

2019 New Construction Application to Participate

How to participate:

1. Complete both sides of the application.
2. Submit this agreement directly to Seventhwave at the address on the reverse side.

OWNER INFORMATION

Name _____
Company _____
Address _____
City _____ State _____ Zip _____
Business Phone _____ Alternate Phone _____
Email Address _____

PROPOSED PROJECT INFORMATION

Primary Building Type: *(must be non-residential)*

- Industrial Office Retail Service Education Local Government Warehouse Multi-family
 Healthcare Other _____

Eligible Project Types: Major Renovation New Facility New Addition to Existing Facility

Project Name _____

Project Site Address _____

Project City _____ State _____ Zip _____

Description of Project and Primary Space Type(s) _____

Design Start Date _____ Est Date for MEP Equipment Bid Issuance _____

Est. Construction Start Date _____ Est. Project Completion Date _____

Current Project Phase _____ Design-Build Design-Bid-Build

Est. Project Budget (if available) _____ Electric Utility for Bldg. _____

Account Representative _____ Natural Gas Utility for Bldg. _____

Other Efficiency Programs Contacted _____

Building Systems to be Considered: Lighting Mechanical Envelope Other _____

Building Area (square feet) _____

CUSTOMER SIGNATURE

WPPI Energy reserves the right to discontinue or change any program at any time. The acceptance of program applications is determined solely by WPPI Energy. Visit www.wppienergy.org to learn more.

CUSTOMER SIGNATURE (Read and Sign)

I certify that the project site is located within the electric service territory of a WPPI Energy member utility, and that all information provided within this application is correct to the best of my knowledge.

NAME (print) _____

PHONE NUMBER _____

AUTHORIZED SIGNATURE _____

DATE _____

Please return the completed and signed application to:

WPPI Energy- Jim Schwingle

Email: jschwingle@wppienergy.org

WPPI Energy New Construction Program 1425

Corporate Center Dr.

Sun Prairie, WI 53590

Phone: 608-825-1759

Program representative and further information:

Contact your local WPPI Energy Services Representative.

CONTACT INFORMATION FOR PROJECT TEAM

ARCHITECT OR DESIGN TEAM LEADER

Name _____

Company _____

Address _____

City _____ State _____ Zip _____

Business Phone _____ Alt. Phone _____

E-mail Address _____

MECHANICAL ENGINEER

Name _____

Company _____

Address _____

City _____ State _____ Zip _____

Business Phone _____ Alt. Phone _____

E-mail Address _____

ELECTRICAL ENGINEER

Name _____

Company _____

Address _____

City _____ State _____ Zip _____

Business Phone _____ Alt. Phone _____

E-mail Address _____

GENERAL CONTRACTOR OR EQUIVALENT

Name _____

Company _____

Address _____

City _____ State _____ Zip _____

Business Phone _____ Alt. Phone _____

E-mail Address _____