

LARGE FILING SEPARATOR SHEET

CASE NUMBER *13-1129-EL-EEC*

FILE DATE **MAY 15 2013**

SECTION: *8*

NUMBER OF PAGES: *41*

DESCRIPTION OF DOCUMENT:

*APP - STATUS REPORT
VOL 3 (CONT.)*

TecMarket Works

Appendices

- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10
- ☐ DK/NS

*Ask question 10 if score from question 9 is lower than score from question 8:
(Select all that apply.)*

10. What do you feel caused your decrease in comfort?

- ☐ Power Manager
- ☐ Rising Temperature
- ☐ Rising Humidity
- ☐ Power Outage
- ☐ Other _____
- ☐ DK/NS

11. On {day of high temperature}, did you or any other members of your household adjust the settings on your thermostat?

- ☐ Yes
- ☐ No
- ☐ DK/NS

If yes to question 11,

NOTE: enter a numeral for a temperature, or DK if not sure.

11a. What temperature was it originally at, and what temperature did you set it to on {day of high temperature}?

Original temperature setting (degrees F): _____

Adjusted temperature setting (degrees F): _____

12. When Duke Energy activated your Power Manager device, did you or any other members of your household turn on any fans to keep cool?

- ☐ Yes
- ☐ No
- ☐ DK/NS

13. What else did you or other members of your household do to keep cool?

- ☐ Continued normal activities/ Didn't do anything different
- ☐ Turned on room/window air conditioners
- ☐ Closed blinds/shades
- ☐ Moved to a cooler part of the house
- ☐ Left the house and went somewhere cool
- ☐ Wore less clothing
- ☐ Drank more water/cool drinks

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- ☐ Turned on fans
- ☐ Opened windows
- ☐ Other _____
- ☐ DK/NS

Now I'm going to ask you some questions about your air conditioning use.

14. How often do you use your central air conditioner? Would you say you use it ...

(Read first 5 answers aloud.)

- ☐ Not at all
- ☐ Only on the hottest days
- ☐ Frequently during the cooling season
- ☐ Most days during the cooling season
- ☐ Everyday during the cooling season
- ☐ DK/NS

15. When you think of a typical hot and humid summer day, at what outside temperature do you tend to feel uncomfortably warm?

- ☐ less than 65 degrees
- ☐ 65-68 degrees
- ☐ 69-72 degrees
- ☐ 73-75 degrees
- ☐ 76-78 degrees
- ☐ 79-81 degrees
- ☐ 82-84 degrees
- ☐ 85-87 degrees
- ☐ 88-90 degrees
- ☐ 91-94 degrees
- ☐ 95-97 degrees
- ☐ 98-100 degrees
- ☐ greater than 100 degrees
- ☐ DK/NS

16. At what outside temperature do you tend to turn on the air conditioner?

- ☐ less than 65 degrees
- ☐ 65-68 degrees
- ☐ 69-72 degrees
- ☐ 73-75 degrees
- ☐ 76-78 degrees
- ☐ 79-81 degrees
- ☐ 82-84 degrees
- ☐ 85-87 degrees
- ☐ 88-90 degrees
- ☐ 91-94 degrees
- ☐ 95-97 degrees
- ☐ 98-100 degrees

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- ☐ greater than 100 degrees
- ☐ It's programmed into the thermostat
- ☐ DK/NS

17. How old is your air conditioner?

- ☐ 0 to 6 years old
- ☐ 7 to 12 years old
- ☐ 13 to 20 years old
- ☐ over 20 years old
- ☐ DK/NS

18. Using a scale of 1 to 10 where 1 indicates "Very Dissatisfied" and 10 indicates "Very Satisfied", what is your overall satisfaction with the Power Manager program?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10

If 7 or below ask,

18b. Why are you less than satisfied with Power Manager?

(Select all that apply)

- ☐ They activated my Power Manager device more often than I would like
- ☐ The bill credits/incentives were not large enough
- ☐ I was uncomfortable when my Power Manager device was activated
- ☐ Other _____
- ☐ DK/NS

19. Using a scale of 1 to 10 where 1 indicates "Very Dissatisfied" and 10 indicates "Very Satisfied", what is your overall satisfaction with Duke Energy?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10

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If 7 or below,

19b. Why are you less than satisfied with Duke Energy?

20. Using a scale of 1 to 10, where 1 means "Extremely Unlikely" and 10 means "Extremely Likely", how likely is it that you would recommend this program to a friend or colleague?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10

If 7 or below,

20a. Why would you not recommend the program?

21. Did you experience any power outage issues on {day of high temperature}?

- ☐ Yes
- ☐ No
- ☐ DK/NS

22. Do you get your Duke Energy bill in the mail or by email?

- ☐ Mail
- ☐ Email
- ☐ DK/NS
- ☐ Other: _____

23. How do you pay your bill? Do you...

(Read first 3 answers aloud, stop when they answer.)

- ☐ Mail a check
- ☐ log into your Duke Energy account and pay online
- ☐ or do you have an auto-pay set up for your account?
- ☐ Other: _____

24. On average, how often do you review the details of your Duke Energy bill?

(Read first 4 answers aloud, stop when they answer.)

- ☐ Every month
- ☐ More than half the time
- ☐ Less than half the time
- ☐ Never
- ☐ Other: _____
- ☐ DK/NS

25. How many people live in this home?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8 or more
- ☐ prefer not to answer

We have reached the end of the survey. Do you have any comments that you would like for me to pass on to Duke Energy?

Thank you for your time and feedback today!
Politely end call.

Appendix C: Survey Participant Customer Descriptive Data

Surveyed participants were asked how many people currently lived in their home. This distribution is shown below in Figure 31. Most Power Manager households surveyed have one or two people living in them: only 43.1% (28 out of 65) of Event households have three or more members, while 32.3% (20 out of 62) of Non-Event households have three or more members.

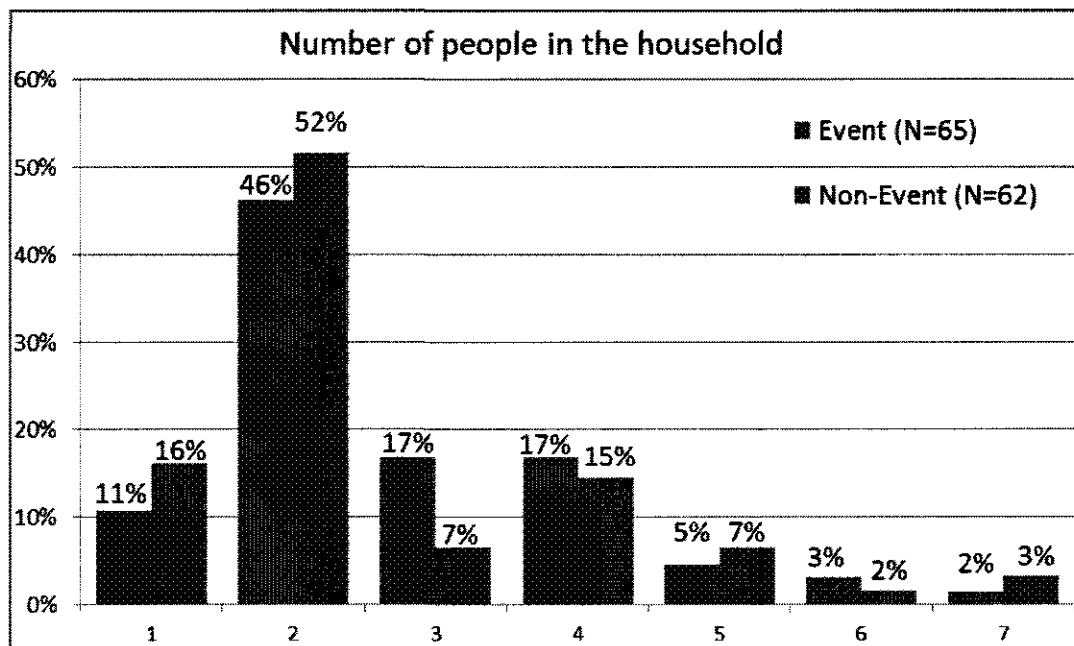


Figure 31. Population Distribution of Event and Non-Event Participants

Data provided by Duke Energy includes a variable for respondent age (this question was not asked as part of the survey). This distribution for Event and Non-Event participants is shown in Figure 32. Most participants surveyed were age 64 or younger (60.0% or 39 out of 65 Event participants, and 5.97% or 37 out of 62 Non-Event participants), with the most common age being between 55 and 64.

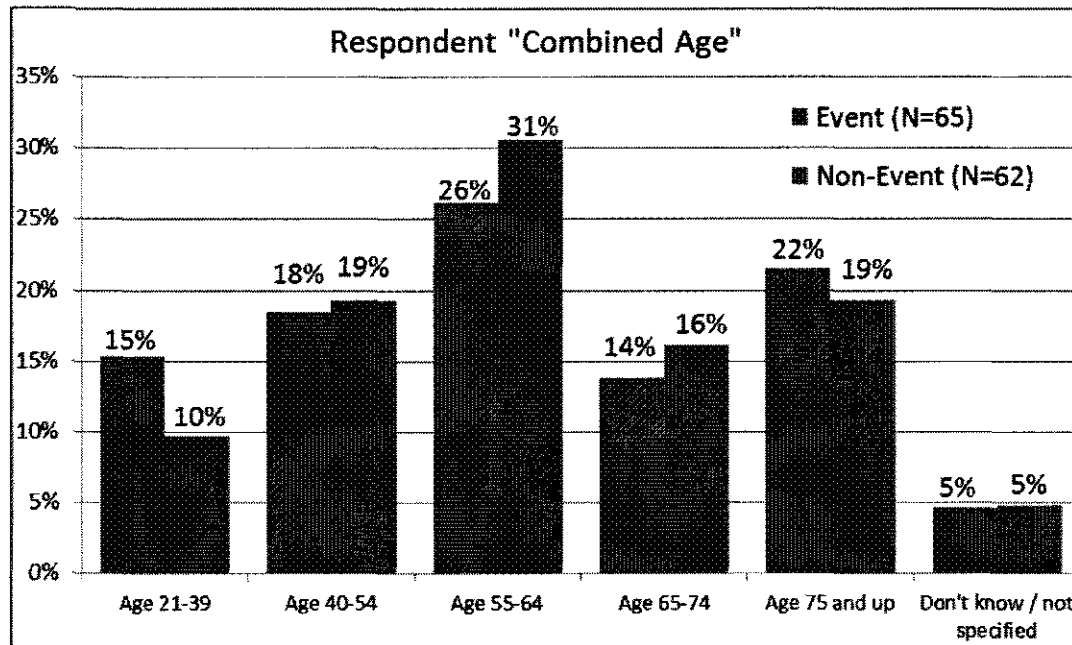


Figure 32. Age Distribution of Event and Non-Event Participants

Table 12 shows additional household descriptors from Duke Energy customer records: marital status, children in the household, income percentiles, education and ethnicity.

Table 12. Household Demographics

	Event (N=65)	Non-Event (N=62)
Marital Status: married	73.8%	59.7%
Marital Status: single	0.0%	3.2%
Marital Status: unknown	26.2%	37.1%
No children in household	67.7%	69.4%
One or two children in household	24.6%	25.8%
Three or more children in household	4.6%	3.2%
Children in household: unknown	3.1%	1.6%
Income percentile 1-25%	6.2%	14.5%
Income percentile 26-50%	13.8%	12.9%
Income percentile 51-75%	27.7%	17.7%
Income percentile 76-89%	32.3%	24.2%
Income percentile 90-99%	16.9%	29.0%
Income percentile unknown	3.1%	1.6%
Education: college graduate or better	50.8%	51.6%
Education: less than college graduate	46.2%	45.2%
Education: unknown	3.1%	3.2%
Ethnicity: Caucasian	80.0%	85.5%
Ethnicity: Non-Caucasian	10.8%	8.1%

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Ethnicity: Unknown	9.2%	6.5%
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Note: This data comes from Duke Energy customer records; these questions were not asked in this survey.

Table 13 presents data from Duke Energy customer records about survey participants' dwellings.

Table 13. Characteristics of Respondent Dwellings

	Event (N=65)	Non-Event (N=62)
Home owner	92.3%	88.7%
Home renter	3.1%	3.2%
Home ownership unknown	4.6%	8.1%
Single family structure	92.3%	93.5%
Multi-family structure	3.1%	3.2%
Home structure unknown	4.6%	3.2%
Home built 1949 or earlier	21.5%	16.1%
Home built during 1950's	15.4%	16.1%
Home built during 1960's	7.7%	9.7%
Home built during 1970's	18.5%	12.9%
Home built during 1980's	7.7%	12.9%
Home built during 1990's	13.8%	14.5%
Home built during 2000-2006	10.8%	9.7%
Home built during 2007-2012	0.0%	1.6%
Home age unknown	4.6%	6.5%
Lived in home 0-5 years	16.9%	22.6%
Lived in home 6-10 years	20.0%	22.6%
Lived in home 11-20 years	32.3%	25.8%
Lived in home 21-30 years	18.5%	19.4%
Lived in home more than 30 years	9.2%	8.1%
Lived in home unknown length of time	3.1%	1.6%
Estimated home value less than \$100,000	6.2%	4.8%
Estimated home value \$100,000-\$149,999	15.4%	22.6%
Estimated home value \$150,000-\$199,999	29.2%	12.9%
Estimated home value \$200,000-\$274,999	20.0%	19.4%
Estimated home value \$275,000-\$349,999	10.8%	25.8%
Estimated home value \$350,000 or more	13.8%	11.3%
Estimated home value unknown	4.6%	3.2%

Note: This data comes from Duke Energy customer records; these questions were not asked in this survey.

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

Self Direct rebates are available for completed Custom projects that have not previously received a Duke Energy Smart Saver® Custom Incentive. Self Direct rebates 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 type="checkbox"/> All sections of appropriate application(s) are completed	<input type="checkbox"/> Proof of payment.*	<input 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 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"/>
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**



Proposed energy efficiency measures may be eligible for Self-Direct Custom rebates if they clearly reduce electrical consumption and/or demand as compared to the appropriate baseline.

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

- Submitting this application does not guarantee a rebate will be approved.
- Rebates are based on electricity conservation only.
- Electric demand and/or energy reductions must be well documented with auditable calculations.
- Incomplete applications cannot be reviewed; all fields are required.

Refer to the complete list of Instructions and Disclaimers, beginning on page 6.

Notes on the Application Process

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 Ohio, Inc account manager or the Duke Energy Smart Saver® team at 1-866-380-9580.

Every application must include calculations of the baseline electrical usage and the electrical usage of the proposed high-efficiency equipment/system. These calculations are performed and submitted by the Duke Energy Ohio customer, or your designated equipment vendor / engineer. Application Part 2 worksheets and page 6 of this application contain additional guidance on acceptable calculations. *Complex or unique projects may require the use, at the applicant's expense, of modeling software.* Please contact the Duke Energy Smart Saver® with questions about these requirements.

If you do not receive an acknowledgement email within 1 day of submitting an application via online, email, or fax, or within 1 week of sending an application via mail, please call 1-866-380-9580. The acknowledgement email will provide with an estimated response time based on an initial assessment of your application. The application review may include some communication to resolve any questions about the project or to request additional information. Applications that are received complete without missing information have a faster review time.

There are three ways to submit your completed application form and excel worksheets.

Email: Complete, sign, scan and send this application form and attachments to:
SelfDirect@duke-energy.com (Note attachment size limit is applicable)

Fax: 513-629-5572

Mail: Duke Energy Mercantile Self Direct Custom Rebate
PO Box 2445
Spokane, WA 99210-2445

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



1. Contact Information (Required)

Duke Energy Customer Contact Information				
Company Name				
Address				
City		State		Zip Code
Project Contact				
Title				
Office Phone		Mobile Phone		Fax
E-mail Address				

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				
Primary Contact for Technical Questions				

Payment Information				
Payee Legal Company Name (as shown on Federal income tax return):				
Mailing Address				
City		State		Zip Code
Type of organization (check one) <input type="checkbox"/> Individual/Sole Proprietor <input 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:				
If the customer (Duke Energy account holder) is not the payment recipient, indicate who is: <input type="checkbox"/> Vendor <input type="checkbox"/> Other, type:				
If the vendor is to receive payment, customer must sign below. I hereby authorize payment of incentive directly to vendor or other:				
Customer Signature _____ Date ____/____/____ (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 (existing Duke Energy account number)
 - ☐ 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.
- C. When did you start and complete implementation?
Start date / (mm/yyyy) End date / (mm/yyyy)
- D. Are you also applying for Self-Direct Prescriptive rebates 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. List all assumptions about the baseline and proposed equipment energy use and operation schedule, or attach a document listing that information. Attach specification sheets for all proposed new equipment.

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)

¹ If your project involves some equipment that is eligible for prescriptive rebates and some equipment that is likely eligible for custom rebates, 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) _____, 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 Rebates 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 _____

Date _____

**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 type="checkbox"/> Completed the contact information for the Duke Energy customer? <input 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 type="checkbox"/> Answered the questions A-E, including providing a description of your project. <input type="checkbox"/> Completed and attached the lighting, compressed air, VFD, EMS and/or General worksheet(s)?
3. Signature	<input type="checkbox"/> Signed your name? <input type="checkbox"/> Printed your name? <input type="checkbox"/> Entered the date?
Supplementary information (Required)	<input 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 <u>each</u> 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 Saver® team at 1-866-380-9580.

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



Preferred Customized Calculation Tools

Please refer to the list below of the preferred software tools to use when calculating the baseline electrical usage and the electrical usage of the proposed high-efficiency equipment or system. Click on each software tool to learn more.

Software Tool	Category
<u>eQuest</u>	Nonresidential retrofits and new construction
<u>EnergyPlus</u>	Nonresidential retrofits and new construction; Whole building simulation
<u>Carrier® HAP</u>	HVAC
<u>Trane® Trace™</u>	HVAC
<u>DOE OIT Pumping System Assessment Tool (PSAT)</u>	Pumps
<u>MotorMaster+</u>	Motors
<u>AirMaster</u>	Air compressor systems
<u>Emerson™ Product Selection & Energy Analysis</u>	Refrigeration compressor retrofits using BIN analysis. ² For projects of approximately 250,000 kWh or less.
<u>DOE2.2R</u>	Refrigeration measures
<u>SkyCalc™</u>	Skylighting
<u>BinMaker®</u>	Weather data analysis tool
<u>AFT Fathom</u>	Fluid flow analysis for industrial systems

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



Instructions/Terms/Conditions

Note: Please keep for your records- do not submit with the application

1. Energy service companies or contractors may assist in preparing the application, but an authorized representative of the customer must sign this application to be eligible to participate in the Mercantile Self Direct Program. Completion of this application does not guarantee the approval of a Self Direct Custom Rebate.
2. Once all documentation requested in this application is received by *Duke Energy Ohio, Inc.*, and any follow-up information requested by *Duke Energy* is received, the rebate amount for each Energy Conservation Measure (ECM) will be communicated to the customer. The rebate amount will be based on ECM energy savings and ECM incremental installation cost.
3. All rebates require approval by the Public Utilities Commission of Ohio. *Duke Energy Ohio, Inc.* will submit an application for rebate on the customer's behalf upon customer attestation to program terms, conditions and requirements as outlined in the rebate offer letter and upon customer completion of attestation documents required by the Public Utilities Commission of Ohio.
4. *Duke Energy Ohio, Inc.* will issue a Self Direct Custom Rebate check, based on the approved rebate amount for each ECM, upon receiving approval from the Public Utilities Commission of Ohio. *Duke Energy Ohio, Inc.* does not guarantee PUCO approval.
5. With the application, the customer must provide a list of all sites where the ECMs were installed. *Duke Energy Ohio, Inc.* requests that sites of similar size, hours of operation and energy consuming characteristics be grouped together in one application for the determination of the rebate amount. The application should identify the site where each unique ECM was installed.
6. Based on the information submitted with the application and the information gathered both before and after the initial installation of the ECM, *Duke Energy Ohio, Inc.* will calculate the rebate amount for each ECM.
7. *Duke Energy Ohio, Inc.* may conduct random site inspections of a sample of the locations where the ECMs are installed to verify installation and operability of the ECMs and to obtain information needed to calculate the Approved Rebate Amount.
8. Customers are encouraged to retain copies of all forms, invoices and supporting documentation for their records.
9. Approved rebates are valid for 6 months from the date communicated to the customer by *Duke Energy Ohio, Inc.*, subject to the expiration of measure eligibility based on project completion dates and application submission deadlines as defined by PUCO. Customers are encouraged to execute their rebate offer contracts and PUCO-required affidavits promptly to ensure eligibility is not forfeited.

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



10. *Duke Energy Ohio, Inc* reserves the right to recover all unrecoverable costs associated with the project approval if the customer decides not to execute the rebate contract, after the project is approved by *Duke Energy Ohio, Inc*.
11. Projects financially supported by other funding sources will be evaluated on a case-by-case basis for potential partial funding from *Duke Energy Ohio, Inc*.
12. Participants must be *Duke Energy Ohio, Inc* nonresidential, mercantile customers with the project sites in the *Duke Energy Ohio, Inc* service territory.
13. Customers or trade allies may not use any *Duke Energy* logo without prior written permission.
14. Only trade allies registered with *Duke Energy* are eligible to participate.
15. All equipment must be new. Used or rebuilt equipment is not eligible for rebates. All old existing equipment must be removed on retrofit projects.
16. Disclaimers: *Duke Energy Ohio, Inc*
 - a. does not endorse any particular manufacturer, product or system design within the program;
 - b. will not be responsible for any tax liability imposed on the customer as a result of the payment of rebates;
 - c. does not expressly or implicitly warrant the performance of installed equipment. (Contact your contractor for details regarding equipment warranties.);
 - d. is not responsible for the proper disposal/recycling of any waste generated or obsolete or old equipment as a result of this project;
 - e. is not liable for any damage caused by the installation of the equipment nor for any damage caused by the malfunction of the installed equipment; and
 - f. reserves the right to change or discontinue this program at any time. The acceptance of program applications is determined solely by *Duke Energy Ohio, Inc*.

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 1-513-628-5572.

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

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 type="checkbox"/> All sections of appropriate application(s) are completed	<input type="checkbox"/> Proof of payment.*	<input 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 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 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.

Email the complete, signed application with all required documents to SelfDirect@duke-energy.com or fax to 513-629-5572.

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

Business 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 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 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 type="checkbox"/> All sections of application	<input type="checkbox"/> Invoice with make, model number, quantity and equipment manufacturer	<input type="checkbox"/> Tax ID number for payee	<input type="checkbox"/> Customer/vendor agree to Terms and Conditions
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Customer Information				
Customer/Business			Contact	
Phone			Account Number	
Street Address (Where incentive should be mailed)				
City		State	Zip Code	
Installation Street Address				
City		State	Zip Code	
E-mail Address				

*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 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	
Provide Tax ID Number for Payee	Customer Tax ID #	
	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.



NOTE: All Fixtures must be installed indoors, with the exception of Traffic and Pedestrian Signals and where otherwise noted.

Fixture Description	Ballast Model #	Ballast Cost	Ballast Qty	Ballast Hrs.	Ballast Total Cost	Ballast Total Hrs.	Ballast Total Savings
T8 8ft 2 lamp replacing T12 8ft 2 lamp (retrofit only)	Ballast model# Lamp model #	\$3.50		Hrs.			
T8 8ft 1 lamp replacing T12 8ft 1 lamp (retrofit only)	Ballast model# Lamp model #	\$2.50		Hrs.			
T8 4ft 4 lamp replacing T12 4ft 4 lamp (retrofit only)	Ballast model# Lamp model #	\$5.50		Hrs.			
T8 4ft 3 lamp replacing T12 4ft 3 lamp (retrofit only)	Ballast model# Lamp model #	\$4.50		Hrs.			
T8 4ft 2 lamp replacing T12 4ft 2 lamp (retrofit only)	Ballast model# Lamp model #	\$2.00		Hrs.			
T8 4ft 1 lamp replacing T12 4ft 1 lamp (retrofit only)	Ballast model# Lamp model #	\$1.50		Hrs.			
T8 3ft 4 lamp replacing T12 3ft 4 lamp (retrofit only)	Ballast model# Lamp model #	\$5.00		Hrs.			
T8 3ft 3 lamp replacing T12 3ft 3 lamp (retrofit only)	Ballast model# Lamp model #	\$3.25		Hrs.			
T8 3ft 2 lamp replacing T12 3ft 2 lamp (retrofit only)	Ballast model# Lamp model #	\$2.00		Hrs.			
T8 3ft 1 lamp replacing T12 3ft 1 lamp (retrofit only)	Ballast model# Lamp model #	\$1.50		Hrs.			
T8 2ft 4 lamp replacing T12 2ft 4 lamp (retrofit only)	Ballast model# Lamp model #	\$3.00		Hrs.			
T8 2ft 3 lamp replacing T12 2ft 3 lamp (retrofit only)	Ballast model# Lamp model #	\$2.10		Hrs.			
T8 2ft 2 lamp replacing T12 2ft 2 lamp (retrofit only)	Ballast model# Lamp model #	\$2.00		Hrs.			
T8 2ft 1 lamp replacing T12 2ft 1 lamp (retrofit only)	Ballast model# Lamp model #	\$1.50		Hrs.			

- 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.
- All fixtures must operate a minimum of 1,800 hours to be eligible.
- All fluorescent fixtures shall utilize electronic ballast and T-8 lamps.
- Ballasts shall have a power factor greater than 90%.
- Ballasts, harmonic distortion shall not exceed 20%. For 8-foot fluorescent ballasts, the total harmonic distortion shall not exceed 30%.
- 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 (heated and cooled enclosed space).
- All fixtures, lamps and ballasts must be UL certified and meet all applicable codes and regulations.
- High lumen lamp and low ballast factor ballast combinations are expected.
- Eligible T8 High Bays must have specular/mirror like or white reflectors and fixture efficiency must be >90%.
- *Manufacturers spec sheet is required and must indicate that it is a High Bay fixture and the fixture efficiency is > 90%. If spec sheet does not list efficiency, a photometric report will be required that indicates total fixture (Luminaire) efficiency rating or the 0-180 degree of lamp rating included in the zonal lumen summary chart.*
- Incentive capped at 50% of the equipment cost.
- New construction or replacement of failed equipment must apply for Self Direct Custom program.



NOTE: All Fixtures must be installed indoors, with the exception of Traffic and Pedestrian Signals and where otherwise noted.

Equipment Description	Ballast Model#	Cost	Quantity	Hours	Notes	Comments
T8 HO 8ft 1 lamp replacing T12 HO 8ft 1 lamp (retrofit only)	Ballast model# Lamp model #	\$5.00		Hrs.		
T8 HO 8ft 2 lamp replacing T12 HO 8ft 2 lamp (retrofit only)	Ballast model# Lamp model #	\$7.00		Hrs.		
T8 HB 4ft 3L replacing 150-249W HID (retrofit only)	Ballast model# Lamp model #	\$15.00		Hrs.		
T8 HB 4ft 4L replacing 250-399W HID (retrofit only)	Ballast model# Lamp model #	\$20.00		Hrs.		
T8 HB 4ft 6L replacing 400-999W HID (retrofit only)	Ballast model# Lamp model #	\$25.00		Hrs.		
T8 HB 4ft 8L replacing a 400-999W HID (retrofit only)	Ballast model# Lamp model #	\$20.00		Hrs.		
2 fixtures – T8 HB 4ft 8 Lamp (32W) replacing 1,000 W HID (2 for 1 replacement retrofit only)	Ballast model# Lamp model #	\$60.00		Hrs.		

- 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.
- All fixtures must operate a minimum of 1,800 hours to be eligible.
- All fluorescent fixtures shall utilize electronic ballast and T-8 lamps.
- Ballasts shall have a power factor greater than 90%.
- Ballasts, harmonic distortion shall not exceed 20%. For 8-foot fluorescent ballasts, the total harmonic distortion shall not exceed 30%.
- 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 (heated and cooled enclosed space).
- All fixtures, lamps and ballasts must be UL certified and meet all applicable codes and regulations.
- High lumen lamp and low ballast factor ballast combinations are expected.
- Eligible T8 High Bays must have specular/mirror like or white reflectors and fixture efficiency must be >90%.
- *Manufacturers spec sheet is required and must indicate that it is a High Bay fixture and the fixture efficiency is > than 90%. If spec sheet does not list efficiency, a photometric report will be required that indicates total fixture (Luminaire) efficiency rating or the 0-180 degree of lamp rating included in the zonal lumen summary chart.*
- Incentive capped at 50% of the equipment cost.
- New construction or replacement of failed equipment must apply for Self Direct Custom program.



Activity Description	Ballast and Lamp Model Number	Estimated Cost (\$)	Hours	Estimated Operating Hours (Hrs.)	Estimated Cost (\$)	Estimated Operating Hours (Hrs.)	Estimated Cost (\$)
T8 8ft 1 lamp replacing T12 8 ft 2 lamp (retrofit only)*	Ballast model# Lamp model #	\$5.00		Hrs.			
T8 4ft 2 lamp replacing T12 4ft 3 lamp (retrofit only)*	Ballast model# Lamp model #	\$2.50		Hrs.			
T8 4ft 1 lamp replacing T12 4ft 2 lamp (retrofit only)*	Ballast model# Lamp model #	\$2.50		Hrs.			
T8 3ft 3 lamp replacing T12 3ft 4 lamp (retrofit only)*	Ballast model# Lamp model #	\$2.00		Hrs.			
T8 3ft 2 lamp replacing T12 3 ft 3 lamp (retrofit only)*	Ballast model# Lamp model #	\$2.00		Hrs.			
T8 3ft 1 lamp replacing T12 3 ft 2 lamp (retrofit only)*	Ballast model# Lamp model #	\$2.00		Hrs.			
T8 2ft 3 lamp replacing T12 2 ft 4 lamp (retrofit only)*	Ballast model# Lamp model #	\$1.50		Hrs.			
T8 2ft 2 lamp replacing T12 2 ft 3 lamp (retrofit only)*	Ballast model# Lamp model #	\$1.50		Hrs.			
T8 2ft 1 lamp replacing T12 2ft 2 lamp (retrofit only)*	Ballast model# Lamp model #	\$1.50		Hrs.			

- 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.
- All fixtures must operate a minimum of 1,800 hours to be eligible.
- All fluorescent fixtures shall utilize electronic ballast and T-8 lamps.
- Ballasts shall have a power factor greater than 90%.
- Ballasts, harmonic distortion shall not exceed 20%. For 8-foot fluorescent ballasts, the total harmonic distortion shall not exceed 30%.
- 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.
- All fixtures, lamps and ballasts must be UL certified and meet all applicable codes and regulations.
- Incentive capped at 50% of the equipment cost.
- New construction or replacement of failed equipment must apply for Self Direct Custom program.



Item Description	Ballast Model #	Unit Cost	Qty	Annual Operating Hrs	Cost	Estimated Savings	Total Incentive
High Performance T8 4ft 2 lamp fixture replacing T12 8ft 1 lamp fixture							
High Performance T8 4ft 2 lamp fixture replacing T12 8ft 1 lamp fixture	Ballast model#	\$5.00		Hrs.			
	Lamp model #						
High Performance T8 4ft 4 lamp fixture replacing T12 8ft 2 lamp fixture							
High Performance T8 4ft 4 lamp fixture replacing T12 8ft 2 lamp fixture	Ballast model#	\$5.00		Hrs.			
	Lamp model #						
High Performance T8 4ft 2 lamp fixture replacing T12 High Output 8ft 1 lamp fixture							
High Performance T8 4ft 2 lamp fixture replacing T12 High Output 8ft 1 lamp fixture	Ballast model#	\$10.00		Hrs.			
	Lamp model #						
High Performance T8 4ft 4 lamp fixture replacing T12 High Output 8ft 2 lamp fixture							
High Performance T8 4ft 4 lamp fixture replacing T12 High Output 8ft 2 lamp fixture	Ballast model#	\$12.50		Hrs.			
	Lamp model #						
High Performance T8 4ft 1 lamp fixture replacing T12 4ft 1 lamp							
High Performance T8 4ft 1 lamp fixture replacing T12 4ft 1 lamp	Ballast model#	\$3.00		Hrs.			
	Lamp model #						
High Performance T8 4ft 2 lamp fixture replacing T12 4ft 2 lamp							
High Performance T8 4ft 2 lamp fixture replacing T12 4ft 2 lamp	Ballast model#	\$4.00		Hrs.			
	Lamp model #						
High Performance T8 4ft 3 lamp fixture replacing T12 4 ft 3 lamp							
High Performance T8 4ft 3 lamp fixture replacing T12 4 ft 3 lamp	Ballast model#	\$6.00		Hrs.			
	Lamp model #						
High Performance T8 4ft 4 lamp fixture replacing T12 4 ft 4 lamp							
High Performance T8 4ft 4 lamp fixture replacing T12 4 ft 4 lamp	Ballast model#	\$8.00		Hrs.			
	Lamp model #						
Reduced Wattage T8 4ft 1 lamp of 28W or less & ballast replacing standard T12 4ft 1 lamp - 34 W							
Reduced Wattage T8 4ft 1 lamp of 28W or less & ballast replacing standard T12 4ft 1 lamp - 34 W	Ballast model#	\$4.00		Hrs.			
	Lamp model #						
Reduced Wattage T8 4ft 2 lamp of 28 W or less & ballast replacing standard T12 4 ft 2 lamp - 34 W							
Reduced Wattage T8 4ft 2 lamp of 28 W or less & ballast replacing standard T12 4 ft 2 lamp - 34 W	Ballast model#	\$5.00		Hrs.			
	Lamp model #						
Reduced Wattage T8 4ft 3 lamp of 28 W or less & ballast replacing standard T12 4 ft 3 lamp - 34 W							
Reduced Wattage T8 4ft 3 lamp of 28 W or less & ballast replacing standard T12 4 ft 3 lamp - 34 W	Ballast model#	\$7.00		Hrs.			
	Lamp model #						
Reduced Wattage T8 4ft 4 lamp of 28 W or less & ballast replacing standard T12 4 ft 4 lamp - 34 W							
Reduced Wattage T8 4ft 4 lamp of 28 W or less & ballast replacing standard T12 4 ft 4 lamp - 34 W	Ballast model#	\$9.00		Hrs.			
	Lamp model #						

- 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.
- All fixtures must operate a minimum of 1,600 hours to be eligible.
- All fluorescent fixtures shall utilize electronic ballast and T-8 lamps.
- Ballasts shall have a power factor greater than 90%.
- Ballasts, harmonic distortion shall not exceed 20%.
- 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.
- Replacement must result in energy savings to qualify.
- High lumen lamp and low ballast factor ballast combinations are expected.
- Normal or low ballast factor ballasts must be utilized to be eligible.
- Reduced watt T8 lamps should not be used in dimming applications unless the lamp and ballast manufacturers have approved a specific application for dimming or frequent switching. May demonstrate dim light, spiraling, pulsing and other undesirable behavior in cooler temperature rooms and while warming up. System performance varies based on lamp or ballast components.
- Incentive capped at 50% of the equipment cost.
- New construction or replacement of failed equipment must apply for Self Direct Custom program.



Fluorescent Lamp Fixture Replaces Existing Fluorescent T12 HO (Fixture must be new and in good condition)	Ballast and Lamp Information	Incentive Qty (per fixture)	Annual Operating Hours (1,000)	Estimated Savings (\$/yr)	Estimated Payback (Years)	Notes
T12 fixture replaced with T5 electronic ballast						
T5 4ft (28 watt) 1 lamp replacing T12 4ft 1 lamp (retrofit only)	Ballast model# Lamp model #	\$2.50	Hrs.			
T5 4ft (28 watt) 2 lamp replacing T12 4ft 2 lamp (retrofit only)	Ballast model# Lamp model #	\$4.00	Hrs.			
T5 4ft (28 watt) 3 lamp replacing T12 4ft 3 lamp (retrofit only)	Ballast model# Lamp model #	\$5.00	Hrs.			
T5 4ft (28 watt) 4 lamp replacing T12 4ft 4 lamp (retrofit only)	Ballast model# Lamp model #	\$6.00	Hrs.			
T5 HO 4ft 1 (54 watt) lamp replacing 34W T12 4ft 2 lamp (retrofit only)	Ballast model# Lamp model #	\$3.00	Hrs.			
T5 HO 4ft 2 (54 watt) lamp replacing 34W T12 4ft 4 lamp (retrofit only)	Ballast model# Lamp model #	\$4.50	Hrs.			
T5 HO 4ft 2 (54 watt) lamp replacing 60W T12 8 ft 2 lamp (retrofit only)	Ballast model# Lamp model #	\$4.50	Hrs.			
T5 HO 4ft 3 (54 watt) lamp replacing 95W T12 HO 8ft 2 lamp (retrofit only)	Ballast model# Lamp model #	\$5.50	Hrs.			
T5 HO 4ft 4 (54 watt) lamp replacing 60W T12 8ft 4 lamp (retrofit only)	Ballast model# Lamp model #	\$6.50	Hrs.			
T5 HO 4ft 4 (54 watt) lamp replacing 95W T12 VHO 8ft 2 lamp (retrofit only)	Ballast model# Lamp model #	\$6.50	Hrs.			
T5 HO HB 2L replacing 150-249W HID (retrofit only) Fixture efficiency	Ballast model# Lamp model #	\$15.00	Hrs.			
T5 HO HB 3L replacing 250-399W HID (retrofit only) Fixture efficiency	Ballast model# Lamp model #	\$20.00	Hrs.			
T5 HO HB 4L replacing 400-999W HID (retrofit only) Fixture efficiency	Ballast model# Lamp model #	\$25.00	Hrs.			
T5 HO HB 6L replacing 400-999W HID (retrofit only) Fixture efficiency	Ballast model# Lamp model #	\$20.00	Hrs.			
T5 HO HB 8L replacing 750-999W HID (retrofit only) Fixture efficiency	Ballast model# Lamp model #	\$37.50	Hrs.			
2 fixtures – T5 HO HB 6 Lamp replacing 1,000 W HID (2 for 1 retrofit only) Fixture efficiency	Ballast model# Lamp model #	\$60.00	Hrs.			

- 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.
- All fixtures must operate a minimum of 1,800 hours to be eligible.
- All fluorescent fixtures shall utilize electronic ballast and T-5 lamps.
- Ballasts shall have a power factor greater than 90%.
- Ballasts, harmonic distortion shall not exceed 20%.
- 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
- All fixtures, lamps and ballasts must be UL certified and meet all applicable codes and regulations.
- Replacement must result in energy savings to qualify.
- Eligible T5 High Bays must have specular/mirror like or white reflectors and fixture efficiency must be >90%. *Manufacturers spec sheet is required and must indicate that it is a High Bay fixture and the fixture efficiency is > than 90%. If spec sheet does not list efficiency, a photometric report will be required that indicates total fixture (Luminaire) efficiency rating or the 0-180 degree of lamp rating included in the zonal lumen summary chart.*
- Incentive capped at 50% of the equipment cost.
- New construction or replacement of failed equipment must apply for Self Direct Custom program.



Equipment Description (Include Manufacturer, Model Number, and Quantity)	Equipment Model Number	Standard Unit Price	Quantity	Annual Operating Hours (Minimum of 1,800)	Estimated Savings (\$/yr)	Estimated Payback (Months)	Notes
T8 Electronic Ballast and High Performance T8 Lamps T8 lamps must be replaced with high performance lamps. All equipment must be new and must be installed on the CEE high performance T8 fixture. T8 lamps must be replaced with high performance lamps.							
T8 4ft High Performance 1 lamp & ballast replacing standard T8 4ft 1 lamp fixture	Ballast model# Lamp model #	\$2.00		Hrs.			
T8 4ft High Performance 2 lamp & ballast replacing standard T8 4ft 2 lamp fixture	Ballast model# Lamp model #	\$3.00		Hrs.			
T8 4ft High Performance 3 lamp & ballast replacing standard T8 4ft 3 lamp fixture	Ballast model# Lamp model #	\$3.10		Hrs.			
T8 4ft High Performance 4 lamp & ballast replacing standard T8 4ft 4 lamp fixture	Ballast model# Lamp model #	\$6.00		Hrs.			
T8 Fluorescent Ballast and Reduced Wattage High Performance T8 Lamps T8 lamps must be replaced with reduced wattage lamps. All equipment must be new and must be installed on the CEE high performance T8 fixture. T8 lamps must be replaced with reduced wattage lamps.							
Reduced Wattage T8 4ft 1 lamp of 28W or less & ballast replacing standard T8 4ft 1 lamp - 32W	Ballast model# Lamp model #	\$2.00		Hrs.			
Reduced Wattage T8 4ft 2 lamp of 28W or less & ballast replacing standard T8 4ft 2 lamp - 32W	Ballast model# Lamp model #	\$3.00		Hrs.			
Reduced Wattage T8 4ft 3 lamp of 28W or less & ballast replacing standard T8 4ft 3 lamp - 32W	Ballast model# Lamp model #	\$5.00		Hrs.			
Reduced Wattage T8 4ft 4 lamp of 28W or less & ballast replacing standard T8 4ft 4 lamp - 32W	Ballast model# Lamp model #	\$6.00		Hrs.			
Relamp T8 4ft 32W fixtures with Reduced Wattage T8 lamps 28 watts or less	Ballast model# Lamp model #	\$.25 / lamp		Hrs.			

- 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.
- All fixtures must operate a minimum of 1,800 hours to be eligible.
- All fluorescent fixtures shall utilize electronic ballast and T-8 lamps.
- Ballasts shall have a power factor greater than 90%.
- Ballasts, harmonic distortion shall not exceed 20%.
- 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.
- Replacement must result in energy savings to qualify.
- High lumen lamp and low ballast factor ballast combinations are expected.
- Reduced watt T8 lamps should not be used in dimming applications unless the lamp and ballast manufacturers have approved a specific application for dimming or frequent switching. May demonstrate dim light, spiraling, pulsing and other undesirable behavior in cooler temperature rooms and while warming up. System performance varies based on lamp or ballast components.
- Incentive capped at 50% of the equipment cost.
- New construction or replacement of failed equipment must apply for Self Direct Custom program.



42W 8 lamp HB CFL replacing 400W HID (retrofit only) Model Number	\$25.00		Hrs.			
CFL – Screw In (lamp only) replacing an incandescent (retrofit only) Model Number	\$0.75 / lamp		Hrs.			
CFL – Screw-In dimmable or 3-way bulb replacing an incandescent dimmable or 3-way bulb (retrofit only) Model Number	\$1.00 / lamp		Hrs.			
CFL – Hardwired Fixture replacing incandescent fixture (only pin based CFL's qualify) Model Number	\$5.00 / fixture		Hrs.			
Up to 30W CFL Flood Lamp with Reflector replacing 100W or less incandescent (retrofit only) Model Number	\$1.50 / lamp		Hrs.			
33W – 115W CFL lamp replacing 100 W or more incandescent Model Number	\$2.50 / lamp		Hrs.			
Energy Star LED Lamps						
Replace incandescent bulbs with Energy Star LED (retrofit only) LED lamps must be listed on the Energy Star Qualified Light Bulbs list to qualify. http://www.energystar.gov/index.cfm?fuseaction=iledi.display_products_pdf Model Number	\$5.00 / lamp		Hrs.			
Replace 60-100W incandescent with ENERGY STAR qualified LED downlight 18 Watts or less. (retrofit only) Product must appear on ENERGY STAR Qualified LED Lighting qualified products list, and must contain the word "downlight". http://www.energystar.gov/index.cfm?fuseaction=ssldisplay_products_com_pdf Model Number	\$7.50 / fixture		Hrs.			

- 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.



320W Pulse Start Halide replacing 400W HID (retrofit only) **check one <input type="checkbox"/> R <input type="checkbox"/> FE Model Number	\$12.50		Hrs.			
20W Ceramic Metal Halide fixture replacing <input type="checkbox"/> Incandescent or <input type="checkbox"/> Halogen of at least 100 W Model Number	\$15.00		Hrs.			
39W Ceramic Metal Halide fixture replacing <input type="checkbox"/> Incandescent or <input type="checkbox"/> Halogen of at least 150 W Model Number	\$15.00		Hrs.			
50W Ceramic Metal Halide fixture replacing <input type="checkbox"/> Incandescent or <input type="checkbox"/> Halogen for a total of 195W Model Number	\$15.00		Hrs.			
70W Ceramic Metal Halide fixture replacing <input type="checkbox"/> Incandescent or <input type="checkbox"/> Halogen for a total of 225W Model Number	\$15.00		Hrs.			
100W Ceramic Metal Halide fixture replacing <input type="checkbox"/> Incandescent or <input type="checkbox"/> Halogens for a total of 270W Model Number	\$15.00		Hrs.			
150W Ceramic Metal Halide fixture replacing <input type="checkbox"/> Incandescent or <input type="checkbox"/> Halogens for a total of 360W Model Number	\$15.00		Hrs.			
25 W or less Ceramic Metal Halide with integral ballast replacing 70 W or greater incandescent flood light Model Number	\$5.00/lamp		Hrs.			

- 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.
- Incentives for pulse start metal halide fixtures are for 320w pulse start metal halide lamp/ballast combinations. In a retrofit application, the fixture must be hard-wired ballast retrofit or new fixture. Screw in retrofit lamps do not qualify. Pulse start lamp wattage must be lower than existing probe start lamp wattage.
- Ceramic Metal Halide Incentive is for complete hardwired fixtures containing ceramic metal halide lamp and electronic ceramic metal halide ballast.
- Incentive capped at 50% of the equipment cost.
- New construction or replacement of failed equipment must apply for Self Direct Custom program.



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					
LED Case Lighting Sensor Controls Check one <input type="checkbox"/> R <input type="checkbox"/> NC <input type="checkbox"/> FE 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.



Exterior LED or Induction fixture replacing up to 175W HID Model Number	\$20 / fixture					
Exterior LED or Induction fixture replacing 176W – 250W HID Model Number	\$25 / fixture					
Exterior LED or Induction fixture replacing 251W – 400W HID Model Number	\$40 / fixture					
Exterior LED or Induction fixture replacing > 400 W HID Model Number	\$75/ fixture					
Garage LED or Induction fixture replacing up to 175 W HID Model Number	\$50/ fixture					
Garage LED or Induction fixture replacing 176W – 250W HID Model Number	\$75/ fixture					
Garage LED or Induction fixture replacing 251W – 400 W HID Model Number	\$125/ fixture					
Garage LED or Induction fixture replacing > 400 W HID Model Number	\$200/ fixture					
LED Auto Traffic Signals (replacing incandescent) Model Number	\$6.25 / lamp					
LED Pedestrian Signals (replacing incandescent) Model Number	\$12.50/ signal					

- Replacement must result in energy savings to qualify
- 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.
- All equipment must be new to be eligible for incentives. Used equipment is *not* eligible for incentives.
- Outdoor and garage LED and induction lighting must result in a total power reduction of 40% or more.
- Outdoor and garage LEDs should be listed on either the Energy Star or Design Lights consortium qualifying products lists:
 1. http://www.energystar.gov/index.cfm?fuseaction=ssl.display_products_com_pdf
 2. <http://www.designlights.org/documents/NEEPDLCQPL.xls>
- Traffic and pedestrian signals using LED lights must replace conventional incandescent signals.
- Incentive capped at 50% of the equipment cost.
- New construction or replacement of failed equipment must apply for Self Direct Custom program.



Program Requirements

Incentive Eligibility

- Incentives are only available to customers on a Duke Energy Ohio non-residential rate.
- Duke Energy Customers who purchase electric generation from an alternative supplier are eligible to participate.
- Incentive will not be paid until eligible equipment has been installed, is available to operate, and verification has been completed by Duke Energy staff as noted in the Term & Conditions stated below.
- Duke Energy reserves the right to revise incentive levels and/or qualifying efficiency levels at any time.
- Customer may assign the incentive to the vendor who installed/supplied the equipment. The customer's signature is required in the Payment Information section on page 1 of this form to assign the incentive to the vendor. Customer agrees that such an action constitutes an irrevocable assignment of the incentive. This assigned incentive must reduce the purchase price paid for the equipment by an equivalent amount.
- Leased equipment is eligible for incentives providing the equipment meets the program requirements and the customer provides the required documentation noted on the Incentive Application Process page of this application.
- Any equipment which, either separately or as part of a project, has or will receive an incentive from any other Duke Energy program is ineligible.
- In no case will Duke Energy pay an incentive above the actual cost of the new equipment.
- Incentive recipient assumes all responsibilities for any tax consequences resulting from Duke Energy incentive payment.
- To qualify for Duke Energy incentives, applicants who provide their social security number as their federal tax identification number for tax purposes must sign and return the "Customer consent to release personal information" form ("Consent Form") along with the application. Incentive applications are processed by a 3rd party vendor. The 3rd party vendor is responsible for mailing the 1099 form at the end of the calendar year for tax filing. Duke Energy and the 3rd party vendor have signed a confidentiality agreement to protect your personal information. If your social security number is your federal tax ID number and you elect not to sign the Consent Form, please do not send Duke Energy the application, as you will not be qualified to participate in the incentive program.



Terms and Conditions

I certify that this premise is served by Duke Energy (or an affiliate of Duke Energy), that the information provided herein is accurate and complete, and that I have purchased and installed the high efficiency equipment (indicated herein) for the business facility listed herein and not for resale. Attached is an itemized invoice for the indicated installed equipment. I understand that the proposed incentive payment from Duke Energy is subject to change based on verification and Duke Energy approval. I agree to Duke Energy verification of both the sales transaction and equipment installation which may include a site inspection from a Duke Energy representative or Duke Energy agent. I understand that I am not allowed to receive more than one incentive from Duke Energy on any piece of equipment. I also understand that my participation in the program may be taxable and that my company is solely responsible for paying all such taxes. I hereby agree to indemnify, hold harmless and release Duke Energy and its affiliates from any actions or claims in regards to the installation, operation and disposal of equipment (and related materials) covered herein including liability from an incidental or consequential damages. Duke Energy does not endorse any particular manufacturer, product or system design within these programs; does not expressly or implicitly warrant the performance of installed equipment (Contact your contractor for details regarding equipment warranties) and is not liable for any damage caused by the installation of the equipment nor for any damage caused by the malfunction of the installed equipment.



Incentive Application Instructions

IMPORTANT NOTICE

Delays in processing incentive payments will occur if required documentation is not included with completed application(s).

1. Contact Duke Energy toll free at 866-380-9580 to confirm customer eligibility. Applications are available for download at www.duke-energy.com.
2. Review program and equipment requirements on the incentive application. (Page12)
3. Purchase and install eligible energy-efficient equipment.
4. The following items must be included to verify projects. If they are not included, it will delay payment of incentive.
 - A. Itemized invoice for all equipment installed to include:
 - a. Equipment cost
 - b. Quantity per equipment type installed
 - c. Model # for each equipment type
 - d. Manufacturer's data sheet for each equipment model #.
 - B. Make sure the account number provided on the cover page (customer information section) is associated with the location where the equipment was installed. If the account # does not match the address where the equipment was installed, the application will be rejected as ineligible.
 - C. Provide required tax ID# for payee.
 - D. Customer must sign and date the application after reviewing the Terms and Conditions. If customer wishes to assign payment of the incentive directly to the vendor, the customer should circle the appropriate payee in the Payment Information section of the application and sign their name to authorize payment.
5. Duke Energy may require site verification of projects that have been self-installed, prior to payment of incentive.
6. Email the complete, signed application with all required documents to SelfDirect@duke-energy.com or fax to 513-629-5572.
7. A percentage of equipment installations will be site verified for quality assurance purposes. Once selected, a Duke Energy representative will contact the customer to arrange for the inspection. All incentive payments related to the project will be withheld until site verification is complete. There is no charge to the customer for these inspections.



Mercantile Self Direct Rebate Program Requirements for Vendor Participation

Program Overview

- Duke Energy offers it's eligible non-residential customers the opportunity to increase profitability through energy cost savings and contribute to a cleaner environment by participating in our Mercantile Self Direct Incentive Program.
 - Under the Duke Energy Mercantile Self Direct Incentive Program, Vendor is defined as any third party who:
 - Promotes the sale and installation of the high efficiency equipment for the customer. The Vendor will ensure that the eligible equipment is installed and operating before submitting the application or assisting the customer in completing the application.
 - Is responsible for the product sale only and is not required to ensure installation of the eligible equipment.
 - All license requirements, if any, are solely the Vendor's responsibility. Participating Vendors include equipment contractors, equipment Vendors, equipment manufacturers and distributors, energy service companies, etc. The typical Vendor role is to contact/solicit eligible customers building new or retrofitting existing facilities and encourage the installation of the energy-efficient equipment offered in Duke Energy's program.
 - Incentives are paid directly to customers unless the customer assigns the incentive to the Vendor. The assigned incentive must reduce the purchase price paid for the equipment by an equivalent amount. Incentives are taxable to the entity who receives the rebate check. Rebates greater than \$600 will be reported to the IRS unless documentation of tax exempt status is provided.
- Vendors can sign up to be on Duke Energy's Web site as a participating Vendor and be added to Duke Energy's e-mail distribution by emailing the Vendor Participation Agreement (VPA) to SelfDirect@duke-energy.com or faxing to 513-629-5572.
- ### **Guidelines for Vendor Activities**
- Vendors shall sign and return the attached VPA to Duke Energy prior to soliciting customer participation or when submitting an application. Rebate payments will not be released to a Vendor unless a signed VPA is on file.
 - Vendors shall not misrepresent the nature of their role in the program. In particular, Vendors shall not state or imply to customers, or any persons, that the Vendor is employed by or working on Duke Energy's behalf.
 - Vendors may not represent to customers that Duke Energy endorses their specific products or services. Duke Energy does not endorse specific products, services, or companies – only energy-efficient technologies.
 - Vendors may advise customers of their option to have Duke Energy make their rebate check(s) payable to the Vendor if the customer's rebate amount is being deducted from the total sale price in advance. The customer must complete and sign the Payment Release Authorization section of the Mercantile Self Direct Incentive Program Application.
 - Vendors may use the words "Duke Energy's Mercantile Self Direct Incentive Program" in promotional materials or advertisements. Vendors may use the name Duke Energy in a text format to describe the Mercantile Self Direct Incentive Program, but are not permitted to use Duke Energy's logos.
 - For Vendors who properly install the qualifying equipment, the equipment shall be installed and operating prior to an application being submitted. A percentage of each Vendor's installations will be subject to inspection by Duke Energy for verifying that the equipment is installed and operating. Vendors demonstrating high failure rates (based on a statistically significant sample) will have 100% of subsequent jobs inspected or may have their participation in the Mercantile Self Direct Incentive Program revoked by Duke Energy in it's sole discretion.
 - Vendors shall provide customers with applicable equipment warranty information for all measures installed. Vendors shall provide the required documentation for customers to apply for the rebate (invoices with model numbers and quantities, specification sheets for installed equipment, etc.) and assist customers in filling out the application.
 - Vendors shall comply with all applicable local, state, and federal laws and codes when performing installation and related functions.
 - Duke Energy reserves the right to revoke a Vendor's participation in Mercantile Self Direct Incentive Program if, in Duke Energy's sole judgment, the Vendor fails to comply with the program's guidelines and requirements.
 - Mercantile Self Direct Incentive Program offerings may be modified or terminated without prior notice. Check Duke Energy's Web site for current program status.

For more information, call 1-866.380.9580 or visit www.duke-energy.com.



Mercantile Self Direct Incentive Program

Technology	Responsible for sales and not installs*	Responsible for sales and Installation*	Technology	Responsible for sales and not installs*	Responsible for sales and Installation*
Lighting	<input type="checkbox"/>	<input type="checkbox"/>	Thermal Storage	<input type="checkbox"/>	<input type="checkbox"/>
Heating Ventilation & Cooling	<input type="checkbox"/>	<input type="checkbox"/>	Pumps/Motors/VFD's	<input type="checkbox"/>	<input type="checkbox"/>
Food Service	<input type="checkbox"/>	<input type="checkbox"/>	Chillers	<input type="checkbox"/>	<input type="checkbox"/>
Water Heating	<input type="checkbox"/>	<input type="checkbox"/>	Refrigeration	<input type="checkbox"/>	<input type="checkbox"/>
Process Equipment (air compressors, injection molding, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	Window Film	<input type="checkbox"/>	<input type="checkbox"/>

* Check all that apply

Vendors who wish to be listed as a Mercantile Self Direct Incentive Program participating Vendor shall complete this form. A signed copy of this form must be on file at Duke Energy in order for the Vendor to receive incentive payments. Fax form to 513-629-5572 or email to SelfDirect@duke-energy.com.

I have read and understand the Mercantile Self Direct Incentive Program Requirements for Vendor Participation, and I agree to comply with all requirements set forth therein. By signing this agreement, I agree to provide my customers with information and documentation that is true and accurate to the best of my knowledge. I hereby represent and warrant that the Tax ID and Vendor Tax Status provided below are true and accurate. I agree that any confidential information concerning my customer, including but not limited to Duke Energy service account information, will be used for the sole purpose of facilitating the customer's participation in the Mercantile Self Direct Incentive Program. Further, I understand that I am responsible for making sure everyone working for me understands the requirements prior to soliciting customer participation.

Vendor Federal Tax ID Number

To qualify for Duke Energy incentives, applicants who provide their social security number as their federal tax identification number for tax purposes must sign and return the "Customer consent to release personal information" form ("Consent Form") along with the application. Incentive applications are processed by a third-party vendor. The third-party vendor is responsible for mailing the 1099 form at the end of the calendar year for tax filing. Duke Energy and the third-party vendor have signed confidentiality agreement to protect your personal information. If your social security number is your federal tax ID number and you elect not to sign the Consent Form, please do not send Duke Energy the application, as you will not be qualified to participate in the incentive program.

Vendor Tax Status ☐ Corporation ☐ Individual/Sole Proprietor ☐ Partnership ☐ Other

Contact me via ☐ Phone ☐ E-Mail ☐ Mail

Company Name	
Mailing Address	
City, State, Zip	
Phone/Fax	
Primary E-mail Address	
Secondary E-mail Address	
Vendor Signature	
Title	
Print Name	
Date	

For more information, call 1-866-380-9580 or visit www.duke-energy.com.



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

Date

Customer Name

Company Name

Address

City, State, Zip

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

Dear Name:

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 **\$AMOUNT** has been proposed for your **PROJECTS** completed in the **XXXX** calendar years. 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,

A handwritten signature in black ink, appearing to read 'Grady Reid, Jr.'.

Grady Reid, Jr
Product Manager
Mercantile Self Direct Rebates

cc: Account Manager

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

☐ Rebate is accepted.

☐ Rebate is declined.

By accepting this rebate, NAME 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, NAME 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, NAME 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

Printed Name

Date

Proposed Rebate Amounts

Measure	Estimated Project Cost (in \$)	Proposed Rebate Amount
ECM-1		
ECM-2		
ECM-3		
ECM-4		
ECM-5		
Total		

Ohio | Public Utilities Commission

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

Case No.: ____ - ____ -EL-EEC

State of _____ :

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

1. I am the duly authorized representative of:

[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 _____ day of _____,

Month/Year

Signature of official administering oath

Print Name and Title

My commission expires on _____