

Baltimore Gas and Electric Company
Full RCx Services Application Form
 a BGE Smart Energy Savers ProgramSM



INTRODUCTION

BGE's Retrocommissioning (RCx) Program is available to qualifying commercial customers within the BGE service territory. The goal of this program is to help you identify opportunities to improve the efficiency of major electrical systems in your building and reduce energy costs without adversely affecting facility or system operations.

The RCx Program may offer financial incentives to buy-down implementation costs for qualified and accepted measures. For complete information about program terms and conditions, please review the RCx Process Manual or visit BGESmartEnergy.com. You may also contact the Program Administrator at 410.290.1202 or Business@BGESmartEnergy.com.

I. PRE-APPLICATION CHECKLIST

Please confirm that you meet the following minimum eligibility requirements prior to submitting an application to participate in BGE's RCx Program.

Yes

- Do you have a combined conditioned area of 75,000 square feet or larger served by a central system?
- Are you a BGE delivery service customer, regardless of which electric supplier you have chosen?
- Do you have an existing building automation system or energy management system (EMS) with direct digital control (DDC)?
- Are you free from planned major system renovations or retrofits?
- Are you able to complete the installation of identified retrocommissioning measures within 6 months of receiving the Final RCx Report?
- Do you understand that approved measures are to be implemented no later than 6 months after BGE's approval of the Final Report? (Incentives may be foregone and/or the Full RCx Services cost incurred to date may be imposed on the customer for non-implementation of measures).
- Are you willing to commit the necessary time and personnel resources to fully support the RCx process?

If selected for participation in the program, will you accept the following responsibilities?

- Are you willing to commit up to \$15,000 for Full RCx Services measures identified with an estimated simple payback of fewer than 1.5 years?
- Provide access to the facility and time for facility personnel to interface with the retrocommissioning provider?
- Provide and assist with the reporting and collection of information pertaining to the retrocommissioning of the facility?
- Implement in a timely manner the mutually accepted retrocommissioning measures according to the scope and procedures outlined by BGE?

II. NEXT STEPS

If you answered yes to the above questions, please complete this application and submit to BGE for consideration. In reviewing your application, BGE will be reviewing evidence that cost-effective retrocommissioning opportunities exist at your facility. BGE's decision regarding selection of program applicants into the RCx Program will be final and binding for all parties.

III. CUSTOMER INFORMATION

Company Name	Facility Name (if different)	Federal Tax ID #
Street Address (Facility)		Electric Acct #
City	State	Zip
Mailing Address (if different)		
City	State	Zip

For more information about the program, go to BGESmartEnergy.com.
 Please submit for review via one of the following: Fax to 410-290-0861, email to Business@BGESmartEnergy.com or mail to BGE Smart Energy Savers ProgramSM, c/o ICF International, 7125 Thomas Edison Drive, Suite 100, Columbia, MD 21046

IV. FACILITY OWNER REPRESENTATIVE INFORMATION

Contact Name		Contact Title			
Street Address					
City	State	Zip	Contact Telephone ()	Contact Fax ()	Email

V. RCx SERVICE PROVIDER INFORMATION

Company Name					
Contact Name			Contact Title		
Street Address					
City	State	Zip	Contact Telephone ()	Contact Fax ()	Email

VI. PAYMENT INFORMATION

Payee Company or Corporate Tax ID (9 digits required. Do not include tax-exempt number.)		
Business Classification for Payee: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Ltd. Partnership <input type="checkbox"/> Non-Profit <input type="checkbox"/> Other		
Make incentive checks payable to: <input type="checkbox"/> Customer <input type="checkbox"/> RCx Service Provider		
Company/Corp./Owner's Legal Name		
Street Address		
City	State	Zip

VII. FACILITY INFORMATION

Year of Construction	Number of Floors
Total Floor Area (sq. ft.)	Total Conditioned Area (sq. ft.)
Electric Account Number(s)	Natural Gas Utility
Annual kWh Usage	Natural Gas Account Number(s)
Peak kW and Month Occurring	Annual Therm Usage

VIII. HVAC SYSTEMS

Check all of the HVAC system(s) in the facility.

Cooling Systems	Heating Systems	Ventilation & Distribution
<input type="checkbox"/> Chiller Air Cooled <input type="checkbox"/> Chiller Water Cooled <input type="checkbox"/> Water Source Heat Pump <input type="checkbox"/> Condenser <input type="checkbox"/> Other	<input type="checkbox"/> Boiler, Hot Water <input type="checkbox"/> Boiler Steam <input type="checkbox"/> Rooftop Furnace <input type="checkbox"/> Electric Baseboard <input type="checkbox"/> Other	<input type="checkbox"/> Central AHU <input type="checkbox"/> VAV and Reheat <input type="checkbox"/> Dual Duct <input type="checkbox"/> Economizers <input type="checkbox"/> Other

IX. FACILITY CONTROL SYSTEMS

Age of Energy Management Control System (EMCS)	Capable of trending and storing multiple points?
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Components and systems controlled by digital direct controls (DDC)

Components controlled (not just actuated by pneumatics)

XI. CUSTOMER ACCEPTANCE OF APPLICATION TERMS

By signing below, I certify that: (1) the information contained in this application is accurate and complete to the best of my knowledge; (2) I have read and understood the obligations of program participants, including the commitment of the minimum of \$15,000 to implement identified and approved RCx measures; (3) I will put forth a good faith effort to comply with all of the RCx Program requirements if selected for participation in the program.

Customer Name/Title

Customer Signature	Date
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ADMINISTRATIVE USE ONLY

Project ID Number	Program Rep.		
Date Received	Date Input	Inspection Required	
Program Manager Approval		Date Approved	