

INITIAL 75% APPROVED INCENTIVE PAYMENT

Legal Name of Eligible Installer: _____

NYSERDA Installer Number: _____ Customer Number: _____

Billing Address for Eligible Installer: _____

Taxpayer Identification Number or Federal Identification Number for Eligible Installer: _____

Eligible Installer Phone Number: _____ E-mail: _____

Customer Name: _____

Installation Address: _____

Date all equipment is delivered to Customer site: _____

Total Approved Incentive Amount: _____

Initial Incentive Payment Requested (75% of Total Approved Incentive): \$_____

This form must be completed to receive 75% of the approved incentive value for this customer's PV System. Please attach a copy of the equipment packing slip for the PV equipment signed by you and the customer, as an indication that the all PV System components have been shipped to a customer's site, to the completed invoice form. Please also include copies of all required permits. Installers have 90 days from the date the initial invoice is approved by NYSERDA to complete the customers installation. Extensions may be granted on a case by case basis.

CHECKLIST: (This form will be returned if the following are not included)

___ Itemized packing slip for all approved system components, demonstrating delivery to customer's site, signed by customer

___ Any and all required permits

CERTIFICATION STATEMENT: Review and sign for NYSERDA's review.

I certify that all information provided in this form, including all attachments, are true and correct to the best of my knowledge.

Installer Signature: _____ Date: _____

Company Signature: _____ Date: _____

Customer Signature: _____ Date: _____

All forms and Attachments should be sent to:
New York State Energy Research and Development Authority
Accounts Payable
17 Columbia Circle
Albany, NY 12203-6399