

Required Paperwork Samples

Required Paperwork – Application Submission

Downstream only – Does not apply to Instant Discounts.

- Customer Potomac Edison Bill
 - □ Dated within three months of enrollment application submitted date
- □ <u>W-9</u>
 - ☐ For entity that will receive the rebate incentive check
 - Signed and dated within two years of receiving incentive payment
- Cost Estimate
 - Must show a break-out of equipment & labor costs
 - ☐ Equipment must include model #, quantity, & unit cost
- □ Calculator can be found on the Tools & Resources tab
- Spec sheet(s)

Some applications may require geo-tagged photos or an in-person inspection





Utility Bill Sample

Dated within (3) months of application date

PotomacEdison Bill Based On: Actual Meter Reading A FirstEnergy Company

Billing Period: May 11 to Jun 12, 2018 for 33 days

Account Number: 123 456 789

June 18, 2018

Page 1 of 2 D10

Amount Due: \$8,546.71

Due Date: July 03, 2018

BIII For: Any Co., LLC 123 Any Street

1-800-736-3401. Pay your bill online at www.firstenergycorp.com Bill Issued by: Potomac Edison, PO Box 3615, Akron OH 44309-3615

Messages	Account Summary	Amount Due					
To avoid a 1.50% Late Payment Charge being added to your bill, please pay the Amount Due by the Due Date.	Previous Balance Payments/Adjustments	8,305.80 -8,305.80					
To receive your Standard Offer Service price for electricity in this billing	Balance at Billing on Jun 18, 2018	0.00					
period, please call 1-800-827-0048. The price for Standard Offer Service electricity may vary monthly based on your actual	Potomac Edison - Consumption Potomac Edison - Misc. Charges	8,593.70 -46.99					
kilowatt-hour usage.	Total Current Charges	8,546.71					
Your next meter reading is scheduled to occur on or about	Amount Due by Jul 03, 2018	\$8,546.71					
Jul 12, 2018.	Usage Information for Meter Number						
For a detailed explanation of how to read your bill, visit	Jun 12, 2018 KWH Reading (Actual)	4,187.387					
www.firstenergycorp.com/PEBII	May 11, 2018 KWH Reading (Actual)	4,135.264					
The EmPOWER MD charge funds programs that can help you reduce	Difference	52.123					
your energy consumption and save you money. For more information,	Multiplier	1,440					
including how to participate, go to: www.energysavemd.com.	KWH used	75,057					
Effective June 1, 2018, the Administrative Credit has changed. Also, the Generation Charge and Energy Cost Adjustment have changed for customers who have not selected an alternate electricity supplier. Please visit www.potomacedison.com, or call 1-800-686-0011.	OnPeak Load in KW/KVA OffPeak Load in KW/KVA	290.3 292.9					
	Measured Lagging Reactive Demand	216.446					
	Billed Load in KW/KVA	210.440					
	Billed Reactive Demand	143.0					
	Charges From Potomac Edison						
	Customer Number:						
	Rate: Light and Power Service PE-PH9F						
	Hourly Pricing Service Charge	5,564.38					
	Transmission Charge	318.58					
	Distribution Charge	862.89					
	Electric Universal Service Fee	53.12					
	Energy Cost Adjustment	77.73					
	Cogeneration PURPA Surcharge	930.22					
	Franchise Tax	46.54					
	EmPower MD Surcharge	243.18					
	MD Environmental Surcharge	11.26					
	State Sales Tax	485.80					
	Current Consumption Bill Charges	8,593.70					
	Security Demost Interest	-46 90					





W-9 Form Sample

W-9 of entity receiving incentive payment

Signed and dated within (2) years of payment date



(Rev. November 2017)

Request for Taxpayer **Identification Number and Certification**

Give Form to the requester. Do not

		venue Service	▶	Go to www.irs.go	ov/Forn	nW9 for instr	uction	s and the la	test inf	ormati	ion.		l°	ena to	uie	ino.		
	1	Name (as shown	on your income to	ax return). Name is r	equired o	on this line; do r	not leav	e this line blar	nk.									
	Co	ompany Nam	e															
	2	Business name/d	isregarded entity	name, if different fro	om above	9												
	d.	b.a Compai	ny Subsidiar	у														
n page 3.	Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. Individual/sole procrietor or C Corporation S Corporation Partnership Trust/estate										4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):							
e.	١,											Exempt payee code (if any)						
音音	[Limited liability	y company. Enter	the tax classification	n (C=C c	orporation, S=S	corpor	ation, P=Part	nership) l									
Print or type, Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLD: if the LLD is classified as a single-member LLD that is divergeded from the owner unless the owner of the LLD is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.								LC is	Exemption from FATCA reporting code (if any)								
(i)	L	Other (see ins	tructions) -									(Αρμίου :	то воевыю	Es Analetaines	f outside	the U.S.)		
જુ	5	Address (number	, street, and apt.	or suite no.) See Inst	tructions	,			Requ	uester's	name a	and address (optional)						
See		ompany Addr																
	6	City, state, and Z	IP code															
		ddress City, S																
	7	List account num	ber(s) here (option	nalj														
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Par				ation Number	,		-1	!! 4 4-		e _n	cial sec	uritu n	ımbar					
				The TIN provided r s is generally your						300	Ciai Sec	ار زاران	Imber	7	_	_		
reside	nt a	alien, sole propi	rietor, or disreg-	arded entity, see t	the instr	ructions for Pa	art I, lat	er. For other	r			-		-				
entitie TIN, la			er identification	n number (ÉIN). If	you do	not have a nu	mber,	see How to	get a	or					\perp			
			more than one	name ees the in	etructio	ne for line 1. A	Mon on	e What Nam	ne and		plover	identifi	cation	number				
Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Employer Number To Give the Requester for guidelines on whose number to enter.				ii														
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Par	t II	Certific	ation															
Unde	be	nalties of perju	ry, I certify that:															
2. Iar Ser	n no	ot subject to ba	ckup withholdir subject to bac	y correct taxpayer ng because: (a) I a :kup withholding a fing; and	ım exen	npt from back	up with	holding, or	(b) I hav	ve not b	been no	otified	by the	Interna				
3. Ian	n a	U.S. citizen or o	other U.S. perso	on (defined below); and													
4. The	FA	ATCA code(s) er	ntered on this fo	orm (if any) indicat	ting that	t I am exempt	from F	ATCA repor	rting is o	correct.								
you ha	tve sitio	failed to report a n or abandonme	all interest and d ent of secured pr	ss out item 2 abov lividends on your to roperty, cancellation not required to sig	ax return on of del	n. For real esta bt, contribution	te trans	actions, item individual re	n 2 does etiremen	not ap	ply. For	r morto (IRA),	gage in and ge	terest pa enerally,	aid, payme	ents		
Sign Here		Signature of U.S. person ▶	West	Signat	ure	Regui	red		Date I	1	at	, Ţ	Zeg	uir	ed			
Ge	ne	eral Instr	uctions	5		V		n 1099-DIV	(dividen	ds, inc	luding	those	from S	tocks or	muti	ıal		

Section references are to the Internal Revenue Code unless otherwise

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.lrs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

. Form 1099-INT (interest earned or paid)

- . Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- . Form 1099-B (stock or mutual fund sales and certain other
- transactions by brokers)
- . Form 1099-S (proceeds from real estate transactions) . Form 1099-K (merchant card and third party network transactions)
- . Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- . Form 1099-A (acquisition or abandonment of secured property). Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,

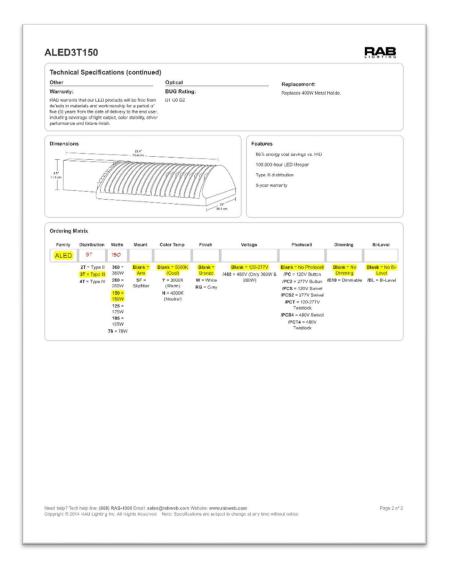
Form W-9 (Rev. 11-2017)





Spec Sheet Sample









DLC / ENERGY STAR Listing Sample







Cost Estimate Sample

- Must show a breakout of equipment and labor costs
- Include quantity to be installed
- Include description of product to be used for project

Company Name

Cost Estimate

DATE XX/XX/201X

12345

ABC123

Company Logo

Address City, State, Zip

Business Phone

Quotation valid until: Void After 30 Days

Quotation #

Prepared by: Name

Name Company Name Address City, State, Zip Business Phone

Comments or special instructions: Project Name

Description	Model Number	QTY	Unit Price	Amount
RAB Lighting ALED 3T 150W 5000K	ALED3T150 \$	188	.00 \$15.00	\$2,820.00
			<i>†</i>	
.abor (35 hours @ \$100/hr)	s	35	.00 \$100.00	\$3,500.00
Freight	s		4	\$700.00
		/	/	
		Sub-To	ıtal:	\$7,020.00
		Tax (6)	/	\$421.20
	TOTAL	- //		\$7,441.20

If you have any questions concerning this quotation, Contact Name, Phone Number, E-mail

THANK YOU FOR YOUR BUSINESS!

Cost Estimate Requirements

Must show a breakout of:
 Equipment Cost
 Labor Cost

Customer Signature:





Required Paperwork – Payment Request

Downstream only – Does not apply to Instant Discounts.

- Incentive Payment Request Form (last page of Offer Letter)
- Final Invoice
 - Must show a break-out of equipment & labor costs
 - ☐ Equipment must include model #, quantity, & unit cost
- <u>Letter of Attestation</u> (LOA)
 - ☐ Signed/dated by customer
- Calculator
 - ☐ If scope of work has been revised since initial application, submit a revised calculator
- Spec sheet(s)
 - ☐ If product used for installation has been revised since initial application, submit new spec sheet(s)

Some applications may require geo-tagged photos or an in-person inspection

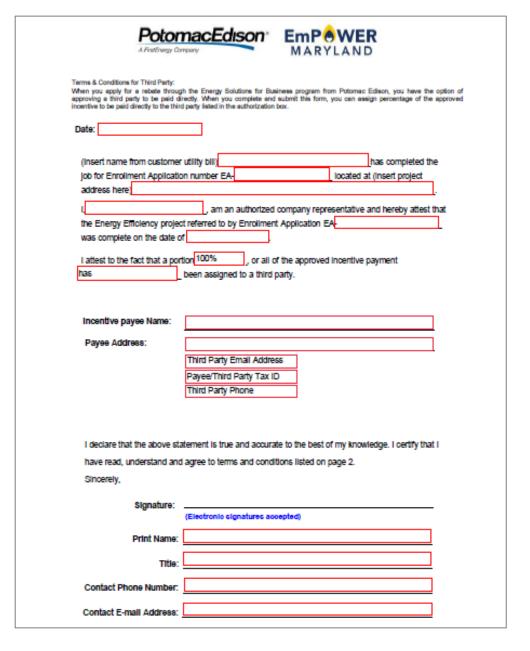




New Letter of Attestation (LOA)

■ LOA MUST:

- Customer name as it appears on the bill
- Addresses must include city, state, & ZIP code
- Third party information filled in (if applicable)
- Customer contact information at the bottom







Final Invoice Sample

- Must show a breakout of equipment and labor costs
- Include quantity to be installed
- Include description of product to be used for project

Company Name

Company Logo

Address City, State, Zip Business Phone

BIII To:

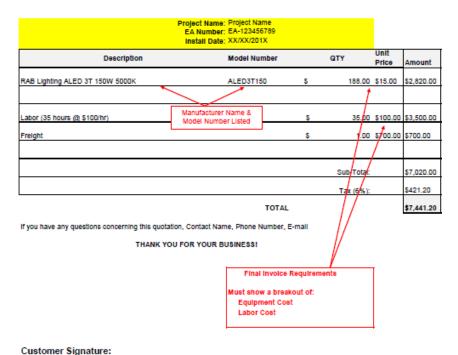
Name Company Name Address City, State, Zip Business Phone

Final Invoice

DATE XX/XX/201X
Quotation # 12345
Customer ID ABC123

Quotation valid until: Void After 30 Days

Prepared by: Name









EmPOWER Maryland programs are funded by a charge on your energy bill. EmPOWER programs can help you reduce your energy consumption and save you money.

To learn more about EmPOWER and how you can participate,

go to energy.maryland.gov/Pages/Facts/empower.aspx.

