



## COMMERCIAL AND INDUSTRIAL AUDIT REQUEST

### INSTRUCTIONS:

1. KEY ACCOUNT MANAGER: Complete Section 1 - Alliant Energy Contact Information.
2. CUSTOMER: Print or type your responses to Section 2 - Customer/Contact Information and Facility Description. (If completing the form electronically, use the "Tab" key to fill in all blanks).
3. CUSTOMER: Send completed form to your Key Account Manager via e mail, mail, or fax.
4. KEY ACCOUNT MANAGER: Complete Section 3 - Project Information (Internal Use Only). Enter the project in *iAvenue*, and forward this form, as well as customer usage history to [kimtice@alliantenergy.com](mailto:kimtice@alliantenergy.com).

SECTION 1 - ALLIANT ENERGY CONTACT INFORMATION	
Alliant Energy Key Account Manager Name	Email Address

SECTION 2 - CUSTOMER / CONTACT INFORMATION			
Customer / Company Name	Phone No. (                    )		
Address of Facility to be Audited	City	State	Zip
Mailing Address	City	State	Zip
Customer Contact Name	Contact Email Address	Contact Phone No. (                    )	
Contact Signature*			Date

\*Electronic signature accepted via: Email, or Industry-standard acceptable electronic signature programs, such as: Adobe, DocuSign, Topaz

FACILITY DESCRIPTION	
Provide a description of the facility and major energy end-using systems/processes.	
Facility Hours of Operation	Is there any planned new construction or facility expansion? <input type="checkbox"/> Yes <input type="checkbox"/> No
Primary Heating Fuel	Primary Cooling Fuel                    Building Sq. Ft.

SECTION 3 - PROJECT INFORMATION (INTERNAL USE ONLY)	
Customer Name in iAvenue	Project Name in iAvenue