# REBATE APPLICATON

Town of Estes Park

Small Wind Incentive Pilot Program (SWIPP)

| Date: | *Office Use Only:* | *Date completed application received:* |
|---|---|---|
| | | |

*This application must be accompanied by the completed Town of Estes Park Agreement for Interconnection and Parallel Operation of Customer Generated System and is contingent upon all conditions outlined therein. In addition, by accepting these incentive funds, you are agreeing to operate your system for a minimum of five years and to supply the Town of Estes Park Light & Power Department with annual maintenance records proving the system is operating within manufacturer's specifications.*

| **Name** | **Street Address of Property** |
|---|---|
| | |
| **City/Zip Code** *(only offered to 80517, 80532, 80510 or 80511)* | **Phone number(s)** (day/evening) |
| | |
| **Commercial or Residential** | **Utility Account #** |
| | |

In order to participate in the Town of Estes Park Light & Power Department SWIPP, you must submit to an inspection to ensure you are complying with the accompanied Town of Estes Park Agreement for Interconnection and Parallel Operation of Customer Generated System. **The Governor's Energy Office further requires each small wind turbine have a five-year warrantee from the manufacturer.**

| Agreement for Interconnection and Parallel Operation of Customer Generated System inspection | **Date:** | **Inspected by:** | **Inspector's Comments:** |
|---|---|---|---|
| | | | |

**SYSTEM INFORMATION:**

| Manufacturer: | Model: | W generated by system: |
|---|---|---|
| | | |
| Installed on (date): | Installed by: | |

To calculate rebate amount:

_____ W X $2 = $_____ amount requested (maximum = $5,000)

Return the completed application with:

☐ The completed Town of Estes Park Agreement for Interconnection and Parallel Operation of Customer Generated System (net-metering) and required accompanying documentation.

☐ System installation documentation.

☐ Documentation from the Agreement for Interconnection and Parallel Operation of Customer Generated System inspection (if applicable).

Signed: _____ Date: _____

*(property owner/applicant)*