



# 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

---

**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 \$0.85 per watt

7. Less Prior Grants Awarded/Received.....\$ \_\_\_\_\_

8. Amount of Grant Requested.....\$ \_\_\_\_\_

**Maximum Grant: Class A, B & Non-Profit = \$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 interconnected to the DEC electric system, 3) DEC and its agents provide no warranty for system components, installation, performance, or operation, 4) all warranties are provided by manufacturer's and installing contractor, and 5) the purchaser has received a copy of this form.*

**Member-Owner**

**Installation Contractor**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Mail or Email this Application to:**

**Delaware Electric Cooperative  
Grant Program Administrator  
PO Box 600, 14198 Sussex Highway  
Greenwood, DE 19950**

[grants@delaware.coop](mailto:grants@delaware.coop)