

Control Num.



COMMONWEALTH OF PUERTO RICO

ARRA - STATE ENERGY PROGRAM

SUN ENERGY PROGRAM

Rebate Reservation Form



Send Via Certified Mail or Hand Deliver to:
 SUN ENERGY PROGRAM
 Puerto Rico Infrastructure Financing Authority
 Capital Center, North Tower, 16th floor
 235 Arterial Hostos Avenue
 San Juan, Puerto Rico 00918-1454

Notes:

- Fill forms in block letter
- Send form S-01 with all required documents in one manila envelope

General Information:

Indicate if system will be installed at a residential, commercial or governmental facility: residential commercial governmental
 Condominium Association (Residential)

Applicant Information:

Name:

Street:

City:

State:

Zip Code:

Email:

Phone:

Fax:

Facility Owner (if applicable):

Name:

Phone:

Email:

Fax:

Contact Person Information:

Name:

Title:

Email:

Phone:

Fax:

Proposed Project Address (If different from applicant address):

Street:

City:

State:

Zip Code:

Phone:

Rebate, Savings and Other Incentives:

Estimate annual energy production or savings _____ KWH/Year	Total System Cost	\$
System Rated Output _____ watts	Expected Rebate	\$
Other Incentives:	Other Incentive Amount	\$

Required Documents Checklist:

- | | | |
|---|---|--|
| <input type="checkbox"/> Installer Information Form (S-02) | <input type="checkbox"/> Site Sketch form (S-02.1) | <input type="checkbox"/> Vendor Information Form (S-03) |
| <input type="checkbox"/> Project Price Quotation | <input type="checkbox"/> Owner's Valid ID | <input type="checkbox"/> Last six (6) Electric Utility Bills |
| <input type="checkbox"/> Building Owner's Consent (If Applicable) | <input type="checkbox"/> Owner's Proof of Ownership | <input type="checkbox"/> Rent Agreement (If Applicable) |
| <input type="checkbox"/> Certificate of Good Standing with EAA (Government Entities Only) | | |

Applicant Certification:

- I hereby certify that the information contained herein and in all attachments and documents submitted is true and correct and that the energy system described herein will be installed at the indicated location.
- The system installed will comply with the State Energy Program Regulation.
- The system will be installed permanently at the indicated proposed project address.
- I certify that I have read, understood and agree with the State Energy Program Regulation.

Applicant's Signature:

Date:

Owner's Signature:

Date:

*Include owner authorization letter to sign as owner representative

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Installer Information Form



General Information:

Indicate if the retrofit project will be performed at a residential, Commercial or governmental facility:

- residential
- commercial
- governmental
- condominium association (residential)

Installer Information:

Name:	
Street:	
City:	
State:	Zip Code:
Email:	Phone:
EAA License Number(include copy of certificate):	Fax:

Proposed Project Address:

Street:
City:
State:
Zip Code:

Description of Work to be Performed:

Price of System Installation:

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Installer Certification Agreement:

- I, _____(Installer Name) certify that the installation of the photovoltaic energy system will comply with local codes and regulations.
- I hereby certify that the information contained herein is true and correct and that the energy system described herein will be installed at the indicated proposed project address.
- The system to be installed will comply with the State Energy Program Regulation.
- The system will be installed permanently at the indicated proposed project address.
- I certify that I have read, understood and agree with the State Energy Program Regulation.
- I certify that the information included in the site sketch is true and correct.

Installer's Signature:

Date:

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COMMONWEALTH OF PUERTO RICO

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Vendor Information Form



General Vendor Information:

Name:	
Street:	
City:	
State:	Zip Code:
Email:	Phone:
Employer Identification Number (EIN):	Fax:

Owner or Contact Person Information:

Name:
Email:
Phone:
Fax:

Equipment Information:

	Photovoltaic Panels	Inverter	Other	
<i>Manufacturer*</i>				
<i>Model</i>				
<i>Capacity (W)</i>				
<i>Quantity</i>				

Equipment Warranties:

Vendor Agreement:

I, _____, representative of _____
 (Vendor's Name) (Company's Name)

Certify that:

- The equipment to be sold is new.
- The information contained herein is true.
- I have read, understood and agree with the State Energy Program Regulation.
- The product I represent/sell complies with ARRA Section 1605 - Buy American.

Vendor's Signature:	Date:
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*Include supporting documentation from manufacturer showing where product is manufactured