



Focused on Our Future

Required Paperwork Samples

April 2025

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
- ☐ [W-9](#)
 - ☐ 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

W-9 Form Sample

- W-9 of entity receiving incentive payment
- Signed and dated within (2) years of payment date

W-9
Form (Rev. November 2017)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification
▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Company Name
2 Business name/disregarded entity name, if different from above

d.b.a. - Company Subsidiary
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 proprietor or single-member LLC
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶
☐ Other (see instructions) ▶

☐ C Corporation ☒ S Corporation ☐ Partnership ☐ Trust/estate

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC 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.

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any) _____
Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
Company Address
6 City, state, and ZIP code
Address City, Stat, Zip
7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN, later.
Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Number To Give the Requester for guidelines on whose number to enter.

Social security number
____ - ____ - ____
OR
Employer identification number
1 1 - 1 1 1 1 1 1

Part II Certification
Under penalties of perjury, I certify that:
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ *Wet Signature Required* Date ▶ *Date Required*

General Instructions
Section references are to the Internal Revenue Code unless otherwise noted.
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.irs.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-DIV (dividends, including those from stocks or mutual funds)
• 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, later.

Cat. No. 10231X Form W-9 (Rev. 11-2017)

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EmPOWER
MARYLAND

PotomacEdison®
A FirstEnergy Company

Need help? Tech help line: (888) RAB-1000 Email: sales@rabweb.com Website: www.rabweb.com
Copyright © 2014 RAB Lighting Inc. All Rights Reserved Note: Specifications are subject to change at any time without notice

DLC / ENERGY STAR Listing Sample

Model# ALED3T150 [blank SF] [blank RG W] / [PC PC2 PCS PCS2] or [PCT PCT4 7PRS 7PRS/PCT 7PRS/PCT4] or [WS2 WS4 LC]

Manufacturer: RAB Lighting
Brand: RAB Lighting
Technical Requirements Version: 4.2
Date Qualified: 01/23/2014
Product ID: P0000175C

LED A DLC Listing

Categorization

Main: Outdoor Luminaires
General Application: High Output
Primary Use: Outdoor Pole/Arm-Mounted Area and Roadway Luminaires

Classification: Standard
Is Parent Product: No
DLC Family Code: BBBDCV
Dimming Status: NotDimmable
Listing Status: Listed

[View Notes](#)

Reported DataZonal LumensSpacing CriteriaVersion HistoryFamily Data

Light Output: 16839 lm
Wattage: 155.2 W
Efficacy: 108.5 lm/W
Power Factor: 1
CCT: 5029 K
CRI: 71
Total Harmonic Distortion: 4.9 %

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

Company Logo

Address
City, State, Zip
Business Phone

Bill To:

Name
Company Name
Address
City, State, Zip
Business Phone

Comments or special instructions:

Cost Estimate

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

Quotation valid until: Void After 30 Days

Prepared by: Name

Project Name

Description	Model Number	QTY	Unit Price	Amount
RAB Lighting ALED 3T 150W 5000K	ALED3T150	\$ 188.00	\$15.00	\$2,820.00
Labor (35 hours @ \$100/hr)		\$ 35.00	\$100.00	\$3,500.00
Freight		\$ 1.00	\$700.00	\$700.00
Sub-Total:				\$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

1. 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
- ☐ [Letter of Attestation](#) (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

PotomacEdison[®]

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Terms & Conditions for Third Party:
When you apply for a rebate through the Energy Solutions for Business program from Potomac Edison, you have the option of approving a third party to be paid directly. When you complete and submit this form, you can assign percentage of the approved incentive to be paid directly to the third party listed in the authorization box.

Date:

(Insert name from customer utility bill) has completed the job for Enrollment Application number EA- located at (insert project address here) .

I, , am an authorized company representative and hereby attest that the Energy Efficiency project referred to by Enrollment Application EA- was complete on the date of .

I attest to the fact that a portion 100%, or all of the approved incentive payment has been assigned to a third party.

Incentive payee Name:

Payee Address:

Third Party Email Address

Payee/Third Party Tax ID

Third Party Phone

I declare that the above statement is true and accurate to the best of my knowledge. I certify that I have read, understand and agree to terms and conditions listed on page 2.

Sincerely,

Signature:

(Electronic signatures accepted)

Print Name:

Title:

Contact Phone Number:

Contact E-mail Address:

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

Bill 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

Project Name: Project Name
EA Number: EA-123456789
Install Date: XX/XX/201X

Description	Model Number	QTY	Unit Price	Amount
RAB Lighting ALED 3T 150W 5000K	ALED3T150	\$ 188.00	\$15.00	\$2,820.00
Labor (35 hours @ \$100/hr)		\$ 35.00	\$100.00	\$3,500.00
Freight		\$ 1.00	\$700.00	\$700.00
Sub Total:				\$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!

Customer Signature:

Final Invoice Requirements

Must show a breakout of:
Equipment Cost
Labor Cost



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.