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## Business Custom Rebate Pre-Installation Report (PIR)

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Please complete and submit one (1) hardcopy of this report for each proposed project to the Program Administrator at the address listed below. You will be informed of project approval or denial no later than 30 days after receipt of this application by the Program Administrator. Review of the PIR will be delayed for incomplete applications. Please refer to the Program Manual for descriptions of the necessary information required in the PIR and direct any questions to the Program Administrator.

ThermWise Business Custom Rebates Program Administrator  
P.O. Box 45360  
Salt Lake City, UT 84145-0360  
1 (800) 867-2044  
E-mail: business@thermwise.com

## Customer Information

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**Business Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Contact Phone:** \_\_\_\_\_ **Contact Fax:** \_\_\_\_\_

**Contact E-mail:** \_\_\_\_\_

**Federal Tax ID:** \_\_\_\_\_ - \_\_\_\_\_

**Business Classification (check one):**

- Corporation    Partnership    Sole Proprietorship/Individual  
 Limited Liability Co.    Other    Exempt

Under penalties of perjury, by checking this box you are confirming the following: 1) I am providing a correct tax ID, 2) I am not subject to backup withholding, and 3) I am a US person (including a US Resident Alien).



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## Customer Acknowledgement

By signing this document, you, the Customer, acknowledge the implementation of demand side management (DSM) measures within your facility or facilities in conjunction with the Business Custom Rebate Program offered by Questar Gas. Your signature also indicates that:

- Your company intends to move forward with the installation of these measures and expect to complete installation by the project completion date listed below.
- You have the necessary authorization within your firm to approve the installation of these measures.
- You agree to assist Questar gas as required in its efforts to review this report and provide access for an inspection at your facility by Questar Gas to verify existing equipment and operation. Questar Gas’s review or inspection of any DSM measures does not constitute any representation as to the technical or economic quality of the DSM measures. Questar Gas, its officers, employees, and contractors will not be liable for the performance of these measures. Questar Gas will not release any propriety information about your business without your permission.

If you have any questions, please contact the Business Custom Rebate Program Administrator at (800) 867-2044.

**Name (printed):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Facility(s) Address:** \_\_\_\_\_

\_\_\_\_\_

**Expected Project Completion Date:** \_\_\_\_\_

**Is this a New Construction Project?** \_\_\_\_\_



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## Facility Information

<b>Facility Type</b> (e.g., grocery, office building, manufacturing):		
<b>Building Age (Years):</b>		
<b>Building Square Footage:</b>		
<b>% of Gross area by Space Type</b>	<b>Space Type</b>	<b>% of Gross Area</b>
<b>Operating Hours by Space Type</b> (e.g., M-F, 7:00 am – 6:00 pm):	<b>Space Type</b>	<b>Operating Hours</b>
<b>Est. Building Age (Years):</b>		
<b>Number of Floors:</b>		
<b>Site Contact (if different from Host Customer Contact above):</b>		
<b>Site Contact Phone:</b>		
<b>Site Contact E-mail:</b>		
<b>Questar Gas Account Number(s) for Site:</b>		

\*\* Please attach a copy of your most recent Questar Gas Utility Bill



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## Project Summary

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In the table below, please summarize the annual natural gas usage of the existing system, the estimated usage after implementation of the energy saving measure, estimated energy savings and projected costs. Calculations and methodology should be detailed in later sections of this application.

Measure Name	Baseline Annual Usage (Dth)	Proposed Annual Usage (Dth)	Annual Savings (Dth)	Estimated Cost (\$)
<b>Totals</b>				



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## Measure Description

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Please provide a brief description (diagrams are helpful) of the proposed natural gas energy efficiency measures. Attach additional copies of this sheet as necessary to describe multiple measures. Each description should include the following information:

- What the measure is and where it is located in the facility or system,
- How many measures will be installed, and
- How the measure is expected to save natural gas.

## System Baseline

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Please check the appropriate box to indicate the type of project:

- Elective retrofit to upgrade existing operable equipment or add functionality
- Retrofit to replace/upgrade inoperable or failed equipment
- New equipment added as part of a facility expansion/renovation
- New construction project



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## **Baseline Natural Gas Consumption**

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Include a separate sheet for each measure. Describe the methodology used to estimate the natural gas consumption of the existing system. Attach additional sheets as necessary to justify assumptions used in the analysis (i.e. equipment specification sheets, trended or measured data, equipment schematics) and provide copies of any spreadsheets used. The reviewer should be able to understand and replicate the calculations given the data provided in this report. The description should summarize:

- The calculation algorithm, including formulas used
- Any data collected and used to characterize the existing system
- Major assumptions (i.e. operating hours, average heating load, etc.)

**Measure Baseline Annual Natural Gas Consumption (Dth/yr):** \_\_\_\_\_



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## **Proposed Natural Gas Consumption**

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Include a separate sheet for each measure. Describe the methodology used to estimate the natural gas consumption of the proposed system. Attach additional sheets as necessary to justify assumptions used in the analysis (i.e. equipment specification sheets, trended or measured data, equipment schematics) and provide copies of any spreadsheets used. The reviewer should be able to understand and replicate the calculations given the data provided in this report. The description should summarize:

- The calculation algorithm, including formulas used
- Any data collected and used to characterize the existing system
- Major assumptions (i.e. operating hours, average heating load, etc.)

**Proposed Measure Annual Natural Gas Consumption (Dth/yr):** \_\_\_\_\_



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## Measure Costs

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Provide a summary of the anticipated costs for each measure. Attach additional copies of this sheet as necessary to describe multiple measures. Attach copies of any material/labor estimates, purchase order requests and bid estimates for each measure. The cost estimate summary should include the following:

- Estimated material/equipment costs
- Estimated labor/installation costs
- Documentation of estimated costs including estimates for equipment/labor costs from contractors or a description of how costs were estimated (i.e. hours of internal labor multiplied by hourly rate)
- Estimated commissioning costs
- Estimated energy engineering costs
- Other estimated costs (i.e. contingency, shipping, taxes) as necessary

**Estimated Measure Costs (\$):** \_\_\_\_\_





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## Commissioning Plan

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Please provide a commissioning plan for each proposed measure on a separate copy of this sheet. Attach additional sheets as necessary for to describe data trending, functional testing, and deficiency reporting. Measures will not be approved for rebates unless a commissioning plan is provided or adequate explanation is provided why a particular measure does not require commissioning. Commissioning procedures will vary in detail and rigor, depending on the measures installed and are subject to approval by Questar Gas. Please reference the Program Manual for additional guidance defining the scope and type of commissioning required for each measure. The commissioning plan should include the following:

- Data to be collected to verify system operation,
- Period of time to collect data,
- Measurement technique for each data point,
- Estimated commissioning cost, and
- Any measure-specific commissioning practices.

## Commissioning Method

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Please check the appropriate box to indicate the type of commissioning to be performed:

- No commissioning required
- Deemed savings approach
- Simple Monitoring & Verification
- Full Monitoring & Verification



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## Other Information

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Please list here and attach any additional information necessary to describe the proposed measures, calculation methodologies, commissioning plans or cost estimates. Additional information may include:

- Building or system schematics
- Equipment specification sheets
- System operation manuals
- Sequence of Operations or control strategies