



## 2009 PAY FOR PERFORMANCE PROGRAM Request for Incentive #2

Application Number: \_\_\_\_\_

### Partner Contact Information

Partner Name \_\_\_\_\_

Partner Mailing Address _____	City _____	State _____	Zip _____	Partner Contact Number _____
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### Participant Contact Information

Facility Name \_\_\_\_\_

Facility Address _____	City _____	State _____	Zip _____
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Participant Name \_\_\_\_\_

Participant Mailing Address _____	City _____	State _____	Zip _____	Participant Contact Number _____
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### Payment Information Make check payable and mail to

Name \_\_\_\_\_

Address _____	City _____	State _____	Zip _____
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#### Confirm that all required documentation has been submitted to the Pay for Performance Case Manager:

If the documents outlined below have not been approved by Case Manager please submit them along with an unsigned copy of this form for review.

- Yes, the signed and previously submitted Partner-Participant Contract is still in effect.
- Yes, the completed Installation Report has been approved by the Case Manager and is attached to this form.

By signing below and submitting this request, the Participant and Pay for Performance Partner confirm that that the attached Installation Report is an accurate representation of measure installation and that the parties have satisfied their obligations under New Jersey's Clean Energy Pay for Performance Program, and agreed to the terms necessary for release of this payment. Please note that a QA/QC site visit may be conducted by the Case Manager before payment is released.

#### Partner

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

#### Participant

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Please email all completed forms to: [vrozanova@trcsolutions.com](mailto:vrozanova@trcsolutions.com)

For further questions, please contact the Pay for Performance Case Manager at: (732) 855 - 0033