

Green Energy Program Grant Application  
Delaware Municipal Electric Corporation  
22 Artisan Drive, Smyrna, Delaware 19977  
Phone: (302) 653 - 2733 & Fax (302) 653 - 2734

**City of Newark**  
**Solar Water Heating**

Residential

**Applicant Information:**

Name / Company:

Email:

Daytime Phone:

Evening Phone:

Installation Address:

City:

State:

Zip Code:

Mailing Address:

City:

State:

Zip Code:

Electric Utility:

Last 12 Months kWh Usage:

**Grant Recipient (If other than applicant):**

Name / Company:

Email:

Daytime Phone:

Evening Phone:

Mailing Address:

City:

State:

Zip Code:

Please transfer this grant payment to the above named company or individual. I understand that I will not receive the grant payment for this project.

**Applicant Signature:**

**Contractor:**

Name / Company:

DE Business License #

Email:

Daytime Phone:

Mailing Address:

City:

State:

Zip Code:

**Licensed Installation Professional (Master Plumber or Master Electrician installing system):**

Name:

DE Business License #

Email:

Professional License #

Daytime Phone:

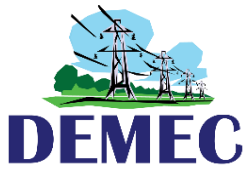
Professional License Issuing State:

Mailing Address:

City:

State:

Zip Code:



# Green Energy Program Grant Application

## City of Newark Solar Water Heating

**Applicant Name:**

**System Characteristics:**

Purpose:	<input type="checkbox"/> Solar Water Heating	<input type="checkbox"/> Space Heating
Construction type: (Check one)	<input type="checkbox"/> Existing Construction	<input type="checkbox"/> Replacement
System Type: (Check one)	<input type="checkbox"/> Thermosiphon	<input type="checkbox"/> Glycol
	<input type="checkbox"/> Drain Back	
Installation type: (Check one)	<input type="checkbox"/> Ground Mount	<input type="checkbox"/> Rooftop
SRCC OG-300 SRCC #	SRCC OG -300 Annual Energy Savings:	
SRCC OG-100 SRCC #	SRCC OG -100 Annual Energy Savings:	
Array Orientation (true degrees):	Array Tilt (true degrees):	
Collector Manufacturer:	Collector Model #	
Total Collector Area (Sq.Ft.):		
Tank Manufacturer:	Volume:	Gallons
Tank Model #		
Auxiliary Tank Manufacturer:	Volume:	Gallons
Controller Manufacturer:	Model #	
Pump Brand:	Model #	
Heat Exchanger:	Model #	

**System Cost:**

Material Cost:	Permits:	
Labor Cost:	Other Fees:	<b>Total System Cost:</b>

**Grant Calculation: Grants may not exceed the Grant Cap: \$3,000 Water Heating and \$5,000 Space Heating**

Residential Water Heating		Residential Space Heating	
OG300 / OG100 Predicted kWh Saved =		OG300 / OG100 Predicted kWh Saved =	
Rebate : \$ / kWh Saved	x \$1.00	Rebate : \$ / kWh Saved	x \$1.00
Grant Amount Requested =		Grant Amount Requested =	

Solar Rating & Certification Corporation (SRCC) provides predicted kWh saved on their website for OG300 Systems

Non-OG300 systems must have a Professional Engineer (P.E.) validate savings

**Declaration: I understand and agree that:**

- 1) as the applicant the information provided on this form is true and correct to the best of my knowledge
- 2) as the contractor the information provided on this form is true and correct to the best of my knowledge
- 3) the above described system is intended to offset part or all of the applicant's electricity needs at the installation site
- 4) the site of installation is located in the utility service territory as described on page 1 of the application
- 5) the municipality or DEMEC provide no warranty for this system
- 6) all warranties are provided by the contractor and/or manufacturer and include at least 5 years parts and labor
- 7) the applicant has received a copy of this completed form
- 8) that the system may be inspected by the municipality or DEMEC prior to grant distribution or risk forfeiture of grant
- 9) completed grants may be queued for payment pending availability of funds and the wait for payment could be lengthy

**Signatures**

<b>Applicant</b>	<b>Contractor / Installer</b>
Printed Name:	Printed Name:
Signature :	Signature: