

APPLICATION

Agriculture Energy Audit



NYSERDA

APPLICANT INFORMATION

Applicant / Farm Name _____ Contact Name and Title _____

Farm Address _____

City _____ State **NY** Zip _____ County _____

Primary Phone Number (include area code) _____ Email _____

Secondary Phone Number (include area code) _____ Fax _____

Best time to call: Morning Afternoon Evening

Correspondence Address (if different than Farm Address) _____

Check appropriate box:

- Dairy Orchard Poultry/eggs Greenhouse Vegetable
 Hog Vineyard Grain dryer Other _____

Farm size (For example: number of milking cows, acres of greenhouse, etc. Please label units.) _____

Annual Production (Please label units) _____ Number of employees _____

Electric Utility Company _____

Do you pay a System Benefits Charge (SBC) on your Electric utility bill? Yes No

Natural Gas Utility Company _____

If you are already working with a Flexible Technical Assistance (FlexTech) Consultant, list consultant's name. (if you are not already working with a Consultant, one will be assigned) _____

Audit level of interest:

- Comprehensive:** The FlexTech Consultant will visit the farm and provide a detailed energy audit with calculated evaluations of appropriate energy conservation measures including simple payback. The deliverable is an energy audit report that meets ANSI/ASABE S612 standards.
- Targeted:** The FlexTech Consultant will conduct a site visit focused on a specific system or measure, which could include renewable energy, with a more detailed analysis. The deliverable is a system-specific energy analysis report.
- I would like someone to call me to discuss what level is appropriate for my farm

AGREEMENT TO TERMS, CONDITIONS, AND CERTIFICATION

I, the Applicant, certify that the farm named on this application is interested in receiving an energy audit and request that NYSERDA set aside funds to contribute 100%, or \$2,500 for Comprehensive; or up to \$6,000 for Targeted, towards the allowable NYSERDA consultant fees. NYSERDA's contribution will be paid directly to the Consultant, provided the work is acceptable to the Applicant and NYSERDA.

I, the Applicant, understand that NYSERDA does not provide any endorsement of the Consultant's capabilities to provide services outside of the audit's Scope of Work to be conducted pursuant to this application. The Applicant acknowledges that neither NYSERDA nor its Consultant is responsible for assuring that the design, engineering, or installation of any recommendation of the technical service is proper or complies with any particular laws (including patent laws), codes, or industry standards. NYSERDA does not make any representations of any kind regarding the results to be achieved or the adequacy or safety of any recommendation.

NYSERDA does not endorse, guarantee, or warrant any particular manufacturer or product and NYSERDA provides no warranties, expressed or implied for any product or service.

Applications will be processed in the order received until program funds are fully committed. The Applicant certifies that this Facility is a customer of a New York State investor-owned utility and the System Benefits Charge (SBC) is paid.

I certify that I am an authorized signatory for the Applicant/Farm.

X

Authorized Applicant Signature

Date

Name and Title (please print)

Please mail application to:

NYSERDA

Attn: Agriculture Energy Audit Program Administrator

17 Columbia Circle

Albany, NY 12203-6399

OR

Submit via email

For questions or assistance, please call 1-800-732-1399.