



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

Solar Water Heating Renewable Resource Fund Grant Application

___ Class A ___ Class B

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

New Construction _____ Existing Home/Business _____ Replacement _____

SRCC OG-300 Reference No.: _____ SRCC OG-300 Estimated Annual Energy Savings: _____

System Configuration: Drain Back: _____ Thermosyphon: _____ Glycol: _____

Collector Manufacturer: _____ Model: _____

Total Collector Area: _____ ft² Collector Orientation: _____ Collector Tilt/Slope: _____ degrees

Tank Manufacturer: _____ Volume: _____ gallons Model: _____

Auxiliary Tank Manufacturer: _____ Volume: _____ gallons Model: _____

Controller Manufacturer: _____ Model: _____

Pump Brand: _____ Model: _____

Heat Exchanger: _____ Model: _____

Number of people in household: _____

Fuel Used for Old Water Heating System: Electric ___ Natural Gas ___ Propane ___ Other ___ None ___

System Costs

Material: \$ _____ Labor: \$ _____
Permits/Fees: \$ _____ Engineering/Design: \$ _____
Other: \$ _____ TOTAL Cost: \$ _____

Grant Calculation

1. Total System Costs.....\$ _____
2. Ineligible Costs.....(\$ _____)
3. Other Incentives (source _____).....(\$ _____)
4. Sum of Reductions (add line 2 and 3).....\$ _____
5. Total Costs (line 1 minus line 4).....\$ _____
6. Rebate Multiplier..... x 20%
7. Amount of Grant Requested.....\$ _____

Maximum Grant: Water Heater Only: Class A = \$3,000, Class B = \$7,500

Integrated Heating: Class A = \$5,000, Class B = \$7,500

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 located in the DEC service territory, 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: _____

For Energy Office & DEC Only

Date Reviewed: _____ Reviewer: _____ Grant Reservation Number: _____

Approved – Date Confirmation & Claim Form Sent: _____ Ineligible - Date Letter Sent: _____ Incomplete: _____

Inspection – Date Inspector: _____ Disbursement of Grant Date: _____ Grant Amount: \$ _____

Mail or Fax this Application to:

Green Energy Program Planner
Delaware Energy Office
1203 College Park Drive, Suite 101
Dover, Delaware 19904
Tel: 302-735-3480; Fax: 302-739-1840