



Delaware Electric Cooperative, Inc
 P.O. Box 600
 Greenwood, Delaware 19950

Photovoltaic
 Renewable Resource Fund
 Grant Application
 ___ Class B ___ Non-Profit

Is the following system: Leased **or Member Owned**

Member-Owner: _____ **Account No.** _____

Phone Number (H): _____ - _____ **(W):** _____ - _____ **Email Address:** _____

Installation Address: _____

City: _____ **Zip:** _____

Mailing Address (if different than above): _____

City: _____ **Zip:** _____

Contractor/Installer: _____

Contractor License Number: _____

Phone Number: _____ - _____ **Fax:** _____ - _____

Address: _____ **City:** _____ **State:** ___ **Zip:** _____

System Characteristics

Member Owned PV System _____ Leased PV System _____

New Construction _____ Existing Home/Business _____ Replacement _____

System Type: Utility Interconnected _____ Utility Interconnected with Battery Backup _____

PV Array Location: Rooftop _____ Pole or Ground Mount _____ Tracking _____

Array Orientation: _____ degrees Array Tilt/Slope: _____ degrees

Module Manufacturer: _____ Module Model: _____

Module Power Rating: _____ DC Watts (At STC Condition) Number Modules: _____

Total Array Output: _____ DC Watts (No. of Modules x Power Rating)

Inverter Manufacturer: _____ Inverter Model No. _____

Inverter AC Rating: _____ AC Watts Inverter Peak Efficiency: _____

Inverter Location: _____

System Rated Output: _____ AC Watts (Total Array Output x Inverter Peak Efficiency)

Estimated Annual Electricity Production: _____ kWh per Year

Historical 2 Year Average Annual Usage (kWh): _____

Average Monthly Demand (Class B): _____

Grant Calculation

- 1. Total System Costs (attach copy of invoice),.....\$ _____
- 2. Installed Wattage: **(a)** 0 - 5,000 watts x \$1.05 per watt.....\$ _____
(b) Over 5,000 watts x \$0.52 per watt.....\$ _____
- 3. Less Prior Grants Awarded/Received.....\$ _____
- 4. Total Grant Requested (add lines 2(a), 2(b) subtract line 3).....\$ _____

Not to exceed: Class B & Non-Profit \$5,000

GRANTS WILL ONLY BE PROVIDED FOR MEMBER OWNED PV SYSTEMS

Declaration

I understand and agree that: 1) the information provided in this form is true and correct to the best of my knowledge, 2) the site of installation is interconnected to the DEC electric system, 3) the State of Delaware and its agents provide no warranty for system components, installation, performance, or operation, 4) DEC and its agents provide no warranty for system components, installation, performance, or operation, 5) all warranties are provided by manufacturer's and installing contractor, and 6) the purchaser has received a copy of this form.

Member-Owner

Installation Contractor

Signature: _____

Signature: _____

Date: _____

Date: _____

Mail, Email or Fax this Application to:

Green Energy Program Planner Division of
Energy & Climate, DNREC
100 W. Water Street - Suite 5A,
Dover DE 19904
Tel: 302-735-3480; Fax: 302-739-1840
DNREC_GreenEnergyProgram@state.de.u