



PORT OF OAKLAND

Application for Public Benefits Rebate Program

Please fill out this application and submit the completed form to the Port Utility Administration Department. The Port will respond to this application with comments and rebate availability as soon as the requested information stated in this application is provided.

Utility Account Information

Company Name: _____ Tenant No.: _____ Facility No.: _____

Applicant Contact Information

Name of Project Contact: _____

Day Phone: (____) _____ Fax: (____) _____ Email address: _____

Mailing Address: _____ City: _____ Zip: _____

If Applicable:

Consultant's name: _____ Consultant's Phone: (____) _____

Consultant's Address: _____ City: _____ Zip: _____

Contractor's name: _____ Contractor's Phone: (____) _____

Contractor's Address: _____ City: _____ Zip: _____

Project Information

Project Name: _____

Project Address / Location: _____ City: _____ Zip: _____

Date you will begin Construction: _____

Date of Construction Completion: _____

Identify Rebate Requested:

- | | | | |
|---|----------|--|----------|
| <input type="checkbox"/> Energy Audit | \$ _____ | <input type="checkbox"/> Lighting Retrofit | \$ _____ |
| <input type="checkbox"/> Title 24 Standards Energy Saving | \$ _____ | <input type="checkbox"/> Equip. Retro/improve. | \$ _____ |
| <input type="checkbox"/> PV (Photovoltaic) | \$ _____ | <input type="checkbox"/> Renewable Energy | \$ _____ |
| <input type="checkbox"/> Energy Saving Research & Development | \$ _____ | | |

Please fill out the appropriate rebate application section for your eligible energy conservation project. Energy consumption, energy saving, equipment cost, construction cost and equipment quantity are subject to verification prior to approval of rebate.

Energy Audit

Energy Saving Priority	Description of Recommended Project	Existing Annual Energy Consumption (kWh)	Annual Energy Saving (kWh)	Project Completed (✓)	Eligible % Rebate if Project Completed
1					30%
2					25%
3					20%
4					15%
5					10%

Total Energy Audit Cost: _____ **TOTAL REBATE REQUESTED:** _____

Lighting Retrofits

Existing Lighting			Lighting Retrofit						
Description	Fixture Qty.	Operation (Hrs/Yr)	Energy Consumption per Unit (kWh)	Total Annual Energy Consumption (kWh)	Description	Fixture Qty.	Operation (Hrs/Yr)	Energy Consumption per Unit (kWh)	Total Annual Energy Consumption (kWh)

A) Total Annual Energy Savings (kWh): _____

TOTAL REBATE REQUESTED (A × \$0.05): _____

Title 24 Standards Energy Saving

Title 24 Standard Compliant Equipment/Material				Title 24 Standard Upgrade Equipment/Material								
Item #	Description	Energy per Unit (kW)/or material energy rating	# of units/or amount of material	Cost per Unit/material	Total Cost	Description	Energy per Unit (kW)/or material energy rating	# of units/or amount of material	Cost per Unit/material	Total Cost	% of energy savings	Rebate (\$)
1												
2												
3												
4												

TOTAL REBATE REQUESTED: _____

Energy Saving Equipment Retrofit/Improvements

Existing Equipment				Equipment Retrofit			
Description	Equipment Qty.	Energy Consumption per Unit (kW)	Annual Energy Consumption per Unit (kWh)	Description	Equipment Qty.	Energy Consumption per Unit (kW)	Annual Energy Consumption per Unit (kWh)

A) Total Annual Energy Savings (kWh): _____

TOTAL REBATE REQUESTED (A × \$0.08): _____

Research, Development, and Demonstration Projects:

Electric Vehicle Charging Station

A) Number of Charging Stations: _____

B) Total Construction Cost: _____

TOTAL REBATE REQUESTED (B × 20%): _____

Clean Natural Gas (CNG) Fueling Station

A) Number of Fueling Stations: _____

B) Total Construction Cost: _____

TOTAL REBATE REQUESTED (B × 20%): _____

Solar System (Photovoltaic/or PV System) Information

A) PV Manufacture	:	_____	(G)	Inverter Manufacture	:	_____
B) PV Model Number	:	_____	(H)	Inverter Model Number	:	_____
C) PV Power Rating	:	_____ (watts/unit)	(I)	Number of Inverter Units	:	_____
D) Number of PV Units	:	_____	(J)	Inverter Efficiency	:	_____ %
E) Total System Output	:	_____ (ac watts)	(K)	Total Inverter Output	:	_____ (watts)
F) Total System Cost	:	\$ _____				

TOTAL REBATE REQUESTED (E × \$ 3.03/ac watt for year 2010): \$ _____

In no case will Port of Oakland pay more than 100% of the actual purchase price of items to be rebated. This program has a limited budget. If no reservation has been made, rebate forms will be accepted on a first-come, first-served basis, until allocated funds are spent on an annual basis (July-June).

I agree that I have not received rebates, incentives or services for the same measure(s) from another utility, state, or local program funded by the Public Goods Charge (AB1890).

I have read and understand the terms and conditions described above and in the Port of Oakland's Public Benefits Rebate program guidelines. I certify that the information I have provided is true and correct and the product(s) and/or equipment for which I am requesting this rebate meets the requirements in this application package.

Customer's Signature: _____ **Date:** _____

Customer's Name (Print): _____

Title: _____

For Port's Use:

I have evaluated the application and confirmed the work described above has been completed.

Utility Section Staff Signature: _____ **Date:** _____

This project meets the Port's AB1890 Rebate Program Guidelines and is recommended for the amount of energy conservation rebate requested.

Utility Section Supervisor Signature: _____ **Date:** _____

I approve/recommend approval of the amount of energy conservation rebate requested under the Port's AB1890 Rebate Program.

Department Manager: _____ **Date:** _____

Approval: (If rebate exceeds Department Manager approval authority.)

Division Director: _____ **Date:** _____