

# REBATE APPLICATION

FOR PROJECTS COMPLETED BY 12/31/2026



Complete all sections. Incomplete applications cannot be processed and will delay payment of rebates.

**Applications must be submitted within 60 days of completed project installation**, no later than January 31, 2027. Visit [focusonenergy.com/catalogs](http://focusonenergy.com/catalogs) for additional copies of this form.

## section 1

### ACCOUNT AND CUSTOMER INFORMATION

**Tax Identification Number** (Check one)  FEIN or  SSN\*

\*If you use a Social Security Number (SSN) as your Tax Identification Number, **do not provide it below**. You will be contacted by the program via email to provide a copy of your W-9 using a secure online portal, if it is not already on file. **You must list an email address in Section 3.**

FEIN

### TAX CLASSIFICATION OF CUSTOMER

(Check one. Required for all businesses, including nonprofits.)

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> S Corporation	<input type="checkbox"/> LLC - Partnership
<input type="checkbox"/> C Corporation	<input type="checkbox"/> LLC - S Corp	<input type="checkbox"/> Partnership
<input type="checkbox"/> LLC - C Corp	<input type="checkbox"/> Single-Member LLC	
<input type="checkbox"/> Other: _____		

OWNER NAME (REQUIRED IF SSN IS USED AS TAX IDENTIFICATION NUMBER)

COMPANY NAME

LEGAL ADDRESS (AS SHOWN ON COMPANY W-9)

CITY STATE ZIP

WHOM DID YOU WORK WITH FROM FOCUS ON ENERGY? (CONTACT NAME)

## section 2

### JOB SITE INFORMATION

(Refer to your utility bills for account numbers below.)

JOB SITE BUSINESS NAME

ELECTRIC UTILITY AT JOB SITE ELECTRIC ACCOUNT #

GAS UTILITY AT JOB SITE GAS ACCOUNT #

JOB SITE ADDRESS IS SAME AS LEGAL ADDRESS  
 JOB SITE ADDRESS IS DIFFERENT (COMPLETE BELOW)

NUMBER OF UNITS AT JOB SITE:

JOB SITE ADDRESS

CITY STATE ZIP

## section 3

### CUSTOMER CONTACT INFORMATION

JOB SITE CUSTOMER CONTACT NAME

PRIMARY PHONE # EMAIL ADDRESS

Preferred method of contact:  Call  Email  Text

If Focus on Energy has a question about this application, we should contact:  Customer  Trade Ally  Other \_\_\_\_\_

## section 4

### TRADE ALLY INFORMATION

TRADE ALLY CONTACT NAME

PRIMARY PHONE # EMAIL ADDRESS

TRADE ALLY COMPANY NAME

ADDRESS

CITY STATE ZIP

## section 5

### PAYMENT INFORMATION

Payee is responsible for any associated tax consequences.

#### Make rebate check payable to:

Customer  Trade Ally  Other Payee

If Other Payee is selected, the relationship to the utility account holder must be identified below:

Tenant  Building Owner  Other (specify) \_\_\_\_\_

#### For All Payees, This Section MUST Be Filled Out

**Mail check to:**  Customer Address  Job Site Address  
 Trade Ally Address  Alternate Address

COMPANY NAME

ADDRESS

CITY STATE ZIP

ATTENTION TO (OPTIONAL)

#### For Trade Ally, Rebate Administrator, and Other Payees

Trade Allies must be registered with the Program and have a current W-9 on file to receive payment.

#### Tax Identification Number (Check One) FEIN SSN

If you use a Social Security Number (SSN) as your Tax Identification Number, do not provide it below. You will be contacted by the program via email to provide a copy of your W-9 using a secure online portal, if it is not already on file. You must list an email address below.

FEIN

#### Tax Classification of Payee

(Check one. Required for all businesses, including nonprofits.)

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Individual	<input type="checkbox"/> Single-Member LLC
<input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Partnership
<input type="checkbox"/> LLC - C Corp	<input type="checkbox"/> LLC - S Corp	<input type="checkbox"/> LLC - Partnership
<input type="checkbox"/> Other _____		

#### Payee Contact Information

NAME

EMAIL ADDRESS

## section 6

### REBATE PRODUCT INFORMATION

Refer to:

- **Applicable rebate catalog at [focusonenergy.com/catalogs](http://focusonenergy.com/catalogs)** for rebate codes, rebate per unit, and product eligibility requirements.
- **[focusonenergy.com/products](http://focusonenergy.com/products)** for qualified products lists.
- **Your itemized invoice(s)** that include Manufacturer and Model Number(s).
- **Rebate Product Information Sheet at [focusonenergy.com/catalogs](http://focusonenergy.com/catalogs)** if additional lines are needed.

PROJECT COMPLETION DATE:		/ /				
CODE	MANUFACTURER NAME	MODEL #	UNIT MEASURE	# OF UNITS (A)	REBATE PER UNIT (B)	REQUESTED REBATE (A X B)
(Example) L3111	STARK LIGHTING	LED5VZP	Fixture	10	\$ 25	\$ 250
					\$	\$
					\$	\$
					\$	\$
					\$	\$
					\$	\$
					\$	\$
<b>Manufacturer Specifications Attached (if applicable):</b>	<input type="radio"/> Yes				Subtotal from Rebate Product Information Sheet (if applicable)	\$
<b>Itemized Invoice(s) Attached:</b>	<input type="radio"/> Yes				<b>REBATE TOTAL*</b>	\$

## section 7

### CUSTOMER SIGNATURE

I, the undersigned Customer, agree the stated energy efficiency measure(s) was (were) installed at the job site address listed above as part of the Focus on Energy Program. I have read and agreed to the provisions set forth herein and to the Terms and Conditions posted at [focusonenergy.com/terms](http://focusonenergy.com/terms).

I understand Focus on Energy may revise these Terms and Conditions at any time, and I will not be notified in the event changes are made. To the best of my knowledge, the statements made on this application are complete, true, and correct, and I have submitted the appropriate supporting documentation to receive a rebate.

If the Customer is identified as the Payee in Section 5, the following certifications are required for this form to substitute for the Internal Revenue Service (IRS) form W-9. Under penalty of perjury, I certify that:

- The number shown on this form is the correct taxpayer identification number.
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.
- I am a U.S. person.

**The IRS does not require my consent to any provision of this document other than the certifications required to avoid backup withholding.**

CUSTOMER SIGNATURE

NAME (PRINT)

DATE



SIGN  
HERE  
→

### Submit applications and supporting documentation to:

**MAIL:** Focus on Energy  
3113 West Beltline Highway, Suite 201  
Madison, WI 53713

**EMAIL:** [multifamily@focusonenergy.com](mailto:multifamily@focusonenergy.com)

\*Rebate may be adjusted based on project caps. See measure requirements and Terms and Conditions for more information.