered by Application: _____
 Contact Person: _____ Design 2000_{plus} Project Type:* (see below for details)
 Street Address: _____ Federal ID Number: _____
 City: _____ State: _____ Zip: _____ Company Type:
 E-mail Address: _____ Incorporated Exempt Not Incorporated
 Facility Description: _____ Phone Number: _____
 _____ Fax Number: _____

Customer of Record Information: LOC ID: _____ Account Number: _____ Internal Use only

*Design 2000_{plus} Project Type (select one)

- | | |
|--|---|
| <input type="checkbox"/> Change in the use or Function of the Building Space | <input type="checkbox"/> Expansion of an Existing Building |
| <input type="checkbox"/> New Building | <input type="checkbox"/> New Controls for Improved Operations |
| <input type="checkbox"/> New Equipment for New Process or Expanded Operation | <input type="checkbox"/> Planned Replacement of Equipment |
| <input type="checkbox"/> Renovation of Existing Equipment | <input type="checkbox"/> Replacement of Failed Equipment |

Installation Contractor Information

Installation Performed By:** Customer Installation Contractor Project Expediter Other (Vendor)

Complete this section if installation is not by the customer

Installation Company: _____ Street Address: _____
 Contact Person: _____ City: _____
 E-mail Address: _____ State: _____ Zip: _____
 Phone Number: _____

** If contractor has not been selected, select Customer

Application Information

Application Funding Type AAP Other Internal Use only

Expected Completion Date _____

Proposed Incentive Recipient Customer (Account Credit or Check) Installation Contractor*** Other (Vendor)***

*** Complete this section if Installation Contractor or Other has been selected

Federal ID Number: _____ Company Type: Incorporated Exempt Not Incorporated

This Form Was Completed By:

Name: _____
 Phone Number: _____ E-mail Address: _____

For More information

Phone: 1-800-787-1706

Internet: www.nationalgridus.com

For definition of terms or information on eligibility requirements and other program details, see page three of this document. Review the proposed equipment specifications to confirm your equipment meets the minimum efficiency requirements. **Fill in the proposed equipment in the table below.**

Proposed Equipment Specification (Facility Detail)					
Building and Equipment Identification (Installation Site): _____					
Installation Location	Transformer Manufacturer	Transformer Model No.	Size kVA	NEMA Nominal Efficiency	Quantity

Note: After dry type transformer is installed, provide an invoice (proof of purchase) showing where it was purchased, the make, model, size, date of purchase, core losses and copper losses, to your National Grid Business Services representative.

Guide to Terms
<p>NEMA: National Electrical Manufacturers Association</p> <p>NEMA Nominal Efficiency: 35% of the nameplate load</p>

Project Information Form Notes

I. Dry Type Transformer Eligibility Requirements and Incentive Details

Qualifying Dry Type Transformer Eligibility Requirements:

1. Must meet or exceed efficiencies listed in Table 1 below.
2. Must meet the NEMA Dry Type Transformers Standard TP1-1996.
3. Transformers must meet EPA's Energy Star Guidelines.
4. Transformers must be installed in National Grid's Rhode Island service territory.
5. Pre-approval from National Grid is required if the incentive totals more than \$7,500.
6. National Grid reserves the right to verify sales transactions and to inspect the transformer installed under this program, prior to issuing incentives or at a later time, for monitoring and evaluation purposes.
7. A sales slip itemizing the new purchased equipment must be sent to the National Grid Business Services representative in order to receive an incentive. The sales slip must indicate type, size, make, model number of the transformer and date of purchase.
8. This incentive program covers products purchase and installed after January 1, 2006. To be eligible, all Project Information Forms and required attachments must be received by December 31, 2006.

Table 1: Dry Type Energy Efficient Transformers Incentives

Three Phase Transformer Size in KVA	Minimum Low Voltage (600 Volts Class) efficiency*	Incentive Per Transformer (See notes below for eligibility)
15	97.0%	\$130
30	97.5%	\$190
45	97.7%	\$250
75	98.0%	\$440
112.5	98.2%	\$520
150	98.3%	\$560
225	98.5%	\$1,150

- Efficiencies are measured at 75°C and at 35% of nameplate load

II. Terms and Conditions Details

- **Tax Liability** - National Grid will not be responsible for any tax liability that may be imposed on the customer as a result of the payment of incentives. All customers must supply their Federal Tax ID Identification Number or Social Security number in order to receive an incentive.
- **Endorsement** - National Grid does not endorse any particular manufacturer, product, or system design in promoting this program.
- **Limitation of Liability** - National Grid does not warrant the performance of installed equipment, expressly or implicitly.
- **Assignment** - Customer may assign payment to a qualified vendor.
- **Owner's Certification** - Owner certifies that he/she has purchased and installed the equipment listed herein on the defined location. Owner agrees that all information is true and that he/she has conformed to all initiative and equipment requirement levels. Owner has verified that the units listed herein have been installed correctly.