



**Case No.:** \_\_\_\_-\_\_\_\_-EL-EEC

**Mercantile Customer:** Aldi Inc

**Electric Utility:** Duke Energy

**Program Title or  
Description:** Lighting

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](mailto:ee-pdr@puc.state.oh.us).

## Section 1: Mercantile Customer Information

Name: **Aldi Inc**

Principal address: **Po Box 2997 Springfield, Ohio 45501**

Address of facility for which this energy efficiency program applies:

**8505 Ridge Rd Cincinnati, Ohio 45213**

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. (See Attachment 1 - Appendix 1)**
- ☐ 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)).

**Replaced fluorescent lighting with LED case lighting in December 2008.  
Installed 36 feet of new night covers for displays in December 2008.**

- ☐ 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: **20,254 kWh gross with losses (See Attachment 1 - Appendix 2)**

- 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.

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## 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):

**1.76 KW (See Attachment 1 - Appendix 2)**

## **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 **\$980.00 See Attachment 1-Appendix 3** . (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 **(See Attachment 1 - Appendix 4)** (Skip to Subsection 2.)

### 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 **\$8,960 (See Attachment 1 - Appendix 5).**

The utility's program costs were **\$652.70 (See Attachment 1 - Appendix 6).**

The utility's incentive costs/rebate costs were **\$980.00 (See Attachment 1 - Appendix 3).**

## **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 Rebate 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

February 9, 2012

Ms Beverly Pollock  
Aldi Inc  
PO Box 2997  
Springfield, Ohio 45501

Attn: Grady Reid, Jr.

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

Dear Ms. Pollock:

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 \$980.00 has been proposed for your lighting project completed in the 2008 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 Saver® incentives, when applicable. Please contact me if you have any questions.

Sincerely,

Grady Reid, Jr  
Product Manager  
Mercantile Self Direct Rebates

cc: Terry Holt, 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, Aldi Inc 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, Aldi Inc 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, Aldi Inc 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

Russ White

Printed Name

2/15/12

Date

#### Proposed Rebate Amounts

ECM-1	Nighttime Display Cover (Qty 32 – Ridge Rd Store)	\$80.00
ECM-2	Standard LED Case Lighting (Qty 36 – Ridge Rd Store)	\$900.00
Total		\$980.00

# Ohio | Public Utilities Commission

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

Case No.: \_\_\_\_-\_\_\_\_-EL-EEC

State of Ohio :

Russ White, Affiant, being duly sworn according to law, deposes and says that:

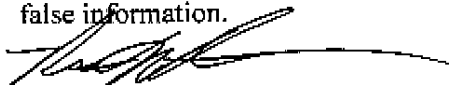
1. I am the duly authorized representative of:

Aldi Inc Ohio


[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 15<sup>th</sup> day of FEBRUARY,  
2012 Month/Year

  
Signature of official administering oath

Teresa L. Kaveney, Notary  
Print Name and Title

TERESA L. KAVENEY  
Notary Public, State of Ohio

My commission expires ~~on~~ Commission Expires May 22, 2016

## Attachment 1 – Aldi Inc Prescriptive Lighting Ridge Rd

### Appendix 1 – Electric History

28103684 01		
ALDI INC		
5505 RIDGE RD		
CINCINNATI, OH 45213		
Date	Days	Actual KWH
11/23/2011	29	30,080
10/25/2011	29	30,800
9/26/2011	32	41,040
8/25/2011	29	43,120
7/27/2011	30	44,880
6/27/2011	32	41,200
5/26/2011	29	32,000
5/26/2011	29	64,000
4/27/2011	30	30,800
3/28/2011	31	30,720
2/25/2011	29	27,680
1/27/2011	30	28,320
<b>Total</b>		<b>444,640</b>

64802118 01		
ALDI INC		
5033 DELHI		
CINCINNATI, OH 45238		
Date	Days	Actual KWH
11/15/2011	29	40,690
10/17/2011	31	48,394
9/16/2011	30	53,547
8/17/2011	29	56,415
7/19/2011	32	58,397
6/17/2011	30	50,233
5/18/2011	30	44,396
5/18/2011	30	88,792
4/18/2011	17	23,844
<b>Total</b>		<b>464,708</b>

## Appendix 2 – Annual kWh losses and annual KW losses

Measure	Annual kWh Gross with losses	Upload Amount	TOTAL Annual kWh losses	KW Per Measure	Total KW Savings
Nighttime Display Cover	81.96	32	2622.72	0.01	0.32
LED Case Lighting - Standard	489.76	36	17631.36	0.04	1.44
<b>Totals</b>			<b>20254.08</b>		<b>1.76</b>

## Appendix 3 – Cash Rebate

Measure	Amount
Nighttime Display Cover	\$80
LED Case Lighting - Standard	\$900
<b>Total</b>	<b>\$980</b>

## Appendix 4 – Utility Cost Test

Measure	UCT
Nighttime Display Cover	4.58
LED Case Lighting - Standard	5.48

## Appendix 5 – Avoided Supply Costs

Measure	T&D	Production	Capacity	Quantity	Total Avoided Costs
Nighttime Display Cover	\$1.00	\$14.00	\$4.00	32	\$608
LED Case Lighting - Standard	\$13.00	\$189.00	\$30.00	36	\$8,352
<b>Total</b>					<b>\$8,960</b>

## Appendix 6 – Utility Program Costs

Measure	Qty	Admin Costs	Total Costs
Nighttime Display Cover	32	\$1.27	\$40.70
LED Case Lighting - Standard	36	\$17.00	\$612.00
<b>Total</b>			<b>\$652.70</b>

# Ohio Mercantile Self Direct Program

## Application Guide & Cover Sheet

Questions? Call 1-866-380-9580 or visit [www.duke-energy.com](http://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](mailto:SelfDirect@Duke-Energy.com). You may also fax to 1-513-419-5572.

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 an/or billing history for other utilities as required):

Account Number	Annual Usage	Account Number	Annual Usage
2810-3684-01-5	532000	plenty more if needed	
6480-2118-01-3	550000		
3810-3622-02-3	470000		

Self Direct rebates are available for completed Custom projects that have not previously received a Duke Energy Smart Saver® 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 Saver 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 Saver 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 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 checked="" type="checkbox"/>
		MSD Custom Part 1 <input type="checkbox"/> Custom Lighting Worksheet <input 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"/>
Chiller Tune-ups	MSD Prescriptive Chiller Tune-ups <input type="checkbox"/>	MSD Prescriptive Chiller Tune-ups <input type="checkbox"/>	MSD Prescriptive Chiller Tune-ups <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 checked="" 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"/>
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 Ohio Lighting Incentive Application

Questions? Call 1-866-380-9580 or visit [www.duke-energy.com](http://www.duke-energy.com).

Email the complete, signed application with all required documents to [SelfDirect@duke-energy.com](mailto:SelfDirect@duke-energy.com) or fax to 513-419-5572.

Is this application: ☒ **NEW** (original) or ☐ **REVISED** (changes made to original application)

## Building Type – Required (check one)

<input type="checkbox"/> Data Centers	<input type="checkbox"/> Full Service Restaurant	<input type="checkbox"/> Office
<input type="checkbox"/> Education/K-12	<input type="checkbox"/> Healthcare	<input type="checkbox"/> Public Assembly
<input type="checkbox"/> Education Other	<input type="checkbox"/> Industrial	<input type="checkbox"/> Public Order/Safety
<input type="checkbox"/> Elder Care/Nursing Home	<input type="checkbox"/> Lodging	<input type="checkbox"/> Religious Worship/Church
<input checked="" type="checkbox"/> Food Sales/Grocery	<input type="checkbox"/> Retail (Small Box)	<input type="checkbox"/> Service
<input type="checkbox"/> Fast Food Restaurant	<input type="checkbox"/> Retail (Big Box)	<input type="checkbox"/> Warehouse
<input type="checkbox"/> Other:		

## How did you hear about the program? (check one)

<input checked="" type="checkbox"/> Duke Energy Representative	<input type="checkbox"/> Web Site	<input type="checkbox"/> Radio
<input type="checkbox"/> Contractor / Vendor	<input type="checkbox"/> Other	

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

<input checked="" type="checkbox"/> All sections of application	<input checked="" type="checkbox"/> Invoice with make, model number, quantity and equipment manufacturer	<input checked="" type="checkbox"/> Tax ID number for payee	<input checked="" type="checkbox"/> Customer/vendor agree to Terms and Conditions
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## Customer Information

Customer/Business	Aldi Inc	Contact	Beverly Pollock
Phone	937-323-5500 x 101	Account Number	2810-3684-01-5
Street Address (Where incentive should be mailed)	PO Box 2997		
City	Springfield	State	OH Zip Code 45501
Installation Street Address	8505 Ridge Ave		
City	Cincinnati	State	OH Zip Code 45213
E-mail Address	bev.pollock@yahoo.com		

*\*Failure to provide the account number associated with the location where the installation took place will result in rejection of the application.*

## Vendor Information

Vendor	Contact
Phone	Fax
Street Address	
City	State Zip Code
E-mail Address	

If Duke Energy has questions about this application, who should we contact? ☒ Customer ☐ Vendor

## Payment Information

Who should receive incentive payment?	<input checked="" type="checkbox"/> Customer	<input type="checkbox"/> Vendor (Customer must sign below)
I hereby authorize payment of incentive directly to the vendor:	Customer Signature (written signature)	
	Date	11/25/2011
Provide Tax ID Number for Payee	Customer Tax ID #	36-3521661
	Vendor Tax ID #	

## Terms and Conditions

I have read and hereby agree to the Terms & Conditions and Program Requirements.

Customer Signature	Vendor Signature
Date	Date
Title	Title

*Incentives are subject to change and may be discontinued at the sole discretion of Duke Energy. Equipment must be installed and operable to be eligible for incentives. As Federal Energy Policy Law changes, equipment efficiency requirements are subject to change.*



Measure	Incentive	Qty	Annual Operating Hrs (minimum of 1800)	Equipment cost (w/o labor)	Date Installed and Operable (mm/yy)	Total Incentive
21" Tubular Skylight/Light Tube (at least one light fixture per light tube must be controlled by a "daylight" sensor (no additional daylight sensor incentive applies) Check One ** <input type="checkbox"/> R <input type="checkbox"/> NC <input type="checkbox"/> FE Model Number	\$37.50 / fixture					
LED Exit Signs (replacing or retrofitting existing incandescent or compact fluorescent exit sign) Check one <input type="checkbox"/> R <input type="checkbox"/> NC <input type="checkbox"/> FE Model Number	\$5.00 / fixture					
LED Lighting In Reach-in Freezer or Cooler Case (replacing fluorescent fixtures) Model Number	\$25.00 / door	36	4380	\$36,506	12/08/2008	\$900.00
LED Case Lighting Sensor Controls Check one <input type="checkbox"/> R <input type="checkbox"/> NC <input type="checkbox"/> FE Model Number      Model Number	5.00 / sensor					
Under 500 W connected to sensor check one <input type="checkbox"/> R <input type="checkbox"/> NC <input type="checkbox"/> FE Model Number	\$10.00 / sensor					
Over 500 W connected to sensor check one <input type="checkbox"/> R <input type="checkbox"/> NC <input type="checkbox"/> FE Model Number	\$20.00 / sensor					

- Replacement must result in energy savings to qualify
- All equipment must be **new** to be eligible for incentives. Used equipment is **not** eligible for incentives.
- Lighting circuits should be installed with a neutral wire that has the same size conductor as the line load.
- All fixtures shall be installed indoors except where specifically stated.
- All fixtures, lamps and ballasts must be UL certified and meet all applicable codes and regulations.
- All fixtures must operate a minimum of 1,800 hours to be eligible.
- Tubular Skylight requires at least one light fixture per light tube that must be controlled by a "daylight" sensor (no additional daylight sensor incentive applies)
- LED exit signs shall use 5 watts or less including the battery charger when active. They must meet State Fire Marshal codes and be UL rated.
- Occupancy Sensors (under and over 500) must be either wall, ceiling, or fixture mounted. Rapid or programmed start ballasts are recommended for fluorescent fixtures.
- Occupancy Sensors (under 500W) installed on or built into High Bay fixtures are eligible for incentives.
- LED Lighting in Reach-in Freezer or Cooler Case: Must install a LED lighting system and replace (or in lieu of) a fluorescent lighting system for reach-in refrigerated display case.
- Fluorescent magnetic ballasts cannot be used to power the LED case lighting system. Existing fluorescent fixture end connectors and ballasts must be removed.
- LED case lighting system must be a permanently installed luminaire. LED lamps that install into fluorescent lamp sockets are not eligible for incentives.
- LED Case Lighting Sensor Controls may only be installed with LED lighting systems. End of aisle and individual case sensors qualify.
- Incentive capped at 50% of the equipment cost.
- New construction or replacement of failed equipment must apply for Self Direct Custom program.

# MERCANTILE SELF DIRECT Ohio Food Services Incentive Application

Questions? Call 1-866-380-9580 or visit [www.duke-energy.com](http://www.duke-energy.com).

Email the complete, signed application with all required documents to [SelfDirect@duke-energy.com](mailto:SelfDirect@duke-energy.com) or fax to 513-419-5572.

Is this application: ☒ **NEW** (original) or ☐ **REVISED** (changes made to original application)

<b>Building Type – Required (check one)</b>		
<input type="checkbox"/> Data Centers	<input type="checkbox"/> Full Service Restaurant	<input type="checkbox"/> Office
<input type="checkbox"/> Education/K-12	<input type="checkbox"/> Healthcare	<input type="checkbox"/> Public Assembly
<input type="checkbox"/> Education Other	<input type="checkbox"/> Industrial	<input type="checkbox"/> Public Order/Safety
<input type="checkbox"/> Elder Care/Nursing Home	<input type="checkbox"/> Lodging	<input type="checkbox"/> Religious Worship/Church
<input checked="" type="checkbox"/> Food Sales/Grocery	<input type="checkbox"/> Retail (Small Box)	<input type="checkbox"/> Service
<input type="checkbox"/> Fast Food Restaurant	<input type="checkbox"/> Retail (Big Box)	<input type="checkbox"/> Warehouse
<input type="checkbox"/> Other:		
<b>How did you hear about the program? (check one)</b>		
<input checked="" type="checkbox"/> Duke Energy Representative	<input type="checkbox"/> Web Site	<input type="checkbox"/> Radio
<input type="checkbox"/> Contractor / Vendor	<input type="checkbox"/> Other	

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

<input checked="" type="checkbox"/> All sections of application	<input checked="" type="checkbox"/> Invoice with make, model number, quantity and equipment manufacturer	<input checked="" type="checkbox"/> Tax ID number for payee	<input checked="" type="checkbox"/> Customer/vendor agree to Terms and Conditions
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<b>Customer Information</b>					
Customer/Business	Aldi Inc		Contact	Beverly Pollock	
Phone	937-323-5500 x 101		Account Number	2810-3684-01-5	
Street Address (Where incentive should be mailed)			PO Box 2997		
City	Springfield	State	OH	Zip Code	45501
Installation Street Address		8505 Ridge Ave			
City	Cincinnati	State	OH	Zip Code	45213
E-mail Address	bev.pollock@yahoo.com				

*\*Failure to provide the account number associated with the location where the installation took place will result in rejection of the application.*

<b>Vendor Information</b>					
Vendor			Contact		
Phone			Fax		
Street Address					
City		State		Zip Code	
E-mail Address					

If Duke Energy has questions about this application, who should we contact? ☒ **Customer** ☐ **Vendor**

<b>Payment Information</b>		
Who should receive incentive payment?	<input checked="" type="checkbox"/> Customer <input type="checkbox"/> Vendor (Customer must sign below)	
I hereby authorize payment of incentive directly to the vendor:	Customer Signature (written signature)	
	Date	11/25/11
Provide Tax ID Number for Payee	Customer Tax ID #	36-3521661
	Vendor Tax ID #	

<b>Terms and Conditions</b>			
I have read and hereby agree to the Terms & Conditions and Program Requirements.			
Customer Signature		Vendor Signature	
Date	11/25/11	Date	
Title	Real Estate Director	Title	

*Incentives are subject to change and may be discontinued at the sole discretion of Duke Energy. Equipment must be installed and operable to be eligible for incentives. As Federal Energy Policy Law changes, equipment efficiency requirements are subject to change.*

The Equipment below is (check one): ☐ New Equipment / New Construction

Early replacement of existing equipment or replacement of failed equipment must apply for Self Direct Custom program.

#### Night Covers For Displays

Description	Incentive*	Make/Model#	Total Lineal Feet Installed	# of Display Cases	Project Cost	Date Installed and Operable (mm/yy)	Total Incentive
Night covers for displays	\$2.5/lineal ft.	for hussman c5x-ep	36	2	\$0.00	12/8/2008	\$90.00
Night covers for displays	\$2.5/lineal ft.						

\*Incentive capped at 50% of the project cost (equipment and external labor only).

- Night Covers for Displays: To be eligible for incentives, the covers must be applied to low and medium temperature, open cases (horizontal or vertical). Covers must be applied a minimum of 6 hours per day. New or retrofit applications are eligible.
- Night Covers for Displays – Film type covers have small, perforated holes to decrease moisture buildup. Covers need to be permanent, low emissivity (reflective) products.
- All equipment must be **new** to be eligible for incentives. Used equipment is **not** eligible for incentives.

The Equipment below is (check one): ☐ New Equipment / New Construction

Early replacement of existing equipment or replacement of failed equipment must apply for Self Direct Custom program.

#### Door Gaskets – Cooler or Freezer (retrofit only)

Description	Incentive*	Make/Model#	Total Lineal Feet Installed on all Coolers and Freezers	# of Coolers and Freezers	Project Cost	Date Installed and Operable (mm/yy)	Total Incentive
Door gaskets for cooler or freezer	\$.50/lineal ft.						
Door gaskets for cooler or freezer	\$.50/lineal ft.						

\*Incentive capped at 50% of the project cost (equipment and external labor only).

- Gasket must replace a worn gasket on the door of a walk-in cooler or freezer.
- Replacement gaskets must meet the manufacturer's installation specifications, specifically regarding dimensions, materials, attachment method, style, compression, and magnetism.
- Rebate is based on total door perimeter in linear feet.
- All equipment must be **new** to be eligible for incentives. Used equipment is **not** eligible for incentives.

The Equipment below is (check one): ☐ New Equipment / New Construction

Early replacement of existing equipment or replacement of failed equipment must apply for Self Direct Custom program.

#### Efficient Pre Rinse Sprayer

Description	Incentive*	Make/Model#	# of Sprayers	Project Cost	Date Installed and Operable (mm/yy)	Total Incentive
Pre-Rinse Sprayer	\$9/per sprayer					

\*Incentive capped at 50% of the project cost (equipment and external labor only).

- Incentives for Pre-rinse sprayers are available only for Duke Energy accounts with electric heat.
- A low-flow, high efficiency pre-rinse sprayer less than or equal to 1.6 gallons per minute (gpm) must replace a sprayer of 2.2 gpm or greater.



## INVOICE

INVOICE NO.

5208077

REMIT TO

HUSSMANN CORPORATION  
2423 COLLECTION CENTER DR  
CHICAGO IL 60693 2423  
PHONE (314) 291-2000 FAX# (314) 298-6480

PAGE 1

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DATE

10/28/08

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RECEIVED NOV - 5 2008

86014

ALDI FOOD STORES INC

P.O. BOX 2997

SPRINGFIELD

OH 45501

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86014

ALDI #25

8505 RIDGE AVE

CINCINNATI OH 45213

NOV 18 2008

CUSTOMER P.O.# LETTER RUSS WHITE

JOB# 08-52-90150

SALS# 448

QUANTITY

DESCRIPTION

AMOUNT

1

M/F ALDI #25 CINCINNATI OH  
JOB# 90150

MULTI DECK MEAT/DELI CASES

32' HUSSMANN C5X-EP MULTI DECK  
CASES (16' MEAT & 16' DAIRY)

INCLUDES: (1 PAIR OF ENDS, NIGHT COVERS, 3-RO  
OF 18" LIGHTED SHELVES FOR MEAT, 3-ROWS OF 22  
FOR DELI, DIGITAL THERMOMETER, BOTTOM WORE RA  
R404A EXPANSION VALVES AND A DOUBLE ROW CANOP  
C5X-8E MULTI DECK CASE 8'

S/N C1550910

S/N C1550911

S/N C1550912

S/N C1550913

18,632.00

GENERAL WALK-IN COOLER

1

24'-0"X 41'-6"X 10'-0" HIGH WALK-IN  
COOLER WITHOUT FLOOR

CONSISTS OF 3-1/2" WOOD FRAME WALLS,  
GALVANIZED FINISH INTERIOR & EXTERIOR, TREADB  
ANGLES AROUND PERIMETER OF EXTERIOR OPENING A  
36" HIGH ANGLES ON INTERIOR OF OPENING

INCLUDES: ONE PILOT SWITCH, ONE OPENING FOR  
(4) 36"X75" #103 MILK DOORS AND ONE  
OPENING FOR (10) 30"X67" #101 GENERAL COOLER

14,947.00

(1) SET OF 16 CEILING HANGERS

(1) STAINLESS STEEL EXTERIOR MULLION

(1) SUPPORT POST FOR DISPLAY DOOR OPENINGS

(1) 1" X 6" X10' CLOSE OFF PANEL BETWEEN  
COOLER AND OUTSIDE WALL

(1) 57" DEEP MILK RAIL PACKAGE

(3) JAR LIGHTS FOR BACK STOCK AREA

*Coder / Freezer / Multi deck*

Job#	08-52-90150	Days		%	
Rec'd	NOV - 5 2008				
Chk	6176				
Auth.	B. Albrecht				
Appr.					

TERMS: NET UPON RECEIPT

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# HUSSMANN®

## INVOICE

INVOICE NO.

5208077

DATE

10/28/08

HUSSMANN CORPORATION PAGE 2  
2423 COLLECTION CENTER DR 3557  
CHICAGO IL 60693 2423  
PHONE (314) 291-2000 FAX# (314) 298-6480

REMIT TO

SOLD TO

86014  
ALDI FOOD STORES INC  
P.O. BOX 2997  
SPRINGFIELD OH 45501

SHIP TO

86014  
ALDI #25  
8505 RIDGE AVE  
CINCINNATI OH 45213

CUSTOMER P.O.# LETTER RUSS WHITE JOB# 90150 SALES# 448

QUANTITY	DESCRIPTION	AMOUNT
1	CURTRON STRIP CURTAIN DOOR	272.00
1	6'-0"X8'-0" CUSTOM SINGLE SLIDE COOLER DOOR WITH ALDI SPECS	1,814.00
1	SET OF 10 ANTHONY #ELM2 30"X67" GLASS COOLER GELCORE LED LIGHTING:LAMP COLOR 4800K (1) SET OF 10 ANTHONY DOOR GUARDS (1) SET OF 10 ANTHONY SPECIAL DOOR GASKET RET	8,920.00
1	SET OF 4 ANTHONY EL23,36"X75" SPECIAL MILK INCLUDES 5" BOTTOM SILL, SPECIAL 1 1/4" MULLIONS BETWEEN DOORS, POLISHED SILVER FINISH AND GELCORE LED LIGHTING SYSTEM (4800	3,760.00
1	(3) SETS OF FOUR STAINLESS STEEL BUMPERS FOR GLASS PROTECTION ON MILK DOORS AS PER ALDI SPEC'S.	1,077.00
	MEAT STORAGE LOCKER	
1	HF82AT THREE DOOR MEAT LOCKER. REMOTE (NO COM	3,250.00
	WALK-IN ICE CREAM/ GENERAL FREEZER	
1	17'-0"X 59'-0"X 10'-0" HIGH OUTSIDE DIMENSION NSF 2 COMPARTMENT WITHOUT FLOOR. INCLUDES HEATED JAMB AND VENT, ONE OPENING FOR 30"X67" ANTHONY #101XDOORS(18&6).	21,304.00
	(1) SET OF 17 CEILING HANGER BRACKETS (4) SUPPORT POSTS FOR DISPLAY OPENING HEADER (1) SET OF 144 TUBES OF CAULKING FOR WALK-INS (6) CANS OF SPRAY FOAM (1) SPECIAL 1"X 6"X 10' CLOSE OFF PANEL BETWEEN FREEZER WALLS AND INSIDE BUILDING WALL	

Sup. No.	
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TERMS: NET UPON RECEIPT

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**HUSSMANN**

# INVOICE

INVOICE NO.

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HUSSMANN CORPORATION  
2423 COLLECTION CENTER DR 3557  
CHICAGO IL 60693 2423  
PHONE (314) 291-2000 FAX# (314) 298-6480

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P.O. BOX 2997  
SPRINGFIELD OH 45501

SHIP TO

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ALDI #25  
8505 RIDGE AVE  
CINCINNATI OH 45213

CUSTOMER P.O.# LETTER RUSS WHITE JOB# 90150 SALS# 448

QUANTITY	DESCRIPTION	AMOUNT
2	CURTRON STRIP CURTAIN DOOR 72"X96"	545.00
1	6'-0"X8'-0" CUSTOM SINGLE SLIDE COOLER DOOR WITH ALDI SPECS	1,814.00
1	(1) SET OF (16 & 6 ) ANTHONY #101X 30"X 67" GLASS FREEZER DOORS ELS CONNECTION LIGHTING WITH HEAVY DUTY SHIELDS (1) SET OF 22 ANTHONY DOOR FRAME GUARDS (1) SET OF 22 ANTHONY DOOR GASKET RETAINERS REFRIGERATION SYSTEM	23,826.00
1	CPC ENERGY MAGAGEMENT SYSTEM INCLUDES: ALARM PANEL, TEMPERATURE SENSORS, (10), HUMIDITY /DEW POINT	4,990.00
1	E2 MODEM CARD FOR CX-400 CONTROLLER & LINE SH	460.00
1	HUSSMANN #HAY06SK PROTOCOL HE VERTICAL REFRIGERATION SYSTEM (1) CPC PROTOCOL CONTROLLER; (6) CASE/COIL TEMPERATURE PROBES PROTOCOL UPGRADE: CX-400 CONTROLLER AND ASSOCIATED I/O BOARDS FOR ENERGY MANAGEMENT S S/N 104101200830019	25,636.00
1	HUSSMANN LAVA-22410K ROOFTOP CONDENSER INCLUDES: ECM FAN MOTORS DOES NOT INCLUDE RECEIVER PACKAGE S/N MY08L192981	11,728.00
1	REMOTE RECEIVER PACKAGE INCLUDES: 144# HORIZONTAL RECEIVER W/MOUNTING ISOLATION VALVES AND 450# RELIEF VALVE	1,780.00

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Underwriters Laboratories (safety)  
product specifications or the

OF  
**HUSSMANN®**

# INVOICE

INVOICE NO.

5208077

DATE

10/28/08

HUSSMANN CORPORATION  
2423 COLLECTION CENTER DR  
CHICAGO IL 60693 2423  
PHONE (314) 291-2000 FAX# (314) 298-6480

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ALDI FOOD STORES INC  
P.O. BOX 2997  
SPRINGFIELD OH 45501

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ALDI #25  
8505 RIDGE AVE  
CINCINNATI OH 45213

CUSTOMER P.O.# LETTER RUSS WHITE JOB# 90150 SALS# 448

QUANTITY DESCRIPTION AMOUNT

	AND LIQUID LEVEL SENSOR.	
2	HUSSMANN MK36A-354 COOLING COILS FOR WALK-IN COOLER W/MOUNTED EXPANSION VALVE S/N MY08L192116 S/N MY08L192117	4,160.00
2	HUSSMANN MV34E-300 COOLING COILS FOR FREEZER W/MOUNTED EXPANSION VALVE S/N MY08L192113 S/N MY08L192114	5,396.00
1	HUSSMANN MK34E-315 COOLING COIL FOR ICE CREAM W/MOUNTED EXPANSION VALVE S/N MY08L192115	2,637.00
1	FREIGHT	8,837.93

	TOTAL	165,735.93
6.500%	TAX	10,772.84
	BALANCE	176,508.77

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4002Y  
4003Y  
4009Y  
4011Y  
4047Y  
4080Y  
4703Y

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TERMS: NET UPON RECEIPT

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Supplier	Supplier number	Invoices no	Invoices date	Net	Due	Reili no.	Account
HUSSMANN-CHICAGO	20384	5208077	10/28/2008	176,508.77	12/2/2008	433	9301025

Proof of payment



**This foregoing document was electronically filed with the Public Utilities**

**Commission of Ohio Docketing Information System on**

**3/5/2012 2:00:02 PM**

**in**

**Case No(s). 12-0845-EL-EEC**

Summary: Application Application to Commit Energy  
Efficiency/Peak Demand  
Reduction Programs  
(Mercantile Customers Only)- Aldi electronically filed by Carys Cochern on behalf of Duke  
Energy