



CUSTOM REBATE PRE-APPROVAL APPLICATION
Custom Rebates

Submission of this application does not guarantee payment.
Alliant Energy reserves the right to modify or end this rebate program at any time without prior notice.
Information concerning custom rebate limits or other qualifications can be found at alliantenergy.com.

CUSTOMER INSTRUCTIONS:

1. Print or type your responses to Customer Information, Incentive Information, Project Description, and Customer Contact (if completing the form electronically, use the "Tab" key to fill all blanks.)
2. Send completed form with any drawings or specification documents to your Key Account Manager via email.
3. The Custom Rebate Pre-Approved Application must be received by Alliant Energy prior to equipment purchase and installation.'
4. Attach a completed W-9 form. A W-9 form is required before any customer rebate application will be approved.

Next Steps:

- Alliant Energy Technical Support will review potential energy savings with the customer contact identified below.
- Data may need to be collected to calculate the energy savings and project rebate.
- The net payback for the project must be between two years and fifteen years to qualify for a custom rebate.
- All funding is available on a first-come, first served basis and is subject to budget restrictions.
- A customer incentive proposal will be sent to the customer for review and signature. The estimated incentive cannot be guaranteed until 6 months prior to the expected project completion date and will be subject to verification after the project is installed.
- Following installation of the equipment, Customer will be required to sign a Project Completion Form and provide **invoices and receipts** for all project costs.
- Allow 6-8 weeks for check processing after installation of energy efficient equipment and completion of all required documents.

Please fill form out completely. Failure to complete the form and provide documentation will result in application being sent back or denied.

KEY ACCOUNT MANAGER CONTACT INFORMATION	
Key Account Manager Name	Email Address

CUSTOMER INFORMATION			
Customer Name (Company)			Phone No. ()
Installation Address	City	State	ZIP
Mailing Address	City	State	ZIP

REBATE INFORMATION		
Rebate Paid To* (if different than above)	Address	
City	State	ZIP

*Rebate can only be paid to the entity investing in the energy efficient equipment.

PROJECT DESCRIPTION AND NAME
Provide a detailed description of the project including all technologies to be installed (attach drawings and specification documents if needed):

Project Name	Project Estimated Completion Date	Project Start Date NOTE: If the project will begin more than 6 months from application date, please enter estimated start date. If the project start date is 12 months past initial application, re-filing may be required.	
Technology Hrs. of Operation	Facility Hrs. of Operation	Estimated Project Cost	
Is this project new construction and/or facility expansion? <input type="checkbox"/> Yes <input type="checkbox"/> No	Primary Heating Fuel	Primary Cooling Fuel	Building Sq. Ft.

CUSTOMER CONTACT			
Customer Contact Name	Contact Email Address	Phone No. ()	Fax No. ()
Contact Signature*	Title	Date	

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

AUTHORIZED CONTRACTOR	
Contact	Company Name
Email Address	Phone No. ()