2024 BUSINESS OFFERINGS

LABORATORY ENERGY EFFICIENCY GUIDE





HOW TO APPLY

NEED HELP? CALL 800.762.7077



FOCUS ON ENERGY® makes saving energy and money easy for Wisconsin businesses. Use the information below to help guide your way to savings. For electronic copies of the forms, visit **focusonenergy.com/catalogs.**

step 1BEFORE YOU APPLY:

Verify customer and product eligibility:

- O Confirm your gas and/or electric utilities participate in Focus on Energy at **focusonenergy.com/utilities.**
- Read product requirements, both general and technology-specific, in your equipment's corresponding incentive catalog.
- O Review the Participation Requirements page.
- O Review the Terms and Conditions at focusonenergy.com/terms.
- O View the qualified product lists at focusonenergy.com/qpls.
- O Applications exceeding \$10,000 can request pre-approval. Requests received on or before December 13, 2024, will be pre-approved at 2024 incentive rates. Applications not pre-approved may not receive incentive payment if program funds have been exhausted. Pre-approval is considered complete once an incentive agreement is signed by the customer and returned to Focus on Energy.

Qualifying products must be installed by December 31, 2024.

step 2

WHAT YOU'LL NEED:

- Incentive Application and Equipment Incentive Catalog(s).
- O Gas and electric utility account numbers.
- O Tax ID number.
- O Invoice MUST include:
 - · Trade Ally name, address, and phone number.
 - An itemized list of products along with manufacturer name, model number, and quantity.
 - Itemized purchase price of product/installation.
 - · Job site address.

Reminder: Incentives are capped at 100% of equipment cost unless otherwise noted. Equipment cost is the amount paid by the customer for qualifying equipment, excluding any Focus on Energy incentive credit, shipping, and sales tax. Like-for-like equipment replacement due to recall, warranty replacement, etc. is not eligible for an incentive.

- O Manufacturer specifications (when required) MUST include:
 - Full model number.
 - Energy performance information.
- Additional documentation (when required).

step 3COMPLETE THIS APPLICATION:

- All fields on the application are required. Incomplete application(s) cannot be processed.
- O Complete SECTION 7 with all product information. Use the Business Incentive Product Information Sheet found at focusonenergy.com/catalogs if you need additional lines.
- O Include project completion date (date the last product was installed). If project is new construction, use the occupancy date. Project is considered complete when products are installed and operational
- O Complete the catalog-specific Supplemental Data Sheet for applicable measures. An asterisk (*) next to the code indicates when this is needed. Read the measure requirements in your catalog for directions.
- O The utility ratepayer must sign and date SECTION 8.
- O Ensure supporting documents are attached, including itemized invoice(s).
- O Make a copy of the application and supporting documents for your records.

step 4

SUBMIT YOUR APPLICATION:

Mail or email your application and all supporting documentation. **Applications must be submitted within 60 calendar days of project**

completion, no later than January 31, 2025.

MAIL: Focus on Energy

725 W. Park Avenue

Chippewa Falls, WI 54729

EMAIL: business@focusonenergy.com

INCENTIVE APPLICATION

FOR PROJECTS COMPLETED BY 12/31/2024



Complete all sections. Incomplete applications cannot be processed and will delay payment of incentives. **Applications must be submitted within 60 days of completed project installation**, no later than January 31, 2025. For additional copies of this form, visit **focusonenergy.com/catalogs**.

section 1

ACCOLINE.	ANIDC	LICTOMED	INFORMATION

Tax Identification Number (Check one) ☐ FEIN or ☐ SSN
f 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.
=EIN
TAX CLASSIFICATION OF CUSTOMER

□ Sole Proprietorship □ C Corporation □ LLC - C Corp □ Other	□ S Corporation □ Partnership □ LLC - S Corp □ LLC - Partnership □ Single-Member LLC	
	SSN IS USED AS TAX IDENTIFICATION NUMBER)	
COMPANY NAME		
LEGAL ADDRESS (AS SHOW	'N ON COMPANY W-9)	
CITY	STATE ZIP	

(Check one. Required for all businesses, including non-profits.)

WHO 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 LE	EGAL ADDRESS
lacksquare Job site address is different	(COMPLETE BELOW)
JOB SITE ADDRESS	
CITY	STATE ZIP
section 3	

CUSTOMER CONTACT INFORMATION

JOB SITE CUSTOMER CONTACT NAME
PRIMARY PHONE # EMAIL ADDRESS
☐ I opt in to receive program updates via text message. Preferred method of contact: ☐ Call ☐ Email ☐ Text
If Focus on Energy has a question about this application, we should contact: Customer Trade Ally Other Other

section 4 TRADE ALLY INFORMATION

TRADE ALLY CONTACT NAM	E
PRIMARY PHONE # EMA	AIL ADDRESS
TRADE ALLY COMPANY NAM	E
ADDRESS	
OUT /	
CITY	STATE ZIP
section 5	
BUSINESS PAYMENT II	NFORMATION
Payee is responsible for	any associated tax consequences.
Make incentive check	
☐ Customer ☐ Trade A	•
	ed, the relationship to the utility account holder
must be identified below	· · · · · · · · · · · · · · · · · · ·
☐ Tenant ☐ Building C	Owner 🗖 Other (specify)
For All Payees	(-11-1-17)
•	mer Legal Address 🔲 Job Site Address
	Ally Address
	- my / taurese
COMPANY NAME	
LEGAL ADDRESS (AS SHOWN	N ON COMPANY W-9)
CITY	STATE ZIP
ATTENTION TO (OPTIONAL)	
For Trade Ally and Oth	
	sistered with the Program and have a current W-9
on file to receive payme	nt.
	ber (Check one) ☐ FEIN or ☐ SSN
•	rity Number (SSN) as your tax Identification
	it below. You will be contacted by the Program
	ppy of your W-9 using a secure online portal, if it
is not already on file. Yo	u must list an email address below.
FEIN	
Tax Classification of Pa	yee
(Check one. Required fo	or all businesses, including nonprofits.)
☐ Sole Proprietorship	☐ S Corporation ☐ Partnership
☐ C Corporation	☐ LLC - S Corp ☐ LLC - Partnership
☐ LLC - C Corp	☐ Single-Member LLC
Other	
Payee Contact Informa	tion
NAME	EMAIL ADDRESS
1 W WILL	LIVIAIL ADDINESS

section 6

BUSINESS PROPERTY TYPE

	Retrofits New Co	onstruction & Major Renovations	ent incentives, please complete tw	o separate applications.
□ Agriculture Producer □ Dairy - Traditional □ Dairy - Robotic □ Other: □ Education □ Financial Institution	☐ If Dairy, what is the average number of cows being milked daily?	☐ Government ☐ Grocery/Convenience Store ☐ Health Services ☐ Hotels & Lodging ☐ Information, Technical & Scientific Services	 ■ Manufacturing (product): ■ Multifamily ■ Office ■ Religious & Spiritual Organization ■ With K+ Daily Education 	Restaurant Retail Vehicles Sales/Service Water/Wastewater Other:
section 7			☐ No K+ Daily Education	

INCENTIVE PRODUCT INFORMATION

Refer to:

- Your invoice for Manufacturer and Model Number.
- Business Incentive Product Information Sheet at focusonenergy.com/catalogs if additional lines are needed.

PROJECT COMPLETION DATE:	/ /

INCENTIVE CODE	MANUFACTURER N	IAME	MODEL #	UNIT MEASURE	# OF UNITS (A)	INCENTIVE PER UNIT (B)	REQUESTED INCENTIVE (A X B)
(Example) 5356	ABC STOPS		STOP3X	HOOD	1	\$ 100.00	\$ 100.00
						\$	\$
						\$	\$
						\$	\$
						\$	\$
						\$	\$
						\$	\$
						\$	\$
						\$	\$
Manufacturer S	Manufacturer Specifications Attached (if applicable):					tal from Incentive Product nation Sheet (if applicable)	\$
Itemiz	Itemized Invoice(s) Attached:					INCENTIVE TOTAL*	\$

section 8

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. 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 an incentive.

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.

CUSTOMER SIGNATURE

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

HERE

DATE

SIGN

Submit applications and supporting documentation to:

Focus on Energy MAIL:

> 725 W. Park Avenue Chippewa Falls, WI 54729

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

EMAIL: business@focusonenergy.com NAME (PRINT)

LABORATORY ENERGY EFFICIENCY SUPPLEMENTAL DATA SHEET

THIS FORM MUST BE ATTACHED TO COMPLETED INCENTIVE APPLICATION AND SUBMITTED TOGETHER. NEED HELP? CALL 800.762.7077

HOW TO FILL OUT THIS FORM

Please refer to:

- · The Laboratory Energy Efficiency (LEE) Measure Description sections for specific measure requirements and information.
- Complete the tables for all implemented measures.

GENERAL REQUIREMENTS

- · When reducing exhaust cubic feet per minute (CFM), adjust the supply air system to maintain proper laboratory air balances.
- The existing system must be a 100% outside air system.
- The new or retrofitted system should comply with all local codes, environmental health and safety requirements, and manufacturer's recommendations.
- When completing the Energy Recovery for Laboratory Exhaust column in the table, provide a yes or no answer. If yes, please list the summer and winter efficiencies as a percentage.
- When completing the Heating System Type column in the table, answer gas or electric. If gas, list the heating system efficiency as a percentage. If electric, list the heating system efficiency in cofefficient of performance (COP).
- When completing the Weekly Hours of Operation column in the table, provide the hours the fume hood is in use, not the facility's open hours.

CUSTOMER INFORMATION

JOB SITE BUSINESS NAME JOB SITE ADDRESS TRADE ALLY NAME

GENERAL LABORATORY INFORMATION

LABORATORY TYPE (INSTRUCTIONAL OR RESEARCH) IS THE FUME HOOD USED IN THE SUMMER (Y/N) IS THE LABORATORY MECHANICALLY COOLED (Y/N)

LABORATORY ENERGY EFFICIENCY MEASURE DESCRIPTIONS

The Laboratory Energy Efficiency offering helps identify the need to retrofit or replace less efficient hoods with high-efficiency models that are code compliant and still meet the appropriate industry standard face velocity set point of 100 ft/min. Modifying or replacing laboratory hoods with high-efficiency measures lowers the amount of conditioned air required to maintain the appropriate face velocity, saving on annual air and energy costs.

A. SASH STOPS

In an effort to maintain the required 100 fpm face velocity, fume hoods can be modified with a sash stop to reduce the area of the hood opening, saving air and energy.

Requirements:

- Must be installed on a fume hood with no current sash stops installed.
- · Minimum of 500 annual hours of use.

Measure Description	Code	Incentive	Unit
Sash Stops	5356	\$100	Fume Hood

A					SASH STOPS – IN	CENTIVE CO	DE: 5356				
FACE VELOCITY OF AIR ENTERING HOOD (feet/min)	EXISTING SASH STOP HEIGHT (inches)	PROPOSED SASH STOP HEIGHT (inches)	NOMINAL HOOD WIDTH (feet)	QUANTITY OF IDENTICAL LABORATORY HOODS	ENERGY RECOVERY FOR LABORATORY EXHAUST (Yes/No)	COOLING SYSTEM EFFICIENCY (EER)	HEATING SYSTEM TYPE (Gas/Electric)	WEEKLY HOURS OF OPERATION (WINTER)	WEEKLY HOURS OF OPERATION (SUMMER)	SPACE HEATING SETPOINT (°F)	SPACE COOLING SETPOINT WITH AC (°F AND %RH)
100	28	18	4	2	Yes - 50% and 50%	11.40	Gas - 85.5%	20	0	70°F	75°F and 50% RH

B. AUTOMATIC SASH CLOSER

Fume hoods with two-speed fans or variable air volume controls benefit from equipment that automatically closes the hood sash, reduces the amount of air being exhausted, and slows down the fan. Automatic sash closers assist in varying the sash stop height when the hood is not in use, thus saving air and energy.

Requirements:

- Must have a sensor to detect an obstruction and stop a closing sash before any collision occurs.
- Must have the option to open manually or based on occupancy.
- Sash closers require a time delay before closing as determined by the user.
- Not eligible if current sash hood is closed more than 75% of the time when not in use.
- Minimum of 500 annual hours of use.
- Cannot be used with automatic flow reducer.
- The Scheduled Lab Time Hood is Vacant column in the table requires the percentage of time the lab hood is unoccupied during weekly operating hours.

Measure Description	Code	Incentive	Unit
Automatic Sash Closer	5357	\$200	Fume Hood

В	AUTOMATIC SASH CLOSER – INCENTIVE CODE: 5357											
EXISTING SASH STOP HEIGHT (inches)	NOMINAL HOOD WIDTH (feet)	HOOD AIR FLOW WHILE CLOSED (CFM)	QUANTITY OF IDENTICAL LABORATORY HOODS	ENERGY RECOVERY FOR LABORATORY EXHAUST (Yes/No)	COOLING SYSTEM EFFICIENCY (EER)	HEATING SYSTEM TYPE (Gas/Electric)	WEEKLY HOURS OF OPERATION (WINTER)	WEEKLY HOURS OF OPERATION (SUMMER)	SCHEDULED LAB TIME HOOD IS VACANT (%)	SPACE HEATING SETPOINT (°F)	SPACE COOLING SETPOINT WITH AC (°F AND %RH)	
18	4	100	2	Yes - 50% and 50%	11.40	Gas - 85.5%	30	30	25%	70°F	75°F and 50% RH	

C. AUTOMATIC FLOW REDUCER

Automatic flow reducers for a two speed fan or variable air volume control system reduce the face velocity of the hood when unoccupied. This reduces the total conditioned air used and exhausted, even when the sash is left open and no one is working within the hood workspace.

Requirements

- Installed equipment is required to lower the occupied fume hood face velocity from 100FPM to 60FPM or less when unoccupied.
- · Automatic flow reducer installation requires a fume hood system with no previous automatic flow reducer installations.
- By applying for this incentive, you will be ineligible for receiving incentives on variable air volume (VAV) hood or high efficiency, low flow hood installations.
- It is preferred there be a dedicated sensor for each hood, but a common sensor that accomplishes the reduction in energy use will be acceptable.
- Minimum of 500 annual hours of use.
- · Cannot be used with automatic sash closers.
- The Scheduled Lab Time Hood is Vacant column in the table requires the percentage of time the lab hood is unoccupied during weekly operating hours.

Measure Description	Code	Incentive	Unit
Automatic Flow Reducer	5358	\$100	Fume Hood

С	AUTOMATIC FLOW REDUCER – INCENTIVE CODE: 5358											
FACE VELOCITY - OCCUPIED (feet/min)	FACE VELOCITY - UNOCCUPIED (feet/min)	EXISTING SASH STOP HEIGHT (inches)	NOMINAL HOOD WIDTH (feet)	QUANTITY OF IDENTICAL LABORATORY HOODS	ENERGY RECOVERY FOR LABORATORY EXHAUST (Yes/No)	COOLING SYSTEM EFFICIENCY (EER)	HEATING SYSTEM TYPE (Gas/Electric)	WEEKLY HOURS OF OPERATION (WINTER)	WEEKLY HOURS OF OPERATION (SUMMER)	SCHEDULED LAB TIME HOOD IS VACANT (%)	SPACE HEATING SETPOINT (°F)	SPACE COOLING SETPOINT WITH AC (°F AND %RH)
100	60	18	4	2	Yes - 50% and 50%	11.40	Gas - 85.5%	30	30	25%	70°F	75°F and 50% RH

D. HIGH PERFORMANCE HOOD

High performance hoods offer a design advantage due to lower flow requirements with the same level of safety. By reducing the exhaust flow through the sash opening, the amount of conditioned air exhausted and energy use is reduced.

Requirements:

- Require installation on a constant air volume (CAV) or two-stage exhaust system.
- · By applying for this incentive, you will be ineligible for receiving incentives on automatic flow reducer or VAV hood installations.
- New hood must be capable of operation at 60FPM or less.

Code	Incentive	Unit
5359	\$300	Fume Hood

D	HIGH PERFORMANCE HOOD – INCENTIVE CODE: 5359											
FACE VELOCITY - UNOCCUPIED (feet/min)	EXISTING SASH STOP HEIGHT (inches)	NOMINAL HOOD WIDTH (feet)	QUANTITY OF IDENTICAL LABORATORY HOODS	ENERGY RECOVERY FOR LABORATORY EXHAUST (Yes/No)	COOLING SYSTEM EFFICIENCY (EER)	HEATING SYSTEM TYPE (Gas/Electric)	WEEKLY HOURS OF OPERATION (WINTER)	WEEKLY HOURS OF OPERATION (SUMMER)	SPACE HEATING SETPOINT (°F)	SPACE COOLING SETPOINT WITH AC (°F AND %RH)		
60	18	4	2	Yes - 50% and 50%	11.40	Gas - 85.5%	30	30	70°F	75°F and 50% RH		

E. VARIABLE AIR VOLUME (VAV) HOOD

VAV fume hood systems control the airflow to maintain a constant face velocity regardless of sash height. When the sash is closed, the exhaust air volume is automatically decreased by automatically varying the fan speed.

Requirements:

- Variation of the volume flow rate through the hood based on sash opening is required for all retrofitted fume hoods.
- Audible and visible alarms must be included within the controls and must trigger when:
 - The sash closer is open >25% and there has been no occupancy at the hood for 15 minutes, or
 - The sash closer is open to any extent and the air volume flow rate required is not being maintained at the sash opening.
- By applying for this incentive, you will be ineligible for receiving incentives on automatic flow reducer or high performance hood installations.
- Minimum of 500 annual hours of use.
- The Scheduled Lab Time Hood is Vacant column in the table requires the percentage of time the lab hood is unoccupied during weekly operating hours.

Measure Description	Code	Incentive	Unit
Variable Air Volume Hood	5360	\$500	Fume Hood

E	VAV HOOD – INCENTIVE CODE: 5360										
FACE VELOCITY - OCCUPIED (feet/min)	EXISTING SASH STOP HEIGHT (inches)	NOMINAL HOOD WIDTH (feet)	QUANTITY OF IDENTICAL	ENERGY RECOVERY FOR LABORATORY EXHAUST (Yes/No)	COOLING SYSTEM EFFICIENCY (EER)	HEATING SYSTEM TYPE (Gas/Electric)	WEEKLY HOURS OF OPERATION (WINTER)	WEEKLY HOURS OF OPERATION (SUMMER)	SCHEDULED LAB TIME HOOD IS VACANT	SPACE HEATING SETPOINT (°F)	SPACE COOLING SETPOINT WITH AC (°F AND %RH)
100	18	4	2	Yes - 50% and 50%	11.40	Gas - 85.5%	30	30	20%	70°F	75°F and 50% RH

PARTICIPATION REQUIREMENTS

NFFD HFI P? Call 800.762.7077



Use the eligibility requirements below to see if your business qualifies for program incentives. You can also visit **focusonenergy.com** to find savings opportunities specific to your business.

INFORMATION AND REQUIREMENTS

Before you start your project, make sure you are familiar with participation requirements, program information and Terms and Conditions.

General Terms and Conditions

Review the Focus on Energy Terms and Conditions at **focusonenergy.com/terms** or call 800.762.7077 to request a copy.

Incentive Limits

Incentives are limited to \$300,000 per project and \$400,000 per customer per calendar year for all Focus on Energy incentives (prescriptive and custom).

Depending on the business tax classification of the payee, the entity receiving the incentive payment may receive IRS form 1099 for incentives totaling over \$600 in a calendar year.

Trade Ally Information

A Trade Ally represents the company who provided/installed the equipment for a project or performed the service for which a Customer is seeking an incentive. Trade Allies who have signed an agreement with Focus on Energy are allowed to enjoy certain program benefits, one of which is to receive direct payment of incentives at the Trade Ally's request. Incentives can only be paid directly to a registered Trade Ally who has a W-9 on file with Focus on Energy. For more information on becoming a registered Trade Ally, visit focusonenergy.com/tradeally.

The Federal Employer Identification Number (FEIN) and Tax Classification of the Trade Ally is required IF the incentive is paid directly to the Trade Ally. In this scenario, the credit must be clearly labeled as the Focus on Energy incentive and deducted from the amount due on the Customer's invoice.

If your project was completed by more than one Trade Ally (example, equipment was purchased from one Trade Ally but installed by another Trade Ally) and the incentive is being paid to you the Customer, enter the information of the Trade Ally who installed your equipment in Section 4: Trade Ally Information. If the equipment was self-installed, enter the information of the Trade Ally from whom you purchased the equipment.

Assignment of Incentives to Other Payee

The Customer for the project site listed on the application may assign their right to participate and receive incentives to Other Payee. The Customer must sign Section 8 and identify the Other Payee in Section 5.

REDUCING ENERGY WASTE ACROSS WISCONSIN

FOCUS ON ENERGY®, Wisconsin utilities' statewide program for energy efficiency and renewable energy, helps eligible residents and businesses save energy and money while protecting the environment. Focus on Energy information, resources, and financial incentives help to implement energy efficiency and renewable energy projects that otherwise would not be completed.

For more information, call 800.762.7077 or visit focusonenergy.com