



**NextZero Commercial & Industrial Program  
Custom Application Form**



**Chicopee Electric Light's (CEL)** NextZero Commercial & Industrial program provides incentives and technical assistance to promote the identification and implementation of electric energy efficiency improvements in Chicopee, Massachusetts. The program targets all cost effective opportunities that result in electric savings in existing or new facilities. Applications will be reviewed on a first come first served basis.

**How does it Work?** Customers who are interested in participating in the program should complete and submit this application form. The program administrator will contact the applicant by phone to review the application and to better understand the specific goals and interests of the applicant. **CEL** and the program administrator will work with the applicant throughout the process to help customers achieve their goals. A rebate is issued upon successful post installation inspection and receipt of final invoice(s). Further information on the program design, including eligible measures, incentive caps, and financing options are provided in the Custom Retrofit Program Description available at [www.NextZero.org](http://www.NextZero.org).

**Who is Eligible?** All non-residential customers, including commercial, industrial, governmental, and institutional are eligible to participate in the program. Customers must be in good financial standing with **CEL** to participate in the program.

**How to Apply:**

- 1) Complete all fields in this application to the best of your ability.
- 2) Sign and date this application, making sure to include your CEL account number.
- 3) Submit the application using one of the following methods:

E-mail: [energysavingsCEL@mmwec.org](mailto:energysavingsCEL@mmwec.org)

Mail: Chicopee Electric Light  
725 Front Street  
P.O. Box 405  
Chicopee, MA 01021-0405

**1.) Project Type**

<b>Please Select One Option Below - If you have any questions, please contact us at 877-259-3015</b>	
<input type="checkbox"/> <b>Retrofit of Existing Equipment or Systems</b> <input type="checkbox"/> <b>Replacement of Failed or Failing Equipment</b> <input type="checkbox"/> <b>Major Renovation/New Construction</b> <input type="checkbox"/> <b>Other</b> (Please Describe) _____	

**2.) Customer Information**

Company Name	Contact Name	Date of Application Submission
Phone Number	Fax Number	E-mail
Mailing Address		City, State, Zip
Facility Address (if different)	City, State, Zip	Federal Tax ID #

**3.) Facility Information**

Approx. Annual Energy Costs	Approx. Energy Costs as % of Operating Expenses	Avg. Hours of Operation	
		hours/day	days/week
Facility Square Footage		Approx. Age of Facility	
Main Building:	Other Buildings:		
Facility Type (Check any that may apply)			
<input type="checkbox"/> Commercial (Wholesale/Retail)	<input type="checkbox"/> Industrial	<input type="checkbox"/> Healthcare	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Multi-family (5 units or more)	<input type="checkbox"/> Not-for-profit	<input type="checkbox"/> K-12 School	<input type="checkbox"/> College/University
<input type="checkbox"/> Government	<input type="checkbox"/> Restaurant	<input type="checkbox"/> Warehouse	<input type="checkbox"/> Other _____
<input type="checkbox"/> Hospitality	<input type="checkbox"/> Office		

**4.) Project Description/Area of Interest**

Please describe in detail the nature of your project and/or any areas of interest/ issues/concerns regarding your facility's comfort, safety, productivity, or performance

**5.) Rebate Assignment\***

If the resulting rebate from this work is to be assigned to the contractor, please complete the information below. If the rebate will be assigned to the customer, leave this section blank.

Contractor Name		
Address	City, State, Zip Code	
Contact Person	Phone Number	Email

*\*Please Note: Rebate assignment to contractor is not available for on-bill financing.*

**6.) Customer Authorization**

I verify that all information provided in this application is accurate and true to the best of my knowledge. I also authorize CEL to release my previous two years of utility records for the account(s) listed below for the sole purpose of review and analysis as part of the proposed energy efficiency improvement project(s).

CEL Customer's Name and Title (Note: Must be CEL Customer)	
CEL Customer's Signature	Date
CEL Account Number(s) (Provide for all facilities included in this application)	