



CAPACITOR REBATE APPLICATION FORM

Customer Information:

Company Name: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Address of Installation: (if different) _____ City: Alexandria State: MN Zip: 56308

Contact Person: _____ Phone: _____

Fax: _____ E-mail: _____

ALP Acct No.: _____

The undersigned customer hereby certifies that the information on this application is correct and requests consideration for participation in this program. Said customer hereby certifies that: 1) the customer, and not ALP Utilities, is solely responsible for the accuracy of the information contained in this application; 2) all rules of the ALP Capacitor Rebate Program have been followed in making this application. Further, the customer releases ALP and the City of Alexandria from any liability for any work performed by any engineer/contractor/vendor pursuant to the ALP Capacitor Rebate Program.

_____ Customer Signature

_____ Date

Vendor/Contractor Information:

Company Name: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Contact Person: _____ Phone: _____

Installed Capacitors: (List each capacitor separately)

Manufacturer's Name	Model Number	kVAR Rating	Voltage	On-site Location of Installation	Date of Installation	Purchase Price	Rebate Amount

Total: _____

Power Factor Correction Capacitor Rebate Table

KVAR RATING	240 VOLT	480 VOLT		KVAR RATING	240 VOLT	480 VOLT
1 through 4.9	\$144	\$125		70 through 89.9	\$1,219	\$531
5 through 9.9	\$219	\$150		90 through 139.9	\$1,750	\$750
10 through 19.9	\$294	\$188		140 through 179.9	\$2,250	\$1,000
20 through 29.9	\$419	\$281		180 through 249.9	\$2,938	\$1,250
30 through 39.9	\$575	\$313		250 through 349.9	\$3,375	\$1,688
40 through 49.9	\$750	\$406		350 through 400	\$3,750	\$2,375
50 through 69.9	\$906	\$438		400+		\$6.65/ kVa

*Rebates will be based on the total kVAR rating of a capacitor bank.

*Any capacitor or capacitor bank with a kVAR rating over 400 kVAR will be reviewed and rebated on an individual basis.

How to apply:

- Purchase and install qualifying power factor correction capacitors. Submit the completed Capacitor Rebate Application Form to ALP, along with copies of itemized invoices for all capacitors that qualify for a rebate.
- Contact ALP to arrange an inspection to verify installation.
- ALP will calculate a final rebate amount and issue your rebate check within six weeks of the final inspection.

Program rules:

- This program is offered to customers in ALP’s Commercial and Large Commercial rate classes.
- ALP offers cash rebates in accordance with the Capacitor Rebate Table to customers who purchase and install qualifying equipment. Leased capacitors do not qualify for this rebate program.
- Rebates apply to new capacitors only. Used capacitors do not qualify. Leased capacitors do not qualify.
- Rebates are based on the kVAR rating and voltage of the capacitor or the total capacitor rating of a capacitor bank.
- Customer is responsible for any tax liability imposed as a result of rebate payments. Each customer should consult his/her tax advisor about the possible tax consequences of this program.
- Customer must apply for rebates within one year of purchasing the equipment. The purchase date is the date shown on the customer’s invoice.
- ALP reserves the right to inspect installations before issuing the rebate and to perform a random verification audit of the project. If ALP finds that the application does not comply with the rules and qualifications of this program, the rebate amount may be adjusted or rejected.
- All warranties are between the customer and the vendor/manufacturer. ALP makes no warranties, expressed or implied, with respect to equipment operation, material, workmanship, or manufacturer. ALP does not guarantee that a specific level of energy or cost savings will result from the implementation of energy conservation measures or the use of products funded under this program. In no event shall ALP be liable for any incidental or consequential damages.
- ALP reserves the right to make changes to this program at any time.

For ALP office use only:

_____ \$ _____
 Customer Account Number Rebate Amount Date of Inspection

_____ _____
 Check # Date Issued