

# industrial accelerator<sup>SM</sup>

- Please read Program Rules before completing this application.

## DETAILED ENGINEERING STUDY FUNDING APPLICATION

For OPA Use only

Identification #:	
KAM:	

### CORPORATE INFORMATION

Name of Company:		
Participant's name (if different):		
Corporate relationship between the two:		
Please indicate whether the Company owns or leases the Property:	<input type="checkbox"/> Owns <input type="checkbox"/> Leases	
If there has been any change to corporate status since the first application to the Program please identify it here:		

### PARTICIPANT INFORMATION

Participant Information:	Contact Information:
Legal Name of Participant:	Primary Contact Name:
	Title:
Additional Party for Credit Purposes, if applicable:	Phone:
Canadian Corporate Head Office Address (Street):	Email:
	Fax:
	Secondary Contact Name:
	Title:
City:	Phone:
Postal Code:	Email:
GST/HST #:	Fax:

### FACILITY INFORMATION

Industry Sector:	NAICS Number (six digits):
Facility Name:	Overview of Facility Processes:
Facility Address:	
Street:	
City:	
Postal Code:	

### DETAILED ENGINEERING STUDY CONSULTANT'S INFORMATION

Company Name:		
Authorized Contact Name:	Secondary Contact Name:	
Phone:	Phone:	
Fax:	Fax:	
Email:	Email:	

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• Please submit a separate request for each project.

### SUMMARY DESCRIPTION OF THE CONSULTANT'S SCOPE OF WORK

Please include a **brief** description of the Scope of work to be performed in the Study:

### PROPOSED DETAILED ENGINEERING STUDY REQUEST

Estimated Detailed Engineering Study cost:			
Proposed Study start date:		Proposed Study completion date:	
Is there a completed Preliminary Engineering Study?	<input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	Yes, with funding from OPA Yes, without funding from OPA No	

(If a Preliminary Engineering Study has been completed without funding, the report must be included with this application)

A copy of the Consultant's Detailed Engineering Study proposal **MUST** be attached

List of Industrial Systems for study funding: (Attach and submit additional pages if necessary)

System #	Description of each Industrial System to be studied	Hours of Operation of the System [hours/year]	Annual Consumption of the System [MWh/year]	Estimated Annual Electricity Savings Potential [MWh/year]	Estimated Electricity Bill Savings (BS) [\$ /year]	Estimated Other Benefits (OB) [\$ /year]	Estimated Project Benefits (BS+OB) [\$ /year]	Estimated Eligible Costs [\$ /year]	Proposed Study Costs [\$ /year]
1									
2									
3									
4									
<b>TOTAL</b>									

Assumed Electricity Rate (\$/MWh):

### THIRD PARTY CONTRIBUTIONS

Have you applied, or will you be applying for any other third party funding for the Project referred to in this application?	<input type="checkbox"/>  <input type="checkbox"/>	Yes No
Have you received any third party contributions or commitments for contributions? (Including contributions in kind)	<input type="checkbox"/>  <input type="checkbox"/>	Yes No
Amount of third party contributions or commitments:		
Source of third party contributions or commitments:		

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## SUPPORTING INFORMATION (LIST)

Please indicate below the list of attached supporting documents:

1	
2	
3	
4	
5	

## CONFIDENTIALITY

Confidentiality is governed by the Program Rules.

## PROJECT ELIGIBILITY

I, the Participant, am submitting this application and confirm that this Project is an Eligible Project in accordance with Sections 2.3 and 2.4 of the Program Rules.

## PARTICIPANT'S DECLARATION

I, the undersigned, declare that:

- I am making this application to the OPA for funding pursuant to and in accordance with the Program Rules.
- the information in this application is accurate and complete in all material respects.

Authorized Signature:	Title:
Name: I have the authority to bind the corporation	Date:
Mailing Address (Street):	Phone:
City	Fax:
Postal Code:	Email:

**Note:** If this application is accepted, Participants must enter into a Detailed Engineering Study Funding Contract in order to receive Study Funding.

To submit this application, please deliver an electronic and a signed pdf version to your OPA Key Account Manager