

industrial acceleratorSM

- Please read Program Rules before completing this application.

PRELIMINARY 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: | |

PRELIMINARY 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 PRELIMINARY ENGINEERING STUDY REQUEST

Estimated Preliminary Engineering Study cost:

Proposed Study start date:

Proposed Study completion date:

A copy of the Consultant's Preliminary 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 | | | | | | | | | |
| TOTAL | | | | | | | | | |

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?

Yes

No

Have you received any third party contributions or commitments for contributions?
(Including contributions in kind)

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

Note: If this application is accepted, Participants must enter into a Preliminary 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