# **2024 SOLAR ELECTRIC REBATE APPLICATION**

## **SECTION A. CUSTOMER INFORMATION (please print)** Customer Name (as it appears on your utility bill) Account Number City Installation Address State Zip Code Mailing Address (if different from installation address) State Zip Code City Home Cell Other: Contact Phone Number (with area code) E-mail Address How did you hear about CONSERVE & SAVE™? (pick one) Billboard Chamber of Commerce Contractor Newspaper Radio Retailer/Vendor Social Media Utility Newsletter Utility Representative Utility Web Site Other SECTION B. CONTRACTOR INFORMATION Solar Contractor Name Lead Installer Name Mailing Address State Zip Code Contact Phone Number (with area code) E-mail Address The solar installation must include a licensed general contractor and a licensed electrical contractor to be eligible under this program. \_\_\_\_\_License Number: \_\_\_ General Contractor Name: \_\_\_ \_\_\_\_\_ License Number: \_\_\_ Electrical Contractor Name: \_\_\_\_ No Yes If yes, NABCEP Solar PV Number: \_\_\_\_ Is lead installer NABECP Solar PV certified? (not required) SIGNATURE: By typing my first and last names in the CUSTOMER SIGNATURE box below, I am signing this document and certify: I have completely filled out Sections A, B, and C. Allow 6-8 All equipment in Section C has been installed at the address listed in Section A. weeks I have read, understand, and agree to the terms and conditions in Section D. for processing. I HAVE ATTACHED A FINAL DETAILED INVOICE - SECTION D, #6. Missing or incorrect information will CUSTOMER SIGNATURE Date increase the processing time. SOLAR INSTALLER SIGNATURE **TEAMING UP TO SAVE YOU MONEY** OFFICE USE ONLY Gas **Total Rebate Amount:** \_\_\_\_ Date Processed\_\_\_\_ Date Received\_\_\_\_ Appliance/Equipment \_\_\_\_\_ Verified By FILE NAME:

#### \_\_\_\_\_ Solar Module Model Number: \_\_\_\_\_ Number of Modules: \_ SOLAR MODULE: Solar Module Manufacturer: Nameplate Module Rating (watts): \_\_\_\_\_\_ Module Performance Warranty (years): \_\_\_\_\_ Tilt of Panels if Fixed (degrees): \_\_\_\_ Azimuth Angle/Orientation (degrees): \_\_\_\_\_ Thin Film? INVERTER: Inverter Manufacturer: Inverter Model Number: \_\_\_\_\_ Inverter Warranty (years): \_\_\_ Inverter Rating (kW): \_\_\_\_ SYSTEM: System DC Rating (sum of the panel wattage): \_\_\_\_\_\_\_kW (Rebate requires a 2.0 kW DC or larger system rating.) OFFICE USE ONLY System AC Rating: \_\_\_\_ System Type: Fixed Seasonally Adjusted Single Axis **Dual Axis** Rebate Total: Location: Roof Ground Pole Date Interconnected: \_\_\_ Total Installed Cost:

## SECTION D. TERMS AND CONDITIONS

SECTION C. INSTALLATION INFORMATION

Use this checklist to receive your rebate:

- 1. The CONSERVE & SAVE" solar electric rebate for households and businesses provides financial support for the installation of new grid connected solar electric systems. A rebate of \$500 will be available to customers that meet the following criteria:
  - Install a new solar photovoltaic (PV) system that is 2.0 kW DC or larger.
  - · Customer must sign a utility interconnection agreement with Austin Utilities or Owatonna Public Utilities.

#### 2. Installation Requirements:

- Must comply with all applicable federal, state, local and utility laws and requirements.
- Must comply with all applicable building and zoning codes and obtain all appropriate permits, providing copies of such permits to their utility.
- Solar installation must include a licensed general contractor and a licensed electrical contractor.
- The Utility reserves the right to reject any rebate application submitted as a result of work performed by a contractor who has failed to adhere to the terms and conditions established for the rebate program.
- System must be installed within timelines identified in the Distributed Energy Resources (DER) Interconnection Process documents.

## 3. Installation Recommendations:

- For improved cost effectiveness and energy efficiency, a professional energy audit should be conducted prior to installation.
- Customer is encouraged to obtain installation quotes from multiple contractors.
- Customer is encouraged to have a shading analysis performed.

#### 4. Equipment Requirements:

- · All of the system components must be new.
- PV modules must be certified as meeting the most current edition of Underwriters Laboratory Standard 1703 (UL1703) and must have a 20-year or greater manufacturer's performance warranty.
- Inverters must be certified as meeting the current edition of Underwriters Laboratory Standard 1741 (UL1741) and come with a minimum five-year manufacturer's warranty.

## 5. Funding:

Apply by Mail:

Apply Online:

• Due to limited funding, this rebate offer can be withdrawn at any time without notice. Applications will be processed on a first-come, first-served basis.

#### 6. Documentation:

- Once system is interconnected, send a final, detailed copy of the sales invoice showing the customer name, address of installation, date of sale, and size of system.
- Rebate application must be submitted within 30 days of passed utility commission test.
- Information contained in this rebate application may be shared with the Minnesota Department of Commerce and our co-op partners.

#### 7. Submit the completed application and required documentation to your utility provider:

**Austin Utilities Owatonna Public Utilities** 

Austin, MN 55912-4904

www.austinutilities.com

507-433-8886

Apply by Email: rebates@austinutilities.com

Apply by Mail: Attn: Rebate Processing Attn: Rebate Processing 1908 14th St NE

PO Box 800

Owatonna, MN 55060-0800

507-451-2480

Apply Online: www.owatonnautilities.com Apply by Email: rebates@owatonnautilities.com