ANAEROBIC DIGESTER - IOWA
2012 REBATE CLAIM FORM

INSTRUCTIONS: Fill out form completely, sign and include receipts. Failure to complete the form and provide documentation could result in claim being sent back or denied.

Alliant Energy is the trade name of Interstate Power and Light Company (IPL). The utility providing the rebates is Interstate Power and Light Company (IPL), an Alliant Energy company, hereinafter referred to as Alliant Energy. Project must be completed within 18 months of date of online screening.

Questions about the forms or need assistance with the forms? Call our Energy Efficiency Hotline at 1-866-ALLIANT (1-866-255-4268).

CUSTOMER INFORMATION

Person or Company Receiving Rebate			Mailing Address *(if different than installation address)*		
Installation Address			City	State	Zip
City	State	Zip	Primary Contact Person for Claims Questions		
Alliant Energy Account No. at Installation Address *(if available)* ___ – ___ – ___ – ___ – ___			Email address		
Year Facility Built *(required)*			Phone No. ( )		

Non-Residential Building Type (check only one)

- ❒ **Type #1** Convenience Store, Grocery, Restaurant
- ❒ **Type #2** Apt./Condo (3+ Units), Hospital, Lodging
- ❒ **Type #3** Church, Health Clinic, Warehouse, Other Commercial
- ❒ **Type #4** Education, Office, Retail
- ❒ **Type #5** Industrial
- ❒ **Type #6** Agriculture, Farm Building

Tax Status

❒ **Sole-Proprietor*** ❒ **Partnership*** ❒ Government ❒ Non-Profit ❒ Corporation ❒ Religious

***If sole-proprietor or partnership, you must provide a copy of your W-9 showing the Social Security or Federal Tax ID number and the associated legal name listed on the document. To comply with IRS regulations, you must provide a copy of your W-9 each time you submit a claim.**

Utility Source ☒ IPL Electricity (Must be an IPL electric non-residential customer to qualify).

APPLICANT/SITE INFORMATION

Farm's Federal Tax I.D. or Owner's Social Security No.

SYSTEM DESIGNER INFORMATION

Name of Company that Designed and Engineered the Digester System			
Company Address	City	State	ZIP
Contact Name		Contact Phone No. ( )	

INSTALLATION CONTRACTOR INFORMATION

Company Name		Lead Installer's Name	
Mailing Address		City	State	ZIP
Phone No. ( )	Email		

I certify that all equipment and installation information provided on this application is correct and accurate.

Installer Signature: _____ Date: _____

QUALIFICATIONS *(must complete steps 1 through 3 before construction begins)*

			For Internal Use Only
1. Online Screening at ***alliantenergy.com/renewablecalculator***	❒ Yes	❒ No	Completion Date: _____
2. Business Energy Assessment	❒ Yes	❒ No	Completion Date: _____
3. Renewable system site assessment *(customer responsible for fees)*	❒ Yes	❒ No	Completion Date: _____
4. Distributed Generation Interconnection Request *(customer responsible for fees)* Information available at ***alliantenergy.com/sellmypower***	❒ Yes	❒ No	Completion Date: _____

PROJECT DESCRIPTION

Brief Description of Farm Operation *(years in business, breed, herd size, number of acres, etc.)*

Type of Digester *(mixed, plug-flow, fixed film, other, system components)*

Type and Volume of Feedstock Entering Digester *(solid, liquid, gallons/day)*

How Will the Waste Heat be Utilized *(water heating, space heating)*

Installation Date	Project Cost *(attach invoices)*

ELECTRICITY GENERATION INFORMATION

Describe the Renewable Energy System Installed *(internal combustion engine or micro turbine, quantity, manufacturer, model, kW power output rating)*

Electricity Production Date	Nameplate Capacity (MW)	Estimated Annual Electricity Production *(kWh or MWh)*

Estimated Percentage of Farm's Current Electric Usage to be Offset by the Digester

Manufacturer's Equipment Descriptions/Literature and Process Flow Diagram attached?

❒ Yes

INTERNAL USE ONLY

Interconnection Application Received Date	Interconnection Agreement Completion Date

REBATE

Rebate is 50% of project cost up to a maximum of $200,000.

$_____ x 50% = $_____ (Box A)
Project Cost

Rebate Maximum = $ 200,000 (Box B)

Review boxes A and B. Enter the lesser amount in Box C.

$_____ (Box C)
Box C is your Rebate

REMEMBER TO SIGN THE NEXT PAGE

Additional information continued →

SPECIFIC TERMS AND CONDITIONS

A. Rebate is limited to the lesser of 50% of project cost or $200,000.
B. Fuel source must be 100% renewable.
C. Distributed Generation Interconnect Request Form, Application fee and Interconnection Agreement must be completed before electric production begins. See ***alliantenergy.com/sellmypower***.
D. The installation of an isolation device or disconnect switch may be required.
E. To be eligible for a renewable rebate, construction of the renewable system must begin after 7/1/2010.
F. Projects must demonstrate permanency and sustainability of savings.
G. An energy assessment and site assessment must be completed before construction begins.

GENERAL TERMS AND CONDITIONS

IMPORTANT: Before completing and signing the form, please read the General Terms and Conditions located in the rebate booklets, or at ***alliantenergy.com/terms***.

RISK OF LOSS, INDEMNITY AND DISCLAIMER

WHEREAS, while Alliant Energy may have entered into a Dealer Participation Agreement with Dealer on the reverse side of this document, any transaction for the purchase and/or installation of equipment pursuant to this rebate claim is between the Participating Dealer and the Customer identified on the reverse side of this document. As a signatory to this document, you understand that Alliant Energy is not a party to such transaction and neither the Participating Dealer nor the Customer shall have any recourse to Alliant Energy related to such transaction.

NOW, THEREFORE, for good and valuable consideration, which is hereby acknowledged, by your signature you agree as follows:

1. **RISK OF LOSS; INDEMNITY.** Customer and Dealer hereby agree to assume all risk of loss associated with the equipment and to defend, indemnify and hold harmless Alliant Energy, its agents, officers, directors, employees and assigns, and to release same from any and all liabilities, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage or injury, including death, injury to persons or property, that may be sustained by Customer, Dealer or a third party in connection with the installation, use or possession of the equipment or performance of the services, or relating in any way to the Dealer Participation Agreement or any rebate claim.

2. **DISCLAIMER.** Customer acknowledges, warrants and agrees that the services, materials and equipment have been provided by a third party, are suitable for its purposes and meet the criteria for a rebate hereunder. Any warranty on the equipment or services shall be provided through the equipment manufacturer or supplier or service provider. *Customer specifically acknowledges that Alliant Energy makes no representations or warranties of any kind, express or implied, as to the merchantability, fitness for a particular purpose, design or condition of the equipment or services.* The sum total liability of Alliant Energy to Customer and Dealer with respect to any claim or liability arising out of or related to this rebate claim, whether in contract, tort (including negligence), or other legal theory shall not exceed the amount of the rebate. Alliant Energy shall not in any event be liable for special, indirect, incidental or consequential damages, including but not limited to, loss of profits or revenue, loss of use of site systems or property, lack of savings, cost of capital, or claims by Customer or Dealer for damage to property or injury to persons including any third party.

3. Customer and Dealer further acknowledge that Alliant Energy will not provide insurance coverage for the Customer or Dealer, and that it is the Customer and Dealer's responsibility to procure insurance coverage against any hazards relating to the equipment to protect persons and property.

CUSTOMER SIGNATURE AND CERTIFICATION		
I certify that I have purchased the equipment described in this form and that it has been installed at the service address indicated. I agree to the terms and conditions associated with this form. ❒ Customer installed equipment ❒ Dealer installed equipment (Dealer/Contractor must fill out Dealer Contractor or Store box below)		
Customer Signature	Date	Do you want to help local families in need and donate your rebate to Alliant Energy's *Hometown Care Energy Fund?* ❒ Yes ❒ No

FOR DEALER, CONTRACTOR OR STORE ONLY			
Dealer/Contractor/Store Name	Dealer ID (if applicable)	Phone No. ( )	
Address	City	State	ZIP
I certify that all equipment and installation information provided on this application is correct and accurate. Dealer/Contractor Signature: _____ Date: _____			

Before you turn in your form:

❒ Fill out the form completely.
❒ Attach a copy of the sales receipt or invoice. Circle the equipment on the receipt.
❒ Include documentation listed in the instructions.
❒ Sign the customer Signature and Certification section. If a dealer installed the equipment, the dealer must sign the Dealer, Contractor or Store section.
❒ We recommend that you mail the completed form(s), receipt(s), and required documentation within 90 days of installation.

Mail completed forms to:

ENERGY EFFICIENCY PROGRAMS
Alliant Energy
P.O. Box 351
Cedar Rapids, IA 52406-0351

FAX: (319) 786-4746

Please choose one option.
To avoid delays, do not fax and mail your form.

Questions? Call 1-800-972-5325 or visit us online at *alliantenergy.com/sellmypower.*