



Case No.: ____-____-EL-EEC

Mercantile Customer: The Kroger Company

Electric Utility: Duke Energy

**Program Title or
Description:** Landscape Lighting (Grooms Rd)

Rule 4901:1-39-05(F), Ohio Administrative Code (O.A.C.), permits a mercantile customer to file, either individually or jointly with an electric utility, an application to commit the customer's existing demand reduction, demand response, and energy efficiency programs for integration with the electric utility's programs. The following application form is to be used by mercantile customers, either individually or jointly with their electric utility, to apply for commitment of such programs in accordance with the Commission's pilot program established in Case No. [10-834-EL-POR](#)

Completed applications requesting the cash rebate reasonable arrangement option (Option 1) in lieu of an exemption from the electric utility's energy efficiency and demand reduction (EEDR) rider will be automatically approved on the sixty-first calendar day after filing, unless the Commission, or an attorney examiner, suspends or denies the application prior to that time. Completed applications requesting the exemption from the EEDR rider (Option 2) will also qualify for the 60-day automatic approval so long as the exemption period does not exceed 24 months. Rider exemptions for periods of more than 24 months will be reviewed by the Commission Staff and are only approved up the issuance of a Commission order.

Complete a separate application for each customer program. Projects undertaken by a customer as a single program at a single location or at various locations within the same service territory should be submitted together as a single program filing, when possible. Check all boxes that are applicable to your program. For each box checked, be sure to complete all subparts of the question, and provide all requested additional information. Submittal of incomplete applications may result in a suspension of the automatic approval process or denial of the application.

Any confidential or trade secret information may be submitted to Staff on disc or via email at ee-pdr@puc.state.oh.us.

Section 1: Mercantile Customer Information

Name: **The Kroger Co.**

Principal address: **1014 Vine Street, Cincinnati, OH 45202**

Address of facility for which this energy efficiency program applies:

11450 Grooms Rd Cincinnati, Ohio 45242

Name and telephone number for responses to questions:

Grady Reid Jr 513-287-1038

Electricity use by the customer (check the box(es) that apply):

- ☒ The customer uses more than seven hundred thousand kilowatt hours per year at the above facility. (**Refer to Appendix A for documentation**).
- ☐ The customer is part of a national account involving multiple facilities in one or more states. (Please attach documentation.)

Section 2: Application Information

A) The customer is filing this application (choose which applies):

- ☐ Individually, without electric utility participation.
- ☒ **Jointly with the electric utility..**

B) The electric utility is: **Duke Energy**

C) The customer is offering to commit (check any that apply):

- ☒ Energy savings from the customer's energy efficiency program. (Complete Sections 3, 5, 6, and 7.)
- ☐ Capacity savings from the customer's demand response/demand reduction program. (Complete Sections 4, 5, 6, and 7.)
- ☐ Both the energy savings and the capacity savings from the customer's energy efficiency program. (Complete all sections of the Application.)

Section 3: Energy Efficiency Programs

A) The customer's energy efficiency program involves (check those that apply):

- ✓ Early replacement of fully functioning equipment with new equipment. (Provide the date on which the customer replaced fully functioning equipment, and the date on which the customer would have replaced such equipment if it had not been replaced early. Please include a brief explanation for how the customer determined this future replacement date (or, if not known, please explain why this is not known)).

Customer completed retrofit in October 2011 using energy efficient lighting

- ☐ Installation of new equipment to replace equipment that needed to be replaced. The customer installed new equipment on the following date(s): _____.
- ☐ Installation of new equipment for new construction or facility expansion. The customer installed new equipment on the following date(s): _____.
- ☐ Behavioral or operational improvement.

B) Energy savings achieved/to be achieved by the energy efficiency program:

- 1) If you checked the box indicating that the project involves the early replacement of fully functioning equipment replaced with new equipment, then calculate the annual savings [(kWh used by the original equipment) - (kWh used by new equipment) = (kWh per year saved)]. Please attach your calculations and record the results below:

Annual savings: **21,191 kWh (Refer to Appendix B for calculations and supporting documents).**

- 2) If you checked the box indicating that the customer installed new equipment to replace equipment that needed to be replaced, then calculate the annual savings [(kWh used by less efficient new equipment) - (kWh used by the higher efficiency new equipment) = (kWh per year saved)]. Please attach your calculations and record the results below:

Annual savings: _____kWh

Please describe any less efficient new equipment that was rejected in favor

of the more efficient new equipment.

- 3) If you checked the box indicating that the project involves equipment for new construction or facility expansion, then calculate the annual savings [(kWh used by less efficient new equipment) - (kWh used by higher efficiency new equipment) = (kWh per year saved)]. Please attach your calculations and record the results below:

Annual savings: _____kWh

Please describe the less efficient new equipment that was rejected in favor of the more efficient new equipment.

- 4) If you checked the box indicating that the project involves behavioral or operational improvements, provide a description of how the annual savings were determined.

Section 4: Demand Reduction/Demand Response Programs

A) The customer's program involves (check the one that applies):

- ☐ Coincident peak-demand savings from the customer's energy efficiency program.
- ☐ Actual peak-demand reduction. (Attach a description and documentation of the peak-demand reduction.)
- ☐ Potential peak-demand reduction (check the one that applies):
 - ☐ The customer's peak-demand reduction program meets the requirements to be counted as a capacity resource under a tariff of a regional transmission organization (RTO) approved by the Federal Energy Regulatory Commission.
 - ☐ The customer's peak-demand reduction program meets the requirements to be counted as a capacity resource under a program that is equivalent to an RTO program, which has been approved by the Public Utilities Commission of Ohio.

B) On what date did the customer initiate its demand reduction program?

C) What is the peak demand reduction achieved or capable of being achieved (show calculations through which this was determined):

_____ kW

Section 5: Request for Cash Rebate Reasonable Arrangement (Option 1) or Exemption from Rider (Option 2)

Under this section, check the box that applies and fill in all blanks relating to that choice.

Note: If Option 2 is selected, the application will not qualify for the 60-day automatic approval. All applications, however, will be considered on a timely basis by the Commission.

A) The customer is applying for:

☒ **Option 1: A cash rebate reasonable arrangement.**

OR

☐ Option 2: An exemption from the energy efficiency cost recovery mechanism implemented by the electric utility.

OR

☐ Commitment payment

B) The value of the option that the customer is seeking is:

Option 1: A cash rebate reasonable arrangement, which is the lesser of (show both amounts):

☒ A cash rebate of **450.00. Refer to Appendix C for documentation.** (Rebate shall not exceed 50% project cost. Attach documentation showing the methodology used to determine the cash rebate value and calculations showing how this payment amount was determined.)

Option 2: An exemption from payment of the electric utility's energy efficiency/peak demand reduction rider.

☐ An exemption from payment of the electric utility's energy efficiency/peak demand reduction rider for ____ months (not to exceed 24 months). (Attach calculations showing how this time period was determined.)

OR

☐ A commitment payment valued at no more than

\$_____. (Attach documentation and calculations showing how this payment amount was determined.)

OR

- ☐ Ongoing exemption from payment of the electric utility's energy efficiency/peak demand reduction rider for an initial period of 24 months because this program is part of the customer's ongoing efficiency program. (Attach documentation that establishes the ongoing nature of the program.) In order to continue the exemption beyond the initial 24 month period, the customer will need to provide a future application establishing additional energy savings and the continuance of the organization's energy efficiency program.)

Section 6: Cost Effectiveness

The program is cost effective because it has a benefit/cost ratio greater than 1 using the (choose which applies):

- ☐ Total Resource Cost (TRC) Test. The calculated TRC value is: _____ (Continue to Subsection 1, then skip Subsection 2)
- ✓ Utility Cost Test (UCT). The calculated UCT value is **9.32** (Skip to Subsection 2.) **Refer to Appendix D for calculations and supporting documents.**

Subsection 1: TRC Test Used (please fill in all blanks).

The TRC value of the program is calculated by dividing the value of our avoided supply costs (generation capacity, energy, and any transmission or distribution) by the sum of our program overhead and installation costs and any incremental measure costs paid by either the customer or the electric utility.

The electric utility's avoided supply costs were _____.

Our program costs were _____.

The incremental measure costs were _____.

Subsection 2: UCT Used (please fill in all blanks).

We calculated the UCT value of our program by dividing the value of our avoided supply costs (capacity and energy) by the costs to our electric utility (including administrative costs and incentives paid or rider exemption costs) to obtain our commitment.

Our avoided supply costs were **\$7418.00**.

The utility's program costs were **\$346.00**.

The utility's incentive costs/rebate costs were **\$450.00**.

Refer to Appendix D for calculations and supporting documents.

Section 7: Additional Information

Please attach the following supporting documentation to this application:

Narrative description of the program including, but not limited to, make, model, and year of any installed and replaced equipment.

A copy of the formal declaration or agreement that commits the program or measure to the electric utility, including:

- 1) any confidentiality requirements associated with the agreement;
- 2) a description of any consequences of noncompliance with the terms of the commitment;
- 3) a description of coordination requirements between the customer and the electric utility with regard to peak demand reduction;
- 4) permission by the customer to the electric utility and Commission staff and consultants to measure and verify energy savings and/or peak-demand reductions resulting from your program; and,
- 5) a commitment by the customer to provide an annual report on your energy savings and electric utility peak-demand reductions achieved.

Refer to Offer Letter following this application

A description of all methodologies, protocols, and practices used or proposed to be used in measuring and verifying program results. Additionally, identify and explain all deviations from any program measurement and verification guidelines that may be published by the Commission.



DUKE ENERGY CORPORATION
Mercantile Self Direct Program
139 East Fourth Street
Cincinnati, OH 45202
513 629 5572 fax

March 27, 2012

Ms Tracy McDonald
The Kroger Company
1014 Vine Street
Cincinnati, Ohio 45202

Subject: Your Application for a Duke Energy Mercantile Self-Direct Rebate

Dear Ms. McDonald:

Thank you for your Duke Energy Mercantile Self Direct rebate application. As noted in the Energy Conservation Measure (ECM) chart on page two, a total rebate of \$450.00 has been proposed for your lighting project completed in the 2011 calendar year. All Self Direct Rebates are contingent upon approval by the Public Utilities Commission of Ohio (PUCO).

At your earliest convenience, please indicate if you accept this rebate by

- providing your signature on page two
- completing the PUCO-required affidavit on page three.

Please return the documents to my attention via fax at 513-629-5572 or e-mail to SelfDirect@Duke-Energy.com. Upon receipt, Duke Energy will submit the necessary documentation to PUCO. Following PUCO's approval, Duke Energy will remit payment.

At Duke Energy, we value your business and look forward to working with you on this and future energy efficiency projects. We hope you will consider our Smart \$aver® incentives, when applicable. Please contact me if you have any questions.

Sincerely,

Grady Reid, Jr
Product Manager
Mercantile Self Direct Rebates

cc: Deanna Bowden, Duke Energy
Rob Jung, WECC

Please indicate your response to this rebate offer within 30 days of receipt.

☒ Rebate is accepted.

☐ Rebate is declined.

By accepting this rebate, The Kroger Company affirms its intention to commit and integrate the energy efficiency projects listed on the following pages into Duke Energy's peak demand reduction, demand response and/or energy efficiency programs.

Additionally, The Kroger Company also agrees to serve as joint applicant in any future filings necessary to secure approval of this arrangement as required by PUCO and to comply with any information and reporting requirements imposed by rule or as part of that approval.

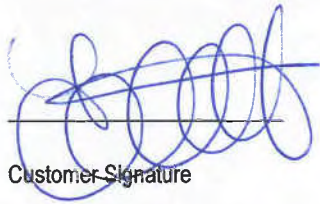
Finally, The Kroger Company affirms that all application information submitted to Duke Energy pursuant to this rebate offer is true and accurate. Information in question would include, but not be limited to, project scope, equipment specifications, equipment operational details, project costs, project completion dates, and the quantity of energy conservation measures installed.

If rebate is accepted, will you use the monies to fund future energy efficiency and/or demand reduction projects?

☒ YES

☐ NO

If rebate is declined, please indicate reason (optional):



Customer Signature

Tracy MacDonald

Printed Name

4/9/12

Date

Proposed Rebate Amounts

Measure ID	Energy Conservation Measure (ECM)	Proposed Rebate Amount
ECM-1	Replace 1050 Watt Metal Halide with 300 Watt Induction Lights (Qty 6)	\$450.00
Total		\$450.00



Public Utilities Commission

Application to Commit
Energy Efficiency/Peak
Demand Reduction
Programs
(Mercantile Customers
Only)

Case No.: ____ - ____ -EL-EEC

State of Ohio :

Tracy MacDonald, Affiant, being duly sworn according to law, deposes and says that:

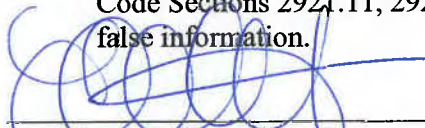
1. I am the duly authorized representative of:

The Kroger Co.

[insert customer or EDU company name and any applicable name(s) doing business as]

2. I have personally examined all the information contained in the foregoing application, including any exhibits and attachments. Based upon my examination and inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete.

3. I am aware of fines and penalties which may be imposed under Ohio Revised Code Sections 2921.11, 2921.31, 4903.02, 4903.03, and 4903.99 for submitting false information.



Signature of Affiant & Title

Sworn and subscribed before me this 9th day of April,
2012 Month/Year



Signature of official administering oath

Denis E. George

Print Name and Title

DENIS E. GEORGE, Attorney at Law
Notary Public, State of Ohio
My Commission has no expiration date
Section 147.03 O. R. C.

My commission expires on _____



Appendix A -Billing History

16200675 01

KRO-014-351

9939 MONTGOMERY RD

CINCINNATI, OH 45242

Date	Days	Actual KWH
10/21/2011	29	208,405
9/22/2011	30	245,585
8/23/2011	29	270,279
7/25/2011	32	301,364
6/23/2011	30	268,157
5/24/2011	29	208,607
4/25/2011	32	89,518
3/24/2011	29	24,872
2/23/2011	29	81,906
1/25/2011	34	251,542
12/22/2010	33	241,025
11/19/2010	29	221,223
Annual Total		2,412,483

Note: The above history reflects a single store. Other billing histories are excluded for brevity.

Appendix B – Kroger Landscape Lighting Energy Savings Achieved

Self Direct Custom

As-Found Equipment	Equipment Wattage	Annual Operating Hours	Annual kWh	New Equipment	Equipment Wattage	Annual Operating Hours	Annual kWh	Energy Savings (kWh each)	Demand Savings (kW each)
Metal Halide	1050Watt	4300	4515	Induction	300Watt	4300	1290	3225	-

Quantity	Total Energy Savings (kWh) AT THE METER ¹	Total Demand Savings (kW) AT THE METER
6	19,725	-

Inclusion of 7.43% line losses yields **21,191 kWh** saved at the plant. This value also includes insignificant rounding error due to the mode of analysis used to model the project in DSMore software.

Note, these fixtures operate overnight and do not affect summer coincident peak demand.

Appendix C Kroger Landscape Lighting - Cash Rebate Calculation

Measure	Quantity	Commitment Payment/Rebate Rate	Cash Rebate Each	Total Cash Rebate
Replace 1050 Watt Metal Halide with 300 Watt Induction Lights	6	50% of incentive that would be offered by the Smart \$aver Custom program	\$ 75.00	\$ 450.00

Appendix D Kroger Landscape Lighting -UCT Value

Lighting

Measure	Total Avoided Cost	Program Cost	Incentive	Quantity	Measure UCT
300 Watt Induction Lights	\$1,236	\$58	\$75	6	9.32
Totals	\$7,418	\$346	\$450	6	

Total Avoided Supply Costs	\$7,418	UCT	9.32
Total Program Costs	\$346		
Total Incentive	\$450		

Ohio Mercantile Self Direct Program

Application Guide & Cover Sheet

Questions? Call 1-866-380-9580 or visit www.duke-energy.com.

Email this form along with completed Mercantile Self Direct Prescriptive or Custom applications, proof of payment, energy savings calculations and spec sheets to SelfDirect@Duke-Energy.com. You may also fax to 1-513-629-5572.

Mercantile customers, defined as using at least 700,000 kWh annually are eligible for the Mercantile Self Direct program. Please indicate mercantile qualification:

- ☒ a single Duke Energy Ohio account
☐ multiple accounts in Ohio (energy usage with other utilities may be counted toward the total)

Please list Duke Energy account numbers below (attach listing of multiple accounts and/or billing history for other utilities as required):

Account Number	Annual Usage	Account Number	Annual Usage
32500857020	5,665,182 kWh		

Self Direct rebates are available for completed Custom projects that have not previously received a Duke Energy Smart \$aver® Custom Incentive. Self Direct incentives are applicable to Prescriptive measures that were installed more than 90 days prior to submission to Duke Energy and have not previously received a Duke Energy Prescriptive rebate.

Self Direct Program requirements dictate that certain projects that may be Prescriptive in nature under the Smart \$aver program must be evaluated using the Custom process. Use the table on page two as a guide to determine which Self Direct program fits your project(s). Apply for Self Direct projects using the appropriate application forms in conjunction with this cover sheet. Where Mercantile Self Direct Prescriptive applications are listed, please refer to the measure list on that application. If your measure is not listed, you may be eligible for a Self Direct Custom rebate. Self Direct Custom applications, like Smart \$aver Custom applications, should include detailed analysis of pre-project and post-project energy usage and project costs. Please indicate which type of rebate applications are included in the table provided on page two.

Please check each box to indicate completion of the following program requirements:

<input checked="" type="checkbox"/> All sections of appropriate application(s) are completed	<input checked="" type="checkbox"/> Proof of payment.*	<input checked="" type="checkbox"/> Manufacturer's Spec sheets	<input checked="" type="checkbox"/> Energy model/calculations and detailed inputs for Custom applications
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* If a single payment record is intended to demonstrate the costs of both Prescriptive & Custom projects, please include an additional document with an estimated breakout of costs for each Prescriptive and Custom energy conservation measure.

Application Type	Replaced equipment at end of lifetime or because equipment failed**	Replaced fully operational equipment to improve efficiency***	New Construction
Lighting	MSD Custom Part 1 <input type="checkbox"/> Custom Lighting Worksheet <input type="checkbox"/>	MSD Prescriptive Lighting <input type="checkbox"/>	MSD Prescriptive Lighting <input type="checkbox"/>
		MSD Custom Part 1 <input checked="" type="checkbox"/> Custom Lighting Worksheet <input checked="" type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> Custom Lighting Worksheet <input type="checkbox"/>
Heating & Cooling	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>	MSD Prescriptive Heating & Cooling <input type="checkbox"/>
			MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>
Window Films, Programmable Thermostats, & Guest Room Energy Management Systems	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General and/or EMS Worksheet(s) <input type="checkbox"/>	MSD Prescriptive Heating & Cooling <input type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General and/or EMS Worksheet(s) <input type="checkbox"/>
Chillers & Thermal Storage	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>	MSD Prescriptive Chillers & Thermal Storage <input type="checkbox"/>
			MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>
Motors & Pumps	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>	MSD Prescriptive Motors, Pumps & Drives <input type="checkbox"/>
			MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>
VFDs	Not Applicable	MSD Prescriptive Motors, Pumps & Drives <input type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> MSD Custom VFD Worksheet <input type="checkbox"/>
		MSD Custom Part 1 <input type="checkbox"/> MSD Custom VFD Worksheet <input type="checkbox"/>	
Food Service	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>	MSD Prescriptive Food Service <input type="checkbox"/>
			MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>
Air Compressors	MSD Custom Part 1 <input type="checkbox"/> MSD Custom Compressed Air Worksheet <input type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> MSD Custom Compressed Air Worksheet <input type="checkbox"/>	MSD Prescriptive Process <input type="checkbox"/>
			MSD Custom Part 1 <input type="checkbox"/> MSD Custom Compressed Air Worksheet <input type="checkbox"/>
Process	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>	MSD Prescriptive Process <input type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>
		MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>	
Energy Management Systems	MSD Custom Part 1 <input type="checkbox"/> MSD Custom EMS Worksheet <input type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> MSD Custom EMS Worksheet <input type="checkbox"/>	MSD Custom Part 1 <input type="checkbox"/> MSD Custom EMS Worksheet <input type="checkbox"/>
Chiller Tune-ups	MSD Prescriptive Chiller Tune-ups <input type="checkbox"/>		
Behavioral*** & No/Low Cost	MSD Custom Part 1 <input type="checkbox"/> MSD Custom General Worksheet <input type="checkbox"/>		

** Under the Self Direct program, failed equipment and equipment at the end of its useful life are evaluated differently than early replacement of fully functioning equipment. **All equipment replacements due to failure or old age will be evaluated via the Custom program.**

*** Please ensure that you include the age of the replaced equipment for measures classified as "Early Replacement" in your application as well as the estimated date that you would have otherwise replaced the existing equipment if you had not chosen a more energy efficient option.

**** Behavioral energy efficiency and demand reduction projects must be both measurable and verifiable. Provide justification with your application.

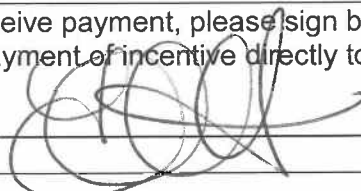
**Mercantile Self Direct
Nonresidential Custom Rebate Application
PART 1**



1. Contact Information (Required)

Duke Energy Customer Contact Information					
Company Name	The Kroger Co				
Address	BTC - 11450 Grooms Rd.				
Project Contact	Tracy MacDonald				
City	Blue Ash	State	OH	Zip Code	45242
Title	Incentive Engineer				
Office Phone	513.762.4957	Mobile Phone		Fax	513.762.1536
E-mail Address	tracy.macdonald@kroger.com				

Equipment Vendor / Contractor / Architect / Engineer Contact Information					
Company Name					
Address					
City		State		Zip Code	
Project Contact					
Title					
Office Phone		Mobile Phone		Fax	
E-mail Address					
Describe Role					

Payment Information					
Payee Legal Company Name (as shown on Federal income tax return):	The Kroger Co.				
Mailing Address	1014 Vine St				
City	Cincinnati	State	OH	Zip Code	45202
Type of organization (check one) <input type="checkbox"/> Individual/Sole Proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Unit of Government <input type="checkbox"/> Non-Profit (non-corporation)					
Payee Federal Tax ID # of Legal Company Name Above:	31-0345740				
Who should receive incentive payment? (select one) <input checked="" type="checkbox"/> Customer <input type="checkbox"/> Vendor (Customer must sign below)					
If the vendor is to receive payment, please sign below: I hereby authorize payment of incentive directly to vendor:					
Customer Signature			Date <u>1 / 6 / 2012</u> (mm/dd/yyyy)		

**Mercantile Self Direct
Nonresidential Custom Rebate Application
PART 1**



2. Project Information (Required)

A. Please indicate project type:

- ☐ New Construction
- ☐ Expansion at an existing facility
- ☐ Replacing equipment due to equipment failure
- ☐ Replacing equipment that is estimated to have remaining useful life of 2 years or less
- ☒ Replacing equipment that is estimated to have remaining useful life of more than 2 years
- ☐ Behavioral, operational and/or procedural programs/projects

B. Please describe your project, or attach a detailed project description that describes the project.

This project replaced (6) 1000W metal halide landscaping fixtures with (6) 300W induction fixtures.

C. When did you start and complete implementation?

Start date 10/2011 (mm/yyyy) End date 10/2011 (mm/yyyy)

D. Are you also applying for Self-Direct Prescriptive incentives and, if so, which one(s)¹?

E. Please indicate which worksheet(s) you are submitting for this application (check all that apply):

- ☒ Lighting
- ☐ Variable Frequency Drive (VFD)
- ☐ Compressed Air
- ☐ Energy Management System (EMS)
- ☐ General (for projects not easily submitted using one of the above worksheets)

F. Please tell us if there is anything about your electrical energy projections (either for the baseline or the proposed project) that you are either unsure about or for which you have made significant assumptions. Attach additional sheets as needed.

N/A

Required: Attach a supplier or contractor invoice or other equivalent information documenting the Implementation Cost for each project listed in your application. (Note: self-install costs cannot be included in the Implementation Cost)

\$5,149

¹ If your project involves some equipment that is eligible for prescriptive incentives and some equipment that is likely eligible for custom incentives, and if it is feasible to separate the equipment for the energy analysis, then the equipment will be evaluated separately. If it is not feasible to separate the equipment for analysis, then the equipment will be evaluated together in the custom application.

**Mercantile Self Direct
Nonresidential Custom Rebate Application
PART 1**



3. Signature (Required – must be signed by Duke Energy customer)

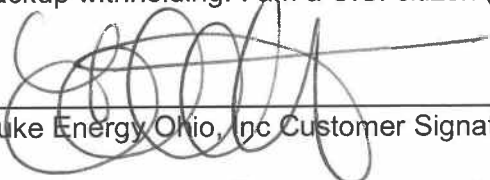
Customer Consent to Release of Personal Information

I, (insert name) Tracy D. MacDonald, do hereby consent to Duke Energy disclosing my Duke Energy Ohio, Inc Account Number and Federal Tax ID Number to its subcontractors solely for the purpose of administering Duke Energy Ohio's Mercantile Self-Direct Program. I understand that such subcontractors are contractually bound to otherwise maintain my Duke Energy Ohio, Inc Account Number and Federal Tax ID Number in the strictest of confidence.

I realize that under the rules and regulations of the public utilities commission, I may refuse to allow Duke Energy Ohio, Inc to release the information set forth above. By my signature, I freely give Duke Energy Ohio, Inc permission to release the information designated above.

Application Signature

I certify that I meet the eligibility requirements of the Duke Energy Ohio, Inc Mercantile Self Direct Custom Incentives Program and that all information provided within this application is correct to the best of my knowledge. I agree to the terms and conditions set forth for this program. I certify that the numbers, energy savings, and responses shown on this form are correct. Further, I certify that the taxpayer identification number is current and correct. I am not subject to backup withholding because: (a) I am exempt from backup withholding; or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends; or (c) the IRS has notified me that I am no longer subject to backup withholding. I am a U.S. citizen (includes a U.S. resident alien).



Duke Energy Ohio, Inc Customer Signature

Print Name Tracy D. MacDonald

Date 01/05/12

Mercantile Self Direct
Nonresidential Custom Rebate Application
PART 1



Checklist for completing the Application

INCOMPLETE APPLICATIONS WILL RESULT IN DELAYS IN DUKE ENERGY PROCESSING YOUR APPLICATION AND NOTIFYING YOU CONCERNING ANY REBATES. Before submitting the application and the required supplementary information, use the following checklist to ensure that your application is complete and the information in the application is accurate. (Note: this checklist is for your use only – do not submit this checklist with your application)

Section No. & Title	Have You:
1. Contact Information	<input checked="" type="checkbox"/> Completed the contact information for the Duke Energy customer? <input checked="" type="checkbox"/> Completed the contact information for the equipment vendor / project engineer that can answer questions about the technical aspects of the project, if that is a different person than above?
2. Project Information	<input checked="" type="checkbox"/> Answered the questions A-E, including providing a description of your project. <input checked="" type="checkbox"/> Completed and attached the lighting, compressed air, VFD, EMS and/or General worksheet(s)?
3. Signature	<input checked="" type="checkbox"/> Signed your name? <input checked="" type="checkbox"/> Printed your name? <input checked="" type="checkbox"/> Entered the date?
Supplementary information (Required)	<input checked="" type="checkbox"/> Attached a supplier or contractor's invoice or other equivalent information documenting the Implementation Cost for projects listed in your application? (Note: self-install costs cannot be included in the Implementation Cost) <input type="checkbox"/> (If submitting the General Worksheet) attached calculations documenting the energy usage and energy savings for each project listed in your application?

If you have any questions concerning how to complete any portion of the application or what supplementary information is required, please contact:

- your Duke Energy account manager
- or,
- the Duke Energy Smart \$aver® team at 1-866-380-9580.



The Lighting Worksheet is part 2 of the application. Do not submit this file without submitting a completed Part1 Custom Application document file, which can be found at www.duke-energy.com.

Before you complete this application, please note the following important criteria:

- Submitting this application does not guarantee an incentive will be approved.
 - Incentives are based on electricity conservation only.
 - Electric demand and/or energy reductions must be well documented with auditable calculations.
 - Incomplete applications will not be reviewed; all fields are required.
- Refer to the complete list of Instructions and Disclaimers, found in the Mercantile Self Direct Custom Application Part 1 document.

Please enter your information and data into the cells that are shaded.
Cells in white are locked and cannot be written over.

Duke Energy Customer Contact Information (Match the information in Application Part 1):

Name	The Kroger Co.
Company	

Equipment Vendor / Project Engineer Contact Information

Name	Tracy D. MacDonald
Company	

Before proceeding with the custom application, please verify that your project is not on the Self-Direct Prescriptive application.

The prescriptive incentive applications can be found at:

<http://www.duke-energy.com/ohio-larie-business/smart-saver/mercantile-self-direct.asp>

Prescriptive rebate amounts are pre-approved.

Please enter your information and data into the cells that are shaded.
Cells in white are locked and cannot be written over.

List of Sites (Required)

Project/ Site (see note 1)	Site Name	Electric Account Number(s) (see note 2)	Site Address	Area (sq ft)	Location within Facility	Location Type	Indoor or Outdoor?
Example	Distribution Center	12345678 01	Example: 123 Main Street, Anywhere USA 12345	1000	Warehouse	Industrial	Indoor
1	060XX067 - BTC	32500857020	11450 Grooms Rd.	20500	Office	Other	Indoor
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

If your application involves more than 20 lighting projects, please check here and use multiple worksheets.



Hours of Use (see note 3)														Controls (see note 5)			
Project/ Site	24 x 7	Weekday		Saturday		Sunday		Total Annual Hours of Use	Weeks of Use in Year (see note 4)	Existing		Proposed		Description			
		Start Hour	End Hour	Start Hour	End Hour	Start Hour	End Hour			Type of Control	Hours Reduction	Type of Control					
Example	No	8:00 AM	7:00 PM	10:00 AM	6:00 PM	1:00 PM	6:00 PM	3,536	52	None	0%	Occupancy	Applying for Prescriptive Incentive				
1	No	7pm	7am	7pm	7am	7pm	7am	4,380	52	None		None					
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
15																	
16																	
17																	
18																	
19																	
20																	

3 Hours of Use

For unoccupied times, leave applicable cells blank.



Project/ Site	Existing Fixture(s)								Quantity of Fixtures	Total Demand (kW)
	Existing Fixture Installation Year (see note 6)	Fixture Type	Fixture Manufacturer (see note 6)	Fixture Model Number (see note 6)	Lamps per Fixture	Fixture Size	Fixture Input Power (watts) (see note 7)			
Example	1995	High Pressure Sodium	Manufacturer	Model #	1		190	175	33	
1	1996	Metal Halide			1		1,000	6	6	
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
Application Total										6

6 Information on Existing Fixture(s)

Optional - please provide as much information as you can.



Project/ Site	Fixture Type	Fixture Manufacturer (see note 8)	Fixture Model Number (see note 8)	New Fixture(s)				Projected Savings				Incremental Project Cost \$ (see note 11)			
				Warranty of Proposed Fixtures (years)	Lamps per Fixture	Fixture Input Power (watts) (see note 9)	Quantity of Fixtures	Total Demand (kW)	Lumen Output per Fixture	Lumen/ Sq Ft	Demand (kW)		Annual Energy (kWh)	Other Annual Savings \$ (see note 10)	
Example	T8 Fluorescent	Manufacturer	Model #	5.0	1.0	78	225	18							
1	Induction	Phoenix	PHLFL-23	10.0	1.0	300	6	2							
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															
16															
17															
18															
19															
20															
Application Total							6	2							
Average Electric Rate \$/kWh				\$0.070				Estimated Annual Electric Savings				\$1,288		Project Simple Electric Payback (see note 12)	
												4		18,396	
														\$0	
														4.0 years	
														\$5,149	

8 Fixture Manufacturer and Model Number



PHLFL-23

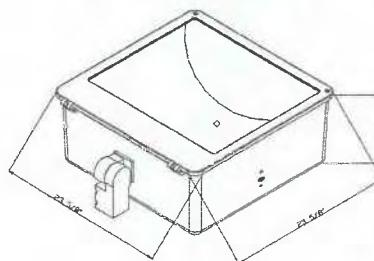
23" Large Flood Luminaire

Uses

The Phoenix PHLFL-23 is a specification grade luminaire engineered to optimize our efficient Induction light source. With superior lighting characteristics, the PHLFL-23 is an ideal choice for retail commercial and industrial installations where the superior efficiency and uniformity is desirable. Applications include malls, industrial and commercial parking lots, buildings perimeters, tennis courts and a myriad of security applications.

Features

- *HOUSING: High Quality Die Cast Aluminum
High Quality Powder Coat Finish
- *REFLECTOR: High Reflectivity Specular Aluminum
- *LENS: High Quality Tempered Clear Glass
- *WATTAGE RANGE: Induction 40, 65, 80, 100, 120, 150, 200, 280, 400
- *COLOR: Standard Bronze
Other-Custom
- *LISTINGS: U.L. Listed
C.U.L. Listed
Listed for Wet Location
- *OTHER: Silicone Gasketed



Ordering Information

Example: (PHLFL-23-200-50-120-YM-BZ-PC)

PHLFL-23						
Series	Watts	Color Temp	Voltage	Mounting	Finish	Options
23" Large Flood Luminaire	40 - 40W	35 - 3500K	120 - 120V	YM - Yoke Mount	BZ - Bronze	PC - Photocell
	65 - 65W	41 - 4100K	220 - 206-240V	SF - 2 3/8" Slip Fitter	CU - Custom	
	80 - 80W	50 - 5000k STD	277 - 277V	PM - Pole Mount		
	100 - 100W					
	120 - 120W					
	150 - 150W					
	200 - 200W					
	280 - 280W					
	400 - 400W					

*We used
(2) 150W lamps
see email*



Example: Toyota Dealership - Reno Nevada

Macdonald, Tracy D

From: Norman, Jen
Sent: Thursday, March 08, 2012 7:34 AM
To: Macdonald, Tracy D
Subject: FW: Lamp data
Attachments: ARCA LAMP AND DRIVER SPECS.pdf

Thanks,

Jen Norman
(513) 762-1583

From: KYLES@PHOENIXINDUCTIONLIGHTING.COM [mailto:KYLES@PHOENIXINDUCTIONLIGHTING.COM]
Sent: Wednesday, March 07, 2012 5:07 PM
To: Norman, Jen
Subject: Lamp data

Jen, Please see attached spec sheet for lamp info. The fixtures you guys purchased used 2 150 watt lamps to make up the 300 watts. Thanks

Kyle Shilley
Phoenix Induction Lighting
10623 E Sprague Ave Suite A
Spokane Valley Wa 99206
P (509)326-6867
F (509)326-6998

