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		COMMONWEALTH OF PUERTO RICO ARRA - STATE ENERGY PROGRAM AGRICULTURE RENEWABLE ENERGY PROGRAM Rebate Reservation Form	
Send Via Certified Mail or Hand Deliver to: AGRICULTURE RENEWABLE PROGRAM Puerto Rico Infrastructure Financing Authority Capital Center, North Tower, 16 th floor 235 Arterial Hostos Avenue San Juan, Puerto Rico 00918-1454		Notes: - Fill forms in block letter - Send form A-01 with all required documents in one manila envelope	
General Information:			
Indicate the Renewable Energy System (RES) that will be installed: <input type="checkbox"/> Solar Energy System (SES) <input type="checkbox"/> Wind Energy System (WES)			
Applicant Information:			
Name:			
Street:			
City:			
State:		Zip Code:	
Email:		Phone:	
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 (A-02)	<input type="checkbox"/> Site Sketch Form (A-02.1)	<input type="checkbox"/> Vendor Information Form (A-03)	
<input type="checkbox"/> Project Cost Quotation	<input type="checkbox"/> Last six (6) Electric Utility Bills	<input type="checkbox"/> Wind Study (If Applicable)	
<input type="checkbox"/> Owner's Proof of Ownership	<input type="checkbox"/> Rent Agreement (If Applicable)	<input type="checkbox"/> Wind Study Information Form(A-04) (If Applicable)	
<input type="checkbox"/> Endorsement Letter from the Department of Agriculture		<input type="checkbox"/> Owner's Valid ID	
Applicant Certification:			
<ul style="list-style-type: none"> 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 the Renewable Energy System (RES) that will be installed: Solar Energy System (SES) Wind Energy System (WES)

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:

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 or Wind Turbine	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

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COMMONWEALTH OF PUERTO RICO
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Wind Study Information Form



Wind Study Company Information:

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

Proposed Project Address:

Street:	
City:	
State:	Zip Code:

Wind Study Information:

Date	Equipment Used	Calibration
Start:	Manufacturer:	Date:
End:	Model:	Due Date:

Wind Study Results:

Height (m)	Wind Speed (mph)	Wind Speed (m/s)	Wind Power Density (W/m ²)	Resource Potential	Wind Power Class

Certification Agreement:

- *I hereby certify that the information contained herein is true and correct and that the wind study included herein applies to the proposed project address.*
- *The wind study results obtained comply with the State Energy Program Regulation.*
- *I certify that I have read, understood and agree with the State Energy Program Regulation.*

Signature:

Date:

Printed Name: