



COMMERCIAL NEW CONSTRUCTION SCREENING

INSTRUCTIONS:

1. Please complete this form with as much information as you can easily provide. At minimum, please complete fields denoted by an asterisk (*).
2. Fax to Alliant Energy-IPL, Attn: Commercial New Construction Program at (319) 786-4146, or mail to Alliant Energy-IPL, Commercial New Construction Program, CR GO-8, 200 First Street SE, P.O. Box 351, Cedar Rapids, IA 52406-0351.
3. For more information, contact your account manager, call 1-866-ALLIANT or visit www.alliantenergy.com/newconstruction.

| FORM COMPLETED BY | | | | |
|---|---|--------------------------|--------------------------|---------------------------------|
| Name* | Project Role* <input type="checkbox"/> Owner <input type="checkbox"/> Design Team <input type="checkbox"/> Other | | | Phone No.* () |
| PROJECT INFORMATION | | | | |
| Company Name* | | Primary Contact | | |
| E-mail Address | | Phone No. () | | |
| Project Name* | | Building Type* | | |
| Project Location - Address | | City* | State Iowa | ZIP |
| Construction Type* <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Retrofit/Renovation | | | Project Sq. Footage* | |
| Project Electric Service Provided By:* <input type="checkbox"/> Alliant Energy-IPL <input type="checkbox"/> Other (specify) _____ | | | | |
| Project Gas Service Provided By:* <input type="checkbox"/> Alliant Energy-IPL <input type="checkbox"/> Other (specify) _____ | | | | |
| IPL Account Manager (if known) | | | | |
| DESIGN TEAM INFORMATION | | | | |
| Architectural Firm | | | | |
| Firm Name* | Contact Name* | E-mail | Phone No.* () | |
| Mechanical Engineering Firm | | | | |
| Firm Name | Contact Name | E-mail | Phone No. () | |
| Electrical Engineering Firm | | | | |
| Firm Name | Contact Name | E-mail | Phone No. () | |
| Owner's Representative | | | | |
| Firm Name | Contact Name | E-mail | Phone No. () | |
| Design/Build Firm | | | | |
| Firm Name | Contact Name | E-mail | Phone No. () | |
| PROJECT SCHEDULE | | | | |
| | Schematic Design* | Design Development* | Construction Documents* | Construction* |
| Start Date (mm/yy) | | | | |
| Finish Date (mm/yy) | | | | |
| DESIGN CONSIDERATION OPTIONS <i>(willingness to consider energy-saving alternatives)</i> | | | | |
| | Very | Somewhat | Not at all | |
| Orientation/building layout | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Daylighting |
| Glazing type and window layout | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Envelope alternatives |
| Lighting controls | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Lighting design |
| HVAC efficiency | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Type of HVAC system |
| Outside air control systems | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Other items you are considering |
| Owner's Signature | | | Date Signed | |
| FOR ALLIANT ENERGY-IPL USE | | | | |
| Date Received | | | Date Approved | |

Note: If you participate in this program, measures included in your project will be ineligible for other Alliant Energy-IPL energy-efficiency programs.