



WindGenerations Incentive Program Application

Residential

Small Business

Public Building

School

Agriculture

OWNER

Name: _____ Premise#: _____ Meter#: _____

Contact Name: _____ Title: _____

Installation Address: _____ City: _____ State: _____ Zip Code: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

County: _____ Phone: _____ Phone 2: _____ Email: _____

ELECTRICAL CONTRACTOR

Company Name: _____ Contact: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ Phone 2: _____ Fax: _____ Email: _____

License#: _____ Class: _____ Expiration Date: _____

EQUIPMENT INFORMATION

Wind Generator

Manufacturer: _____

Model: _____

Generator Warranty Years: _____

Generator CEC* power output (Watts): _____

Quantity of generators: _____

Tower Height (in feet): _____

Tower Steel Composite

 Lattice Tilt

Name Plate Rated A/C Output: _____

Estimated energy production: _____ AC kWh/year

Service:

 Single Phase Three Phase

 Battery Back-up (islanding)

*CEC: California Energy Commission

Inverter

Manufacturer: _____

Model: _____

Inverter Warranty Years: _____

Voltage: _____

Rating (watts): _____

Quantity of inverters: _____

Assignment of Rebate

Rebate Assignee Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Wind Energy Planning

Have you examined the energy efficiency of your home? _____

Estimated average wind speed (MPH) _____

Wind speed of generator's rated output _____

Generator's estimated yearly energy production (kWh) _____

For WindGenerations use only:

Tracking # _____

Existing Net Metering or WindGenerations: _____

Re-Application: _____

System Expansion: _____

TIME DATE STAMP BELOW