



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

**Wind**  
**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**

System Type: Utility Interconnected \_\_\_\_\_ Utility Interconnected with Battery Backup \_\_\_\_\_  
 Stand-Alone \_\_\_\_\_ Stand-Alone with Battery Backup \_\_\_\_\_

Wind Turbine Location: \_\_\_\_\_

Avg. Annual Wind Speed at Turbine Site: \_\_\_\_\_

Wind Turbine Manufacturer: \_\_\_\_\_ Model No.: \_\_\_\_\_

Wind Turbine Peak Power: \_\_\_\_\_ AC Watts or DC Watts (circle one) Number of Turbines \_\_\_\_\_

Total Wind System Output: \_\_\_\_\_ AC Watts or DC Watts (circle one)

Inverter Manufacturer: \_\_\_\_\_ Inverter Model No. \_\_\_\_\_

Inverter AC Rating: \_\_\_\_\_ AC Watts Inverter Peak Efficiency: \_\_\_\_\_

Inverter Location: \_\_\_\_\_

System Rated Output: \_\_\_\_\_ AC Watts

Estimated Annual Electricity Production: \_\_\_\_\_ kWh per Year

**Revised for Applications Received On and After October 21, 2010**

**System Costs**

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

**\*Attach Copy of Project Estimate, Purchase Order or Letter of Intent**

**Grant Calculation**

1. Total System Costs.....\$ \_\_\_\_\_  
2. Wattage..... \_\_\_\_\_  
3. Grant Multiplier:.....x \$1.25 per watt  
7. Amount of Grant Requested.....\$ \_\_\_\_\_

Maximum Grant: Class A and Class B = \$2,500

**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