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Non-Residential Prescriptive Enhanced Program Bundle
Initial Assessment for Virginia

DEV-NRPE-BUNDLE-9AM-IA-v0826

INSTRUCTIONS FOR INITIAL ASSESSMENT

This form must be completed and submitted for all projects in the Non-Residential Prescriptive Enhanced Program Bundle. You can only begin work through a participating contractor after your initial assessment is approved.

1. CHECK PROJECT AND EQUIPMENT ELIGIBILITY

- Read all Terms and Conditions carefully to confirm your eligibility to participate in the Non-Residential Prescriptive Enhanced Program Bundle. Visit DomSavings.com to view the full list of qualifying measures and to select a participating contractor.

2. SUBMIT AN INITIAL ASSESSMENT TO RESERVE FUNDING

- Wait until you receive notice that the initial assessment has been reviewed before starting your project with the participating contractor. You will receive a confirmation stating your project has been reviewed and the amount of rebate incentive reserved.
- All projects involving Evaporator Fans (Measure 1 in the Rebate Chart) or HVAC System Tune-Up (Measure 6) will be contacted for an on-site visit.

3. INSTALL EQUIPMENT OR PERFORM PROJECT WORK

- The incentive reservation allows 120 days to complete your project. You can only submit a rebate application when the project is complete. Contact us if you think your project will require more than 120 days.

4. SUBMIT A REBATE APPLICATION

- Visit DomSavings.com to download the rebate application. Read all instructions carefully and submit your rebate application including additional requested information within 45 days of the service date.

SUBMIT IN ONE OF THREE WAYS:

Email: Prescriptive@honeywell.com
eFax: 804-621-2241
Mail: Honeywell Smart Energy
3951 Westerre Parkway, Suite 350 • Richmond, VA 23233

TERMS AND CONDITIONS FOR DOMINION ENERGY VIRGINIA

These terms and conditions apply to the Non-Residential **Enhanced Prescriptive Bundle** ("Program"). The Program has been approved by the Virginia State Corporation Commission.

Any reference in these documents to "Dominion Energy" or "Dominion Energy Virginia" should be read as a reference to Virginia Electric and Power Company d/b/a Dominion Energy Virginia, as well as its authorized agents and contractors.

ENROLLMENT QUALIFICATIONS AND REQUIREMENTS FOR PARTICIPATION

1. Service must be performed on or after January 1, 2026.
2. Program participant must be a Dominion Energy Virginia non-residential customer ("Customer") who is not exempt by statute, not under special contract, is responsible for the electric bill, and has not elected to opt-out of paying the DSM rider.
3. Program participant must be a Dominion Energy Virginia non-residential customer who is the owner of the facility or reasonably able to secure permission to complete measures.
4. Customer is eligible for more than one rebate per location during the Program time period, except as stated below.
5. Customer who has previously received a rebate for any of the measures in the Program is not eligible to receive another rebate for installing the same measure on the same equipment/system that previously received an incentive.
6. Work may be completed either by a registered contractor participating in Dominion Energy's network for this program, or by the individual Customer via self-install.
7. Customers who choose to self-install the measures must submit an initial assessment form prior to purchasing equipment or initiating work. Self-install measures are subject to both a pre-approval inspection and a post-installation inspection for Quality Assurance (QA) purposes.
8. Dominion Energy Virginia and/or its designees including Program administrators and evaluation contractors reserve the right to review installations to verify completion and measure energy savings to ensure compliance with all Program requirements. Such reviews will be made at a time convenient to the applicant. Denial of such verification or misrepresentation of installation location or measure eligibility may result in forfeiture of the rebate.
9. Service must be completed in accordance with all laws, codes and other requirements applicable under federal, state and local authority.
10. The Customer understands that they may be contacted by Dominion Energy via survey or questionnaire to provide feedback regarding Customer satisfaction with the Program.
11. The Customer understands that through participation in this energy conservation program and receiving a rebate, they are ineligible to opt out of energy efficiency programs for a period of three years following their year of participation. Year of participation is specifically based on the date of incentive approval by Dominion Energy.

PROCESS AND PAYMENT

1. An approved initial assessment reserves incentive funding and allows 12 months to complete the project. Customer can only submit a rebate application when the project is complete.
2. Rebate application must be submitted within 45 days of the service date. It is the Customer's responsibility to ensure that all requirements of the rebate are met. Failure to provide any of the required information will delay application processing and could result in non-payment.
3. Rebate payments will be capped at a maximum limit of 75% of Customer's total invoice amount based on the eligible incentives on Customer's rebate application.
4. When the application is approved, a rebate check will be issued to the account holder and mailing address on record with Dominion Energy Virginia unless the Customer has authorized in writing that payment be made to the contractor specified in the application.
5. Rebate payments are based on the date of service. Customers must abide by the rules and rebate levels in effect on the date of service.
6. Please allow up to 90 days from the date all required information is received to process your rebate.
7. Customer should seek appropriate consultation concerning any tax liabilities that could be associated with the receipt of the rebate.

OTHER REQUIREMENTS

1. Program procedures, requirements and rebate levels are subject to change or cancellation without notice and are subject to Program funds being available and regulatory approval.
2. Dominion Energy Virginia, its parents, subsidiaries, employees, affiliates and agents assume no responsibility for, and make no representations (express or implied) about, the performance of the equipment or equipment warranty, the quality of the work, labor and/or materials supplied, and/or the acts or omissions of the participating contractor.
3. By participating in this Program, the Customer hereby agrees to indemnify, defend and hold harmless Dominion Energy Virginia, its parents, subsidiaries, employees, affiliates and agents from any and all liability associated with the Program. Dominion Energy Virginia shall not be liable for loss or damage to any person or property whatsoever, resulting directly or indirectly from participation in this Program.
4. Dominion Energy Virginia retains all rights to energy and demand savings resulting from measures installed under this Program. Dominion Energy has the exclusive right to enroll, nominate, or offer a bid for energy or demand reductions resulting from measures installed under this Program into load management programs, demand response programs, or auctions operated by PJM Interconnection, L.L.C. ("PJM"), the regional electric transmission entity of which Dominion Energy Virginia is a member. Customer's participation in the program means that the Customer is consenting to Dominion Energy Virginia sharing the Customer's pertinent information with PJM, Dominion Energy Virginia's agents and contractors, including, but not limited to, its implementing contractors and its measurement and verification vendor. Pertinent Customer information includes account holder name, account number, energy usage and billing information, address, other contact information, measures installed, period of installation, demand/energy reductions resulting from measures installed under this Program and the technical basis for such reductions, loss factors, coincidence factors, interactive factors, building type and other information necessary to implement and monitor the Program including other information as required by PJM or any other regulatory authority.
5. Customer understands and affirms that the installed measures associated with this rebate application have not been, and will not be, incentivized or otherwise financially supported by any other Dominion Energy Virginia-sponsored energy efficiency program. Under no circumstances may a program measure be incentivized twice except as otherwise noted in the Program Terms and Conditions regarding allowances for multiple rebate applications (when applicable).
6. The Customer agrees, as a condition of participation in the program, to remove and dispose of the equipment being replaced by the Program EEMs in accordance with all laws, codes, and regulations. The Customer agrees not to reinstall any of this equipment anywhere in Virginia or transfer it to any other party for installation in Virginia.
7. These Program specific terms and conditions are in addition to the terms and conditions of service currently on file with the Virginia State Corporation Commission and contained in any agreement between the Customer and a Program vendor.

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Virginia Non-Residential Prescriptive Enhanced Program Bundle

Initial Assessment for All Measures

SUBMIT IN ONE OF THREE WAYS:

1. **Email:** Prescriptive@honeywell.com
2. **eFax:** 804-621-2241
3. **Mail:** Honeywell Smart Energy
   3951 Westerre Parkway, Suite 350 • Richmond, VA 23233

CUSTOMER DETAILS

Name on Dominion Energy Account:

Dominion Energy Account Number:

Service Address:

City: | State: | Zip Code:

Key Contact Name:

Email Address: *(We will confirm receipt of your application via your e-mail address)*

Phone Number:

Please select one: I ☐ own ☐ lease this non-residential facility.

By signing this application, I agree to the above terms and conditions. I certify that I am the Dominion Energy Virginia customer and owner or lessee of the business described above, and that I am authorized to take action on the Dominion Energy account listed above.

Customer Name (please print) | Customer Signature | Date

CONTRACTOR DETAILS

Company Name:

Technician Name:

Company Street Address

City: | State: | Zip Code:

Company Phone: | Email Address:

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Duct Testing and Sealing

Rebate cannot be processed with any missing information.

UNIT INFORMATION

Repair Required: ☐ Yes ☐ No

Manufacturer:	Coil Model:	Serial Number:
Cooling Capacity (Tons):	Heating Capacity (Btu/h):	Conditioned Space (sq. ft.):

Primary Heating Fuel (Select one): ☐ Electric ☐ Non-Electric ☐ None

Phase (Select one): ☐ 1 ☐ 3

AC System Type (Select one):
☐ Packaged Terminal AC ☐ Split System AC ☐ Single Packaged AC
☐ Air-Cooled Chiller ☐ Water-Cooled Chiller ☐ Split System Heat Pump
☐ Single Packaged Heat Pump ☐ Packaged Terminal Heat Pump ☐ Geothermal Heat Pump

Fan System Type (Select one):
☐ Air Foil/Backward Incline ☐ Air Foil/Backward Incline with Inlet Guide Vanes
☐ Forward Curved ☐ Forward Curved with Inlet Guide Vanes

Enter any three of the four values:	SEER:	EER:	COP:	HSPF:

DUCT INFORMATION

Duct Type (Select one): ☐ Rigid Sheet Metal ☐ Flex-Duct ☐ Rigid Board

Duct Testing Method (Select one):
☐ Aerosol Test Equipment ☐ Duct Blaster Pre/Aerosol Post
☐ Modified Blower Door Subtraction ☐ Total Leakage Duct Blaster

Insulation Level (Select one): ☐ No Insulation ☐ R2 Insulation ☐ R4 Insulation ☐ R6 Insulation ☐ R8 Insulation

CFM25 Leakage Pre:	CFM25 Leakage % Pre:	CFM25 Leakage Post:	CFM25 Leakage % Post:

REBATE INFORMATION

Measure	Calculation	Rebate Amount
≤20 tons	$90 / ton per unit x _____ tons	$
≥21 tons	$75 / ton per unit x _____ tons	$

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HVAC System Tune-Up

Rebate cannot be processed with any missing information. If unit type is an Air-Cooled or Water-Cooled Chiller, IPLV Rating Chiller and Water Set Point is REQUIRED.

CONTRACTOR CHECKLIST

✔ Checklist items marked as "NO" have been corrected

Thermostat has been checked for proper operation ☐	Thermostat is operating properly ☐ Yes ☐ No	☐
Air filter has been inspected ☐	Existing filter is clean or has recently been changed ☐ Yes ☐ No	☐
Primary and secondary condensate drains have been cleaned, inspected and tested ☐	Condensate drains show no sign of leakage ☐ Yes ☐ No Plumbing components and traps intact ☐ Yes ☐ No Drains free from obstruction ☐ Yes ☐ No Drain pan free of biological growth ☐ Yes ☐ No	☐ ☐ ☐ ☐
Evaporator coil has been cleaned and inspected ☐	Coil free of contaminants that could restrict air flow ☐ Yes ☐ No Evaporator coil and fins are cleaned and brushed ☐ Yes ☐ No Evaporator coil is free of contaminants that could restrict air flow ☐ Yes ☐ No	☐ ☐ ☐
Evaporator fan and motor has been inspected ☐	Fan or blower has tight connection with blower motor shaft ☐ Yes ☐ No Fan can rotate freely ☐ Yes ☐ No Blower wheel is free of dust and debris ☐ Yes ☐ No Bearings are properly lubricated (if applicable) ☐ Yes ☐ No	☐ ☐ ☐ ☐
All accessible refrigerant lines have been inspected ☐	Line free of any leaks, kinks, crushed sections or restrictions ☐ Yes ☐ No Proper insulation in place ☐ Yes ☐ No	☐ ☐
Condenser coil has been cleaned and inspected ☐	Condenser coil and fins are cleaned and brushed ☐ Yes ☐ No	☐
Condenser fan motor has been inspected ☐	Fan blade has a tight connection to the blower motor shaft ☐ Yes ☐ No Fan can rotate freely ☐ Yes ☐ No Fan is properly lubricated (if applicable) ☐ Yes ☐ No	☐ ☐ ☐
Inspect all electrical connections ☐	Tighten all electrical connections ☐ Yes ☐ No Check voltage and amp draws on motors, capacitor and compressor ☐ Yes ☐ No	☐ ☐
Heat exchanger has been inspected (if applicable) ☐	Heat exchanger is operating properly ☐ Yes ☐ No	☐
Checked system for proper refrigerant charge level ☐	System was properly charged ☐ Yes ☐ No	☐

UNIT INFORMATION

Existing Economizer Type:
☐ Fixed Enthalpy ☐ Differential Enthalpy ☐ Fixed Temperature
☐ Differential Temperature ☐ None

Unit Type (Select one):
☐ Packaged Terminal AC ☐ Split System AC ☐ Single Packaged AC
☐ Air-Cooled Chiller ☐ Water-Cooled Chiller ☐ Split System Heat Pump
☐ Single Packaged Heat Pump ☐ Packaged Terminal Heat Pump ☐ Geothermal Heat Pump

Unit Model Number:	Manufacturer:	Serial Number:	Enter any three of the four values: SEER:	EER:	COP:	HSPF:

Primary Heating Fuel:	Cooling Capacity Per Unit:	IPLV Rating of Chiller (if applicable):	Water Set Point of Chiller (if applicable): (30 to 70 °F)
☐ Electric ☐ Non-Electric ☐ None			

REBATE INFORMATION

Measure	Calculation	Rebate Amount
≥12 tons (≥135k Btu/h)	$50 per ton x _____ tons	$
<12 tons (<135k Btu/h)	$60 per ton x _____ tons	$

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Refrigeration

Rebate cannot be processed with any missing information. Each line represents a measure entry per refrigeration unit. Please use a new form if you exceed the space for each measure.

ENERGY STAR® CERTIFIED REFRIGERATION SYSTEM DOORS

Item No.	Quantity Installed	Refrigeration Door Type	Refrigeration System Information		
1.		☐ Horizontal, solid door ☐ Walk-in ☐ Horizontal, glass door ☐ None ☐ Vertical, solid door ☐ Vertical, glass door	Volume (cu. ft.):	Manufacturer:	Model No:
			ENERGY STAR Label Verified: ☐ Yes ☐ No	Freezer/Refrigerator Type: ☐ Freezer (low or medium temperature) ☐ Refrigerator/Cooler (high temperature) ☐ Unrefrigerated	
2.		☐ Horizontal, solid door ☐ Walk-in ☐ Horizontal, glass door ☐ None ☐ Vertical, solid door ☐ Vertical, glass door	Volume (cu. ft.):	Manufacturer:	Model No:
			ENERGY STAR Label Verified: ☐ Yes ☐ No	Freezer/Refrigerator Type: ☐ Freezer (low or medium temperature) ☐ Refrigerator/Cooler (high temperature) ☐ Unrefrigerated	

ANTI-SWEAT DOOR FILM

Item No.	No. of Refrig. Doors	Size of Door Film (sq. ft.)	ASD Heat (Watts)	Refrigeration System Information		
1.				Manufacturer:	Phase: ☐ 1 ☐ 3	Refrig. System Load:
				Freezer/Refrigerator Type: ☐ Freezer (low or medium temperature) ☐ Refrigerator/Cooler (high temperature) ☐ Unrefrigerated		

EVAPORATOR FANS FOR REFRIGERATION

Item No.	Quantity Installed	Refrigeration System Information			
1.		Old Equipment Manufacturer:*	Old Equipment Model No:*	New Equipment Manufacturer:	New Equipment Model No:
		Refrig. System Load: Motor Size (HP):	Compressor Voltage:*	Refrig. System Age:*	Evap Fan
		Old Equipment Motor Type:* ☐ Permanent Split Capacitor (PSC) motor ☐ Shaded Pole (SP) motor			
		Freezer/Refrigerator Type: ☐ Freezer (low or medium temperature) ☐ Refrigerator/Cooler (high temperature) ☐ Unrefrigerated			
		Phase: ☐ 1 ☐ 3	Compressor Type:* ☐ Standard Reciprocating ☐ Discus ☐ Scroll	Compressor System Configuration:* ☐ Standalone ☐ Parallel unequal multiplex ☐ Standalone with VSD ☐ Parallel equal multiplex	Compressor Amps:*

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DEV-NRPE-BUNDLE-9AM-IA-v0826

Refrigeration (Continued)

AUTO CLOSERS, DOOR GASKETS AND STRIP CURTAINS

AUTO CLOSERS

Item No.	Quantity Installed:	No. of Doors:

DOOR GASKETS

Item No.	Length of Gaskets (ft.):	No. of Doors:

STRIP CURTAINS

Item No.	Quantity Installed:	Area of Curtain (sq. ft.)	No. of Doors:

Refrigeration Door Type

- ☐ Vertical, solid door
- ☐ Vertical, glass door
- ☐ Horizontal, solid door
- ☐ Horizontal, glass door
- ☐ Walk-in
- ☐ None

Refrigeration System Information

Manufacturer:

Freezer/Refrigerator Type:

- ☐ Freezer (low or medium temperature)
- ☐ Refrigerator/Cooler (high temperature)
- ☐ Unrefrigerated

Refrig. System Load:

Phase:

☐ 1 ☐ 3

AUTO CLOSERS

Item No.	Quantity Installed:	No. of Doors:

DOOR GASKETS

Item No.	Length of Gaskets (ft.):	No. of Doors:

STRIP CURTAINS

Item No.	Quantity Installed:	Area of Curtain (sq. ft.)	No. of Doors:

Refrigeration Door Type

- ☐ Vertical, solid door
- ☐ Vertical, glass door
- ☐ Horizontal, solid door
- ☐ Horizontal, glass door
- ☐ Walk-in
- ☐ None

Refrigeration System Information

Manufacturer:

Freezer/Refrigerator Type:

- ☐ Freezer (low or medium temperature)
- ☐ Refrigerator/Cooler (high temperature)
- ☐ Unrefrigerated

Refrig. System Load:

Phase:

☐ 1 ☐ 3

AUTO CLOSERS

Item No.	Quantity Installed:	No. of Doors:

DOOR GASKETS

Item No.	Length of Gaskets (ft.):	No. of Doors:

STRIP CURTAINS

Item No.	Quantity Installed:	Area of Curtain (sq. ft.)	No. of Doors:

Refrigeration Door Type

- ☐ Vertical, solid door
- ☐ Vertical, glass door
- ☐ Horizontal, solid door
- ☐ Horizontal, glass door
- ☐ Walk-in
- ☐ None

Refrigeration System Information

Manufacturer:

Freezer/Refrigerator Type:

- ☐ Freezer (low or medium temperature)
- ☐ Refrigerator/Cooler (high temperature)
- ☐ Unrefrigerated

Refrig. System Load:

Phase:

☐ 1 ☐ 3

AUTO CLOSERS

Item No.	Quantity Installed:	No. of Doors:

DOOR GASKETS

Item No.	Length of Gaskets (ft.):	No. of Doors:

STRIP CURTAINS

Item No.	Quantity Installed:	Area of Curtain (sq. ft.)	No. of Doors:

Refrigeration Door Type

- ☐ Vertical, solid door
- ☐ Vertical, glass door
- ☐ Horizontal, solid door
- ☐ Horizontal, glass door
- ☐ Walk-in
- ☐ None

Refrigeration System Information

Manufacturer:

Freezer/Refrigerator Type:

- ☐ Freezer (low or medium temperature)
- ☐ Refrigerator/Cooler (high temperature)
- ☐ Unrefrigerated

Refrig. System Load:

Phase:

☐ 1 ☐ 3

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Refrigeration (Continued)

COIL CLEANING

Item No.	No. of Systems Serviced	Amount of Dust Per System (Pre)	Amount of Dust Per System (Post)	Refrigeration System Information
1.		☐ Clean ☐ Light ☐ Medium ☐ Heavy	☐ Clean ☐ Light ☐ Medium ☐ Heavy	Manufacturer: Phase: ☐ 1 ☐ 3 Refrig. System Load: Freezer/Refrigerator Type: ☐ Freezer (low or medium temperature) ☐ Refrigerator/Cooler (high temperature) ☐ Unrefrigerated
2.		☐ Clean ☐ Light ☐ Medium ☐ Heavy	☐ Clean ☐ Light ☐ Medium ☐ Heavy	Manufacturer: Phase: ☐ 1 ☐ 3 Refrig. System Load: Freezer/Refrigerator Type: ☐ Freezer (low or medium temperature) ☐ Refrigerator/Cooler (high temperature) ☐ Unrefrigerated
3.		☐ Clean ☐ Light ☐ Medium ☐ Heavy	☐ Clean ☐ Light ☐ Medium ☐ Heavy	Manufacturer: Phase: ☐ 1 ☐ 3 Refrig. System Load: Freezer/Refrigerator Type: ☐ Freezer (low or medium temperature) ☐ Refrigerator/Cooler (high temperature) ☐ Unrefrigerated

FLOATING HEAD PRESSURE CONTROLS

Item No.	Quantity Installed	Temperature	Refrigeration System Information				Floating Head Control Type*
1.		☐ Deep Freezer (-35°F – 1°F) ☐ Freezer (0°F – 30°F) ☐ Refrigerator/Cooler (31°F – 55°F)	Manufacturer:	Model No:	Refrig. System Load:		☐ Variable Set Point and Speed (Air-Cooled) ☐ Variable Set Point (Air-Cooled)
			Phase: ☐ 1 ☐ 3	Compressor Voltage:*	Compressor System Configuration:* ☐ Standalone ☐ Parallel unequal multiplex ☐ Standalone with VSD ☐ Parallel equal multiplex		
			Refrig. System Age:*	Compressor Amps:*	Compressor Efficiency:*	Compressor Type:* ☐ Standard Reciprocating ☐ Discus ☐ Scroll	

DEMAND DEFROST CONTROL

Item No.	Quantity Installed				
1.		Manufacturer:	Model No:		
		Refrigeration Capacity (Btus):	No. of Evaporator Fans per Controller:	☐ Cooler or ☐ Freezer	kW of Defrost*
		Customer Building Type: ☐ Full Service Restaurant ☐ Primary School ☐ Hospital ☐ Quick Service Restaurant ☐ Secondary School ☐ Large Hotel ☐ Other: _____			

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Dominion Energy Account Number:

DEV-NRPE-BUNDLE-9AM-IA-v0826

Refrigeration (Continued)

ASDH (ANTI-SWEAT) DOOR HEATER CONTROLS

Item No.	No. of Refrig. Doors	Refrigeration System Information				ASD Heat (Watts)	ASD Heat Control Type*
1.		Manufacturer:		Model No:			☐ None ☐ On/Off ☐ Micropulse
		Phase: ☐ 1 ☐ 3	Freezer/Refrigerator: ☐ Freezer (low or medium temperature) ☐ Refrigerator/cooler (high temperature) ☐ Unrefrigerated	Location: ☐ Outdoors, on grade ☐ Outdoors, rooftop ☐ Rooftop penthouse ☐ Store, customer area ☐ Store, back of house			
		Refrig. System Rated Capacity (Btu/h):	Refrig. System Age:*	Compressor Voltage:	Compressor Amps:		

NIGHT COVERS

Item No.	Length of Night Cover (ft.)	Refrigeration System Information			
1.		Manufacturer:	Model No:	Refrig. System Rated Capacity (Btu/h):	
		Phase: ☐ 1 ☐ 3	Freezer/Refrigerator: ☐ Freezer (low or medium temperature) ☐ Refrigerator/cooler (high temperature) ☐ Unrefrigerated	Location: ☐ Outdoors, on grade ☐ Store, customer area ☐ Store, back of house	Compressor System Configuration:* ☐ Standalone ☐ Standalone with VSD ☐ Parallel equal multiplex
		Refrig. System Age:*	Compressor Type* ☐ Standard Reciprocating ☐ Discus ☐ Scroll	Compressor Amps:	Compressor Voltage:

LED CASE LIGHTING

Item No. (on Rebate Chart)	Existing Fixture Type (Provide details)	Existing Quantity	Existing Wattage	New Fixture Type (Provide details)	New Quantity	New Wattage
1.						
	New Fixture Manufacturer:			New Fixture Model No:		
	Freezer/Refrigerator: ☐ Freezer (low or medium temperature) ☐ Refrigerator/cooler (high temperature) ☐ Unrefrigerated					
	New Lights installed in Conditioned Space? ☐ Yes ☐ No			Primary Heating Fuel: ☐ Electric ☐ Non-Electric ☐ None		
	Reason for Work Done: ☐ Retrofit Early Replacement ☐ Retrofit Replace Broken ☐ New Construction: Light Power Density (0.01 to 3.00) – _____ Watt/sq ft					

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Kitchen Appliances & Others

Rebate cannot be processed with any missing information. Each line represents a measure entry per unit. Please use a new form if you exceed the space for each measure.

ENERGY STAR® CERTIFIED ELECTRIC FRYERS (ENERGY STAR Certified Appliances Required)

Item No.	Quantity Installed	No. of Bins Per Fryer	Fryer Category	Product Information			
1.			☐ Standard ☐ Large Vat	Manufacturer: / Model No:	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
					ENERGY STAR Label Verified: ☐ Yes ☐ No		
2.			☐ Standard ☐ Large Vat	Manufacturer: / Model No:	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
					ENERGY STAR Label Verified: ☐ Yes ☐ No		
3.			☐ Standard ☐ Large Vat	Manufacturer: / Model No:	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
					ENERGY STAR Label Verified: ☐ Yes ☐ No		

ENERGY STAR CERTIFIED HOT FOOD HOLDING CABINETS (ENERGY STAR Certified Appliances Required)

Item No.	Quantity Installed	Volume of Cabinet (cu. ft.)	Product Information		
1.			Manufacturer: / Model No:	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
				ENERGY STAR Label Verified: ☐ Yes ☐ No	
2.			Manufacturer: / Model No:	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
				ENERGY STAR Label Verified: ☐ Yes ☐ No	
3.			Manufacturer: / Model No:	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
				ENERGY STAR Label Verified: ☐ Yes ☐ No	

ENERGY STAR CERTIFIED GRIDDLES (ENERGY STAR Certified Appliances Required)

Item No.	Quantity Installed	Specifications		Product Information			
1.		Width of Cooking Surface (ft.):	Depth of Cooking Surface (ft.):	Manufacturer: / Model No:	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
					ENERGY STAR Label Verified: ☐ Yes ☐ No		
2.		Width of Cooking Surface (ft.):	Depth of Cooking Surface (ft.):	Manufacturer: / Model No:	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
					ENERGY STAR Label Verified: ☐ Yes ☐ No		

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Kitchen Appliances & Others (Continued)

ENERGY STAR® CERTIFIED CONVECTION OVENS (ENERGY STAR Certified Appliances Required)

Item No.	Quantity Installed	Product Information				
1.		Manufacturer: Model No: ENERGY STAR Label Verified: ☐ Yes ☐ No	Convection Oven Type: ☐ Full Size ☐ Half Size	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
2.		Manufacturer: Model No: ENERGY STAR Label Verified: ☐ Yes ☐ No	Convection Oven Type: ☐ Full Size ☐ Half Size	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:

ENERGY STAR CERTIFIED COMBINATION OVENS (ENERGY STAR Certified Appliances Required)

Item No.	Quantity Installed	Product Information					
1.		Manufacturer:	Model No:	ENERGY STAR Label Verified: ☐ Yes ☐ No			
		Combination Oven Type: ☐ ≥15 pans ☐ <15 pans	No. of Pans:	Usage Percentage in Steam Mode:	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
2.		Manufacturer:	Model No:	ENERGY STAR Label Verified: ☐ Yes ☐ No			
		Combination Oven Type: ☐ ≥15 pans ☐ <15 pans	No. of Pans:	Usage Percentage in Steam Mode:	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
3.		Manufacturer:	Model No:	ENERGY STAR Label Verified: ☐ Yes ☐ No			
		Combination Oven Type: ☐ ≥15 pans ☐ <15 pans	No. of Pans:	Usage Percentage in Steam Mode:	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:

ENERGY STAR CERTIFIED STEAM COOKERS (ENERGY STAR Certified Appliances Required)

Item No.	Quantity Installed	Product Information				
1.		Manufacturer: Model No: ENERGY STAR Label Verified: ☐ Yes ☐ No	No. of Pans:	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:
2.		Manufacturer: Model No: ENERGY STAR Label Verified: ☐ Yes ☐ No	No. of Pans:	Amt. of Food Cooked Per Day (lbs.):	Avg. Time Used Per Day (hrs.):	No. of Days Used Per Year:

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Kitchen Appliances & Others (Continued)

ENERGY STAR® CERTIFIED OR CEE TIER 2 ICE MAKERS (ENERGY STAR Certified Appliances Required)

Item No.	Quantity Installed	Product Information						
1.		Manufacturer:		Model No:		Ice Maker Type: ☐ Ice Making Head ☐ Remote condensing with remote compressor ☐ Remote condensing without remote compressor ☐ Self Contained		
		Product Type: ☐ Batch ☐ Continuous	Condenser Type: ☐ Air-Cooled ☐ Water-Cooled	Ice Type: ☐ Cube ☐ Flake ☐ Nugget	ENERGY STAR Label Verified: ☐ Yes ☐ No	CEE Tier 2 Certified: ☐ Yes ☐ No	Ice Harvest Rate (lbs./day):	
2.		Manufacturer:		Model No:		Ice Maker Type: ☐ Ice Making Head ☐ Remote condensing with remote compressor ☐ Remote condensing without remote compressor ☐ Self Contained		
		Product Type: ☐ Batch ☐ Continuous	Condenser Type: ☐ Air-Cooled ☐ Water-Cooled	Ice Type: ☐ Cube ☐ Flake ☐ Nugget	ENERGY STAR Label Verified: ☐ Yes ☐ No	CEE Tier 2 Certified: ☐ Yes ☐ No	Ice Harvest Rate (lbs./day):	
3.		Manufacturer:		Model No:		Ice Maker Type: ☐ Ice Making Head ☐ Remote condensing with remote compressor ☐ Remote condensing without remote compressor ☐ Self Contained		
		Product Type: ☐ Batch ☐ Continuous	Condenser Type: ☐ Air-Cooled ☐ Water-Cooled	Ice Type: ☐ Cube ☐ Flake ☐ Nugget	ENERGY STAR Label Verified: ☐ Yes ☐ No	CEE Tier 2 Certified: ☐ Yes ☐ No	Ice Harvest Rate (lbs./day):	

VARIABLE SPEED DRIVES

Item No.	Quantity Installed	AC System Type	Kitchen Area (sq. ft.)	Product Information				
1.		☐ Packaged Terminal AC ☐ Split System AC ☐ Single Packaged AC ☐ Air-Cooled Chiller ☐ Water-Cooled Chiller ☐ Split System Heat Pump ☐ Single Packaged Heat Pump ☐ Packaged Terminal Heat Pump ☐ Geothermal Heat Pump		Manufacturer:				
				Model No:				
				Usage in Weeks Per Year:	Primary Heating Fuel: ☐ Electric ☐ Non-Electric ☐ None	Exhaust Fan Horsepower:	Make Up Air Cooling: ☐ Yes ☐ No	Make Up Air Electric Heating: ☐ Yes ☐ No
2.		☐ Packaged Terminal AC ☐ Split System AC ☐ Single Packaged AC ☐ Air-Cooled Chiller ☐ Water-Cooled Chiller ☐ Split System Heat Pump ☐ Single Packaged Heat Pump ☐ Packaged Terminal Heat Pump ☐ Geothermal Heat Pump		Manufacturer:				
				Model No:				
				Usage in Weeks Per Year:	Primary Heating Fuel: ☐ Electric ☐ Non-Electric ☐ None	Exhaust Fan Horsepower:	Make Up Air Cooling: ☐ Yes ☐ No	Make Up Air Electric Heating: ☐ Yes ☐ No

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Enhanced Measures

Rebate cannot be processed with any missing information. Please use a new form for each additional unit.

PRE-RINSE SPRAYER (EN1)

Foodservice Building Type (Select one): ☐ Cafeteria ☐ Fast-Food Restaurant ☐ Sit-Down Restaurant

Product Manufacturer:	Product Model No:

No. of Unit(s) Installed:	Water Heater Efficiency:	Water Heater Fuel: ☐ Electric ☐ Non-Electric

Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit

HEAT PUMP WATER HEATER (EN2 and EN3)

Item No:

AC System Type: ☐ Chiller: Air Cooled Chiller ☐ Chiller: Water Cooled Chiller ☐ Heat Pump: Geothermal ☐ Heat Pump: Packaged Terminal ☐ Heat Pump: Single Packaged ☐ Heat Pump: Split System ☐ Unitary AC: Packaged Terminal AIR Conditioner ☐ Unitary AC: Single Packaged ☐ Unitary AC: Split System AIR Conditioning

Primary Heating Fuel: ☐ Electric ☐ Non-Electric ☐ None	No. of Unit(s) Installed:

Old Equipment Information

Manufacturer:	Model No:	Serial No:
Size of Water Heater (gallons):	Baseline Unit: ☐ Heat Pump Water Heater ☐ Std. Electric Water Heater	COP (Coefficient of Performance (COP) of energy efficient water heater unit for commercial models):

New Equipment Information

Manufacturer:	Model No:	Serial No:
Size of Installed Water Heater (gallons):	First Hour Rating:	Uniform Energy Factor:

Located in Conditioned Space: ☐ Yes ☐ No	Is this a commercial model? ☐ Yes ☐ No	Gallons Per Day:	KBTU Required:

Reason for Work: ☐ Retrofit Early Replacement ☐ New Construction ☐ Retrofit New Install ☐ Retrofit Replace Broken

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Enhanced Measures (Continued)

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CLOTHES WASHER FOR LAUNDROMAT (EN6 and EN7)

Item No:

Clothes Dryer Fuel Type: ☐ Electric ☐ Non-Electric ☐ Unknown

Water Heater Fuel Type: ☐ Electric ☐ Non-Electric ☐ Unknown

Type of Facility with Laundry Equipment:
☐ Assisted Living ☐ Fitness and Recreation ☐ Healthcare ☐ Hotel/Motel ☐ Laundromat

Old Equipment Information

Type of Equipment: ☐ Front Load ☐ Top Load

Commercial Model? ☐ Yes ☐ No

New Equipment Information

Manufacturer of Installed Equipment:

Model No. of Installed Equipment:

Serial No. of Installed Equipment:

Product Tier: ☐ CEE Tier 2 ☐ CEE Tier 3

No. of Units Installed:

Type of Installed Equipment: ☐ Front Load ☐ Top Load

Commercial Model? ☐ Yes ☐ No

Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit

COMMERCIAL DISHWASHERS (EN8 – EN16)

Item No:

No. of Units Installed:

Water Heater Fuel: ☐ Electric ☐ Non-Electric ☐ Unknown

Booster Water Heater Fuel Type: ☐ Electric ☐ Non-Electric ☐ None

New Equipment Information

Type of Installed Equipment:
☐ High Temperature: Multiple Tank, Conveyor TYPE
☐ High Temperature: Single Tank, Conveyor TYPE
☐ Low Temperature: Single Tank Door, Stationary Rack
☐ High Temperature: Pot, Pan, and Utensil, Stationary Rack
☐ High Temperature: Under Counter, Stationary Rack
☐ Low Temperature: Single Tank, Conveyor TYPE
☐ High Temperature: Single Tank Door, Stationary Rack
☐ Low Temperature: Multiple Tank, Conveyor TYPE
☐ Low Temperature: Under Counter, Stationary Rack

Manufacturer of Installed Equipment:

Model No. of Installed Equipment:

Serial No. of Installed Equipment:

Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit

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Enhanced Measures (Continued)

Rebate cannot be processed with any missing information. Please use a new form for each additional unit.

FOOD SEAL WRAPPERS (EN17)

New Equipment Information

Manufacturer of Installed Equipment:	Model No. of Installed Equipment:	Serial No. of Installed Equipment:

Food Seal Wrapper Control Type:	Food Seal Wrapper Type:	Food Seal Wrapper Base Case Equipment	Food Seal Wrapper Equipment
☐ Mechanical ☐ Optical Eye	☐ Chamber ☐ External Strip	(Rated power, watts):	(Size, inches):

No of Units Installed:	Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit

CLOTHES DRYER FOR LAUNDROMAT (EN19)

New Equipment Information

Manufacturer of Installed Equipment:	Model No. of Installed Equipment:	Serial No. of Installed Equipment:

Installed Clothes Dryer Type:	Product Tier:
☐ Compact Vented, 120 V ☐ Compact Vented, 240 V ☐ Compact Ventless, 120 V ☐ Compact Ventless, 240 V ☐ Standard Vented ☐ Standard Ventless	☐ CEE Tier 2 ☐ CEE Tier 3

Type of Facility with Laundry Equipment:	Clothes Dryer Primary Fuel:	New Dryer CEF (lbs/kWh):	No. of Units Installed:
☐ Assisted Living ☐ Fitness and Recreation ☐ Healthcare ☐ Hotel/Motel ☐ Laundromat	☐ Electric ☐ Non-Electric ☐ Unknown		

Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit

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Enhanced Measures (Continued)

Rebate cannot be processed with any missing information. Please use a new form for each additional unit.

EC MOTOR (EN20 – EN22)

New Equipment Information

Item No:	Manufacturer of Installed Equipment:	Model of Installed Equipment:	Motor Size (hp):	No. of Units Installed:

Air-Handling Equipment Application:
☐ 24/7 ☐ Cooling ☐ Heating ☐ Heating & Cooling ☐ Occupied Ventilation

Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit

GUEST ROOM ENERGY MANAGEMENT (EN23 – EN26)

Item No:	Type of Cooling System (Specific to lodging guest rooms): ☐ AC: Packaged Terminal (PTAC ☐ FCU: Chilled-Water Fan Coil Unit ☐ HP: Packaged Terminal (PTHP)	No. of Units Installed:	Make of Installed Equipment:

System Cooling Capacity (Tons):	Lodging Type: ☐ Hotel ☐ Motel	Type of Heating System: ☐ Electric Resistance ☐ HP: Packaged Terminal (PTHP) ☐ Non-Electric	Housekeeping practices temperature setback during vacant rooms? ☐ Yes ☐ No

Type of Heating Fuel Used for HVAC: ☐ Electric ☐ Non-Electric ☐ None	SEER:	Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit

HEAT PUMP POOL HEATER (EN27)

Old Equipment Information

Pool Heater Efficiency of Old Electric Resistance Heater:

New Equipment Information

Manufacturer of Installed Equipment:	Model of Installed Equipment:	Serial No. of Installed Equipment:	
Heat Pump Pool Heater Rated Efficiency, COP:	Heat Pump Pool Heater Rated Capacity, Btu/h	Is the pool covered? ☐ Yes ☐ No	Location of Pool: ☐ Indoor ☐ Outdoor
Surface Area of Pool (sq. ft.):	No. of Units Installed:		

Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit

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Enhanced Measures (Continued)

Rebate cannot be processed with any missing information. Please use a new form for each additional unit.

POOL SPA COVER (EN28)

No. of Units Installed:	Area Being Covered: ☐ Pool ☐ Spa	Location of Pool/Spa: ☐ Indoor ☐ Outdoor	Surface Area of Pool/Spa (sq.ft.):	Pool/Spa Heater Efficiency:
Pool and Spa Water Heater Fuel Type: ☐ Electric ☐ Non-Electric	Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit			

OZONE LAUNDRY (EN29)

Type of Facility with Laundry Equipment: ☐ Assisted Living ☐ Fitness and Recreation ☐ Healthcare ☐ Hotel/Motel ☐ Laundromat	Hot Water Pump Rated Motor Size (hp):

Ozone Laundry System Transfer Type: ☐ Bubble Diffusion ☐ Venturi Injection	Water Heater Fuel Type: ☐ Electric ☐ Non-Electric	Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit

POOL PUMP – VARIABLE SPEED (EN30)

New Pool Pump Information

Manufacturer of Installed Equipment:	Model of Installed Equipment:	Serial No. of Installed Equipment:
Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit		

PARKING VENTILATION (EN31)

Manufacturer of Installed Equipment:	Model of Installed Equipment:	Motor Size of Installed Equipment (hp):
No. of Units Installed:	Average Hours of Ventilation (prior to upgrade):	Ventilation Control Type: ☐ On/Off ☐ Variable Frequency Drive (VFD)
Reason for Work: ☐ New Construction ☐ New Install ☐ Replace Broken ☐ Retrofit		

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Unitary AC Systems • Heating and Cooling Efficiency

Rebate cannot be processed with any missing information. Fields highlighted in red are mandatory. All others are optional. Please use a new line for each new product installed and request for additional sheet if required.

Item No. (on Rebate Chart)						
1.	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace	Heating System Type: ☐ Electric Resistance or None ☐ All Other			
	New Cooling Unit Information					
	Size of Cooling System: tons	EER:	SEER (if system size is ≤5):	IEER (if system size is >5):		
	Product Make	Indoor Unit	Outdoor Unit	Fan		
	Product Model No	Indoor Unit	Outdoor Unit	Fan		
	Product Serial No	Indoor Unit	Outdoor Unit	Fan		
	Old Cooling Unit Information					
	Size of Cooling System: tons	Age of Unit:	EER:	SEER (if system size is ≤ 5):	IEER (if system size is > 5):	AFUE (if old unit is split/package AC with furnace heat):
	Old Equipment Type (Please provide details in space provided): ☐ Heat Pump ☐ Economizer ☐ AC ☐ VFD ☐ Chiller					
	Product Make	Indoor Unit	Outdoor Unit	Fan		
	Product Model No	Indoor Unit	Outdoor Unit	Fan		
	Product Serial No	Indoor Unit	Outdoor Unit	Fan		

Item No. (on Rebate Chart)						
2.	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace	Heating System Type: ☐ Electric Resistance or None ☐ All Other			
	New Cooling Unit Information					
	Size of Cooling System: tons	EER:	SEER (if system size is ≤5):	IEER (if system size is >5):		
	Product Make	Indoor Unit	Outdoor Unit	Fan		
	Product Model No	Indoor Unit	Outdoor Unit	Fan		
	Product Serial No	Indoor Unit	Outdoor Unit	Fan		
	Old Cooling Unit Information					
	Size of Cooling System: tons	Age of Unit:	EER:	SEER (if system size is ≤ 5):	IEER (if system size is > 5):	AFUE (if old unit is split/package AC with furnace heat):
	Old Equipment Type (Please provide details in space provided): ☐ Heat Pump ☐ Economizer ☐ AC ☐ VFD ☐ Chiller					
	Product Make	Indoor Unit	Outdoor Unit	Fan		
	Product Model No	Indoor Unit	Outdoor Unit	Fan		
	Product Serial No	Indoor Unit	Outdoor Unit	Fan		

Item No. (on Rebate Chart)						
3.	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace	Heating System Type: ☐ Electric Resistance or None ☐ All Other			
	New Cooling Unit Information					
	Size of Cooling System: tons	EER:	SEER (if system size is ≤5):	IEER (if system size is >5):		
	Product Make	Indoor Unit	Outdoor Unit	Fan		
	Product Model No	Indoor Unit	Outdoor Unit	Fan		
	Product Serial No	Indoor Unit	Outdoor Unit	Fan		
	Old Cooling Unit Information					
	Size of Cooling System: tons	Age of Unit:	EER:	SEER (if system size is ≤ 5):	IEER (if system size is > 5):	AFUE (if old unit is split/package AC with furnace heat):
	Old Equipment Type (Please provide details in space provided): ☐ Heat Pump ☐ Economizer ☐ AC ☐ VFD ☐ Chiller					
	Product Make	Indoor Unit	Outdoor Unit	Fan		
	Product Model No	Indoor Unit	Outdoor Unit	Fan		
	Product Serial No	Indoor Unit	Outdoor Unit	Fan		

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Heat Pump Systems • Heating and Cooling Efficiency

Rebate cannot be processed with any missing information. Fields highlighted in red are mandatory. All others are optional. Please use a new line for each new product installed and request for additional sheet if required.

Item No. (on Rebate Chart)					
1.	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace	Heating System Type: ☐ Electric Resistance or None ☐ All Other		
	New Unit Information				
	Cooling Information	Size of Cooling System: tons	EER:	SEER (if system size is ≤ 5):	IEER (if system size is > 5):
	Heating Information	Heating Capacity: Btu/h	COP (if heating capacity is >65k Btu/h):	HSPF (if heating capacity is ≤ 65k Btu/h):	
	Product Make	Indoor Unit	Outdoor Unit	Fan	
	Product Model No	Indoor Unit	Outdoor Unit	Fan	
	Product Serial No	Indoor Unit	Outdoor Unit	Fan	
	Old Unit Information				
	Age of Unit:	Old Equipment Type (Please provide details in space provided): ☐ Heat Pump ☐ Economizer	☐ AC ☐ VFD ☐ Chiller		
	Cooling Information	Size of Cooling System: tons	EER:	SEER (if system size is ≤ 5):	IEER (if system size is > 5):
	Heating Information	Heating Capacity: Btu/h	COP (if heating capacity is >65k Btu/h):		
		HSPF (if heating capacity is ≤ 65k Btu/h):	AFUE (if old unit is split/package AC with furnace heat):		
	Product Make	Indoor Unit	Outdoor Unit	Fan	
	Product Model No	Indoor Unit	Outdoor Unit	Fan	
	Product Serial No	Indoor Unit	Outdoor Unit	Fan	

Item No. (on Rebate Chart)					
2.	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace	Heating System Type: ☐ Electric Resistance or None ☐ All Other		
	New Unit Information				
	Cooling Information	Size of Cooling System: tons	EER:	SEER (if system size is ≤ 5):	IEER (if system size is > 5):
	Heating Information	Heating Capacity: Btu/h	COP (if heating capacity is >65k Btu/h):	HSPF (if heating capacity is ≤ 65k Btu/h):	
	Product Make	Indoor Unit	Outdoor Unit	Fan	
	Product Model No	Indoor Unit	Outdoor Unit	Fan	
	Product Serial No	Indoor Unit	Outdoor Unit	Fan	
	Old Unit Information				
	Age of Unit:	Old Equipment Type (Please provide details in space provided): ☐ Heat Pump ☐ Economizer	☐ AC ☐ VFD ☐ Chiller		
	Cooling Information	Size of Cooling System: tons	EER:	SEER (if system size is ≤ 5):	IEER (if system size is > 5):
	Heating Information	Heating Capacity: Btu/h	COP (if heating capacity is >65k Btu/h):		
		HSPF (if heating capacity is ≤ 65k Btu/h):	AFUE (if old unit is split/package AC with furnace heat):		
	Product Make	Indoor Unit	Outdoor Unit	Fan	
	Product Model No	Indoor Unit	Outdoor Unit	Fan	
	Product Serial No	Indoor Unit	Outdoor Unit	Fan	

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Chillers • Heating and Cooling Efficiency

Rebate cannot be processed with any missing information. Fields highlighted in red are mandatory. All others are optional. Please use a new line for each new product installed and request for additional sheet if required.

Item No. (on Rebate Chart)	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace				
	New Unit Information					
	Size of Cooling System: tons	EER @ Full Load:	EER @ IPLV:	kW/ton (Full Load):	kW/ton (Part Load):	
	Product Make:	Product Model No:	Product Serial No:			
	Old Unit Information					
	Age of Unit:	Size of Cooling System: tons	EER @ Full Load:	EER @ IPLV:	kW/ton (Full Load):	kW/ton (Part Load):
	Old Equipment Type (Please provide details in space provided): ☐ Heat Pump ☐ Economizer			☐ AC ☐ VFD ☐ Chiller		
1.						

Item No. (on Rebate Chart)	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace				
	New Unit Information					
	Size of Cooling System: tons	EER @ Full Load:	EER @ IPLV:	kW/ton (Full Load):	kW/ton (Part Load):	
	Product Make:	Product Model No:	Product Serial No:			
	Old Unit Information					
	Age of Unit:	Size of Cooling System: tons	EER @ Full Load:	EER @ IPLV:	kW/ton (Full Load):	kW/ton (Part Load):
	Old Equipment Type (Please provide details in space provided): ☐ Heat Pump ☐ Economizer			☐ AC ☐ VFD ☐ Chiller		
2.						

Item No. (on Rebate Chart)	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace				
	New Unit Information					
	Size of Cooling System: tons	EER @ Full Load:	EER @ IPLV:	kW/ton (Full Load):	kW/ton (Part Load):	
	Product Make:	Product Model No:	Product Serial No:			
	Old Unit Information					
	Age of Unit:	Size of Cooling System: tons	EER @ Full Load:	EER @ IPLV:	kW/ton (Full Load):	kW/ton (Part Load):
	Old Equipment Type (Please provide details in space provided): ☐ Heat Pump ☐ Economizer			☐ AC ☐ VFD ☐ Chiller		
3.						

Item No. (on Rebate Chart)	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace				
	New Unit Information					
	Size of Cooling System: tons	EER @ Full Load:	EER @ IPLV:	kW/ton (Full Load):	kW/ton (Part Load):	
	Product Make:	Product Model No:	Product Serial No:			
	Old Unit Information					
	Age of Unit:	Size of Cooling System: tons	EER @ Full Load:	EER @ IPLV:	kW/ton (Full Load):	kW/ton (Part Load):
	Old Equipment Type (Please provide details in space provided): ☐ Heat Pump ☐ Economizer			☐ AC ☐ VFD ☐ Chiller		
4.						

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Economizers • Heating and Cooling Efficiency

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Item No. (on Rebate Chart)						
1.	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace	Heating System Type: ☐ Electric Resistance or None ☐ All Other			
	New Product Information					
	Size of Cooling System: tons	Heating Capacity: Btu/h	Economizer Type: ☐ Fixed Enthalpy ☐ Differential Enthalpy ☐ Fixed Temperature ☐ Differential Temperature			
	Product Make:	Product Model No:	Product Serial No:			
	Old Product Information					
	Size of Cooling System: tons	Heating Capacity: Btu/h	Economizer Type: ☐ Fixed Enthalpy ☐ Differential Enthalpy ☐ Fixed Temperature ☐ Differential Temperature ☐ None			
	Age of Unit:	Old Equipment Type: ☐ Packaged Unit with/without Broken Economizer ☐ Air Handler with/without Economizer				
Item No. (on Rebate Chart)						
2.	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace	Heating System Type: ☐ Electric Resistance or None ☐ All Other			
	New Product Information					
	Size of Cooling System: tons	Heating Capacity: Btu/h	Economizer Type: ☐ Fixed Enthalpy ☐ Differential Enthalpy ☐ Fixed Temperature ☐ Differential Temperature			
	Product Make:	Product Model No:	Product Serial No:			
	Old Product Information					
	Size of Cooling System: tons	Heating Capacity: Btu/h	Economizer Type: ☐ Fixed Enthalpy ☐ Differential Enthalpy ☐ Fixed Temperature ☐ Differential Temperature ☐ None			
	Age of Unit:	Old Equipment Type: ☐ Packaged Unit with/without Broken Economizer ☐ Air Handler with/without Economizer				
Item No. (on Rebate Chart)						
3.	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace	Heating System Type: ☐ Electric Resistance or None ☐ All Other			
	New Product Information					
	Size of Cooling System: tons	Heating Capacity: Btu/h	Economizer Type: ☐ Fixed Enthalpy ☐ Differential Enthalpy ☐ Fixed Temperature ☐ Differential Temperature			
	Product Make:	Product Model No:	Product Serial No:			
	Old Product Information					
	Size of Cooling System: tons	Heating Capacity: Btu/h	Economizer Type: ☐ Fixed Enthalpy ☐ Differential Enthalpy ☐ Fixed Temperature ☐ Differential Temperature ☐ None			
	Age of Unit:	Old Equipment Type: ☐ Packaged Unit with/without Broken Economizer ☐ Air Handler with/without Economizer				
Item No. (on Rebate Chart)						
4.	Install Date:	Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace	Heating System Type: ☐ Electric Resistance or None ☐ All Other			
	New Product Information					
	Size of Cooling System: tons	Heating Capacity: Btu/h	Economizer Type: ☐ Fixed Enthalpy ☐ Differential Enthalpy ☐ Fixed Temperature ☐ Differential Temperature			
	Product Make:	Product Model No:	Product Serial No:			
	Old Product Information					
	Size of Cooling System: tons	Heating Capacity: Btu/h	Economizer Type: ☐ Fixed Enthalpy ☐ Differential Enthalpy ☐ Fixed Temperature ☐ Differential Temperature ☐ None			
	Age of Unit:	Old Equipment Type: ☐ Packaged Unit with/without Broken Economizer ☐ Air Handler with/without Economizer				

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Variable Frequency Drives (VFDs) • Heating and Cooling Efficiency

Rebate cannot be processed with any missing information. Fields highlighted in red are mandatory. All others are optional. Please use a new line for each new product installed and request for additional sheet if required.

1.

Item No. (on Rebate Chart)

Install Date: | Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace

New Product Information

Product Make: | Product Model No: | Product Serial No:

Motor Efficiency per VFD: % | **Motor Horsepower:** | Annual Run Hours of VFD (0 – 8,760 hours): | Motor Load Factor of VFD:

Control Signal Type:
☐ Fan: Average Zone Temp ☐ Fan: Duct Static Pressure ☐ Pump: Outside Air Temperature ☐ Pump: Average Zone Temperature
☐ Pump: AHU CHW/HHW Valve Position ☐ Pump: Loop Pressure Differential ☐ Other/Unknown

Application Type:
☐ Fan: Airfoil ☐ Fan: Backward Inclined ☐ Fan: Forward Curved ☐ Fan: Other/Unknown
☐ Pump: Chilled Water ☐ Pump: Condenser Water ☐ Pump: Hot Water ☐ Pump: Other/Unknown

Old Product Information

Age of Unit: | Motor Horsepower:

Old Equipment Type (Please provide details in space provided):
☐ Heat Pump _____ ☐ AC _____
☐ Economizer _____ ☐ VFD _____
☐ Chiller _____

Control Signal Type:
☐ Pump: Average Zone Temperature ☐ Pump: Outside Air Temperature ☐ Fan: Duct Static Pressure ☐ Fan: Average Zone Temp
☐ Pump: AHU CHW/HHW Valve Position ☐ Pump: Loop Pressure Differential ☐ None ☐ Other/Unknown

Fan Control Strategy Type:
☐ Airflow Inlet Control: Damper Box
☐ Airflow Inlet Control: Inlet Guide Vanes at FC, BI, AF Fan Types
☐ Airflow Inlet Control: Inlet Vane Damper
☐ Airflow Inlet Control: Other/Unknown
☐ Airflow Discharge Control: Dampers at FC, BI, AF Fan Types
☐ Unknown
☐ Airflow Discharge Control: Dampers at other Fan Types
☐ Airflow Discharge Control: Unknown Fan Type
☐ Duct Control: Static Pressure Controls, Med./High Pressure (≥1.0 inch w.g.)
☐ Duct Control: Static Pressure Controls, Low Pressure (<1.0 inch w.g.)
☐ Fan Motor Control: Eddy Current Drive

2.

Item No. (on Rebate Chart)

Install Date: | Reason for Install: ☐ New Install ☐ Retrofit ☐ Replace

New Product Information

Product Make: | Product Model No: | Product Serial No:

Motor Efficiency per VFD: % | **Motor Horsepower:** | Annual Run Hours of VFD (0 – 8,760 hours): | Motor Load Factor of VFD:

Control Signal Type:
☐ Fan: Average Zone Temp ☐ Fan: Duct Static Pressure ☐ Pump: Outside Air Temperature ☐ Pump: Average Zone Temperature
☐ Pump: AHU CHW/HHW Valve Position ☐ Pump: Loop Pressure Differential ☐ Other/Unknown

Application Type:
☐ Fan: Airfoil ☐ Fan: Backward Inclined ☐ Fan: Forward Curved ☐ Fan: Other/Unknown
☐ Pump: Chilled Water ☐ Pump: Condenser Water ☐ Pump: Hot Water ☐ Pump: Other/Unknown

Old Product Information

Age of Unit: | Motor Horsepower:

Old Equipment Type (Please provide details in space provided):
☐ Heat Pump _____ ☐ AC _____
☐ Economizer _____ ☐ VFD _____
☐ Chiller _____

Control Signal Type:
☐ Pump: Average Zone Temperature ☐ Pump: Outside Air Temperature ☐ Fan: Duct Static Pressure ☐ Fan: Average Zone Temp
☐ Pump: AHU CHW/HHW Valve Position ☐ Pump: Loop Pressure Differential ☐ None ☐ Other/Unknown

Fan Control Strategy Type:
☐ Airflow Inlet Control: Damper Box
☐ Airflow Inlet Control: Inlet Guide Vanes at FC, BI, AF Fan Types
☐ Airflow Inlet Control: Inlet Vane Damper
☐ Airflow Inlet Control: Other/Unknown
☐ Airflow Discharge Control: Dampers at FC, BI, AF Fan Types
☐ Unknown
☐ Airflow Discharge Control: Dampers at other Fan Types
☐ Airflow Discharge Control: Unknown Fan Type
☐ Duct Control: Static Pressure Controls, Med./High Pressure (≥1.0 inch w.g.)
☐ Duct Control: Static Pressure Controls, Low Pressure (<1.0 inch w.g.)
☐ Fan Motor Control: Eddy Current Drive

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Thermostat Installation

Rebate cannot be processed with any missing information. All fields marked with an asterisk (*) are optional.
Please use a new line for each new product installed and request for additional sheet if required.

Rebate Item No.	Outdoor Unit Model Number	Indoor Unit Model Number	Quantity Installed	Cooling Tons/Unit	Heating Btu/h	SEER	EER	IEER	COP	HSPF
1.										
2.										
3.										
4.										

Cooling System Type: ☐ Central A/C ☐ None

Heating System Type: ☐ Heat Pump: Air Source ☐ Heat Pump: Water Source ☐ Heat Pump: Ductless Mini Split ☐ Non-Electric ☐ None

System Cooling Capacity (tons):	System Heating Capacity (Btu/h):	No. of Units Installed:	New HVAC with Thermostat:	Primary Heating Fuel:
			☐ Yes ☐ No	☐ Electric ☐ Non-Electric

OLD THERMOSTAT INFORMATION

Manufacturer:	Model No:	Serial No:	Type: ☐ Manual ☐ Programmable

NEW THERMOSTAT INFORMATION

Manufacturer:	Model No:	Serial No:

Reason for Work Done: ☐ Retrofit Early Replacement ☐ New Construction ☐ Retrofit New Install ☐ Retrofit Replace Broken

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Customer Eligibility Form • Compressed Air Systems

If you are eligible and want to participate, we will need your utility account number(s). To help verify your eligibility, please complete this form and submit it to NRSmallManuf@Honeywell.com.

CUSTOMER INFORMATION

Service Name on Dominion Energy Account:	Key Contact Name:
Phone Number:	Email Address:

CUSTOMER ELIGIBILITY SECTION

Are you a Dominion Energy customer?	Please specify state:
☐ Yes ☐ No	☐ Virginia ☐ North Carolina

Please provide the utility account numbers for all facilities participating in this program. Use another sheet if you have more entries.

1. 2. 3.
4. 5. 6.
7. 8. 9.
10. 11. 12.

Customer Signature: _____ Date: _____

Audit Cost Reimbursement • Compressed Air Systems

Customers may be eligible to receive reimbursement to cover a portion of the audit cost if program criteria are met. Audit cost reimbursement will be paid with the rebate incentive after reimbursement requirements are met. Rebate and audit incentive cannot exceed 75% of the total invoice amount.

Would you be requesting for an audit cost reimbursement?	Please provide the estimated audit cost for all locations, if applicable.
☐ Yes ☐ No	

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Window Data • Window Film

Rebate cannot be processed with any missing information.

All NORTH–Facing Windows

Window Film Type: ☐ Low-E ☐ Reflective ☐ Spectrally Selective ☐ Neutral ☐ Dual Reflective ☐ Outdoor Decorative

Window Type: ☐ Single ☐ Double

Glass Color: ☐ Clear ☐ Gray ☐ Bronze ☐ Green ☐ Blue

Window Frame Type: ☐ Metal ☐ Vinyl ☐ Wood ☐ Fiberglass ☐ Aluminum

Is Low-E present? ☐ Yes ☐ No

Total Sq Ft of Film Installed	SHGC Pre-Installation	SHGC Post-Installation	SHGC Improvement

All EAST–Facing Windows

Window Film Type: ☐ Low-E ☐ Reflective ☐ Spectrally Selective ☐ Neutral ☐ Dual Reflective ☐ Outdoor Decorative

Window Type: ☐ Single ☐ Double

Glass Color: ☐ Clear ☐ Gray ☐ Bronze ☐ Green ☐ Blue

Window Frame Type: ☐ Metal ☐ Vinyl ☐ Wood ☐ Fiberglass ☐ Aluminum

Is Low-E present? ☐ Yes ☐ No

Total Sq Ft of Film Installed	SHGC Pre-Installation	SHGC Post-Installation	SHGC Improvement

All WEST–Facing Windows

Window Film Type: ☐ Low-E ☐ Reflective ☐ Spectrally Selective ☐ Neutral ☐ Dual Reflective ☐ Outdoor Decorative

Window Type: ☐ Single ☐ Double

Glass Color: ☐ Clear ☐ Gray ☐ Bronze ☐ Green ☐ Blue

Window Frame Type: ☐ Metal ☐ Vinyl ☐ Wood ☐ Fiberglass ☐ Aluminum

Is Low-E present? ☐ Yes ☐ No

Total Sq Ft of Film Installed	SHGC Pre-Installation	SHGC Post-Installation	SHGC Improvement

All SOUTH–Facing Windows

Window Film Type: ☐ Low-E ☐ Reflective ☐ Spectrally Selective ☐ Neutral ☐ Dual Reflective ☐ Outdoor Decorative

Window Type: ☐ Single ☐ Double

Glass Color: ☐ Clear ☐ Gray ☐ Bronze ☐ Green ☐ Blue

Window Frame Type: ☐ Metal ☐ Vinyl ☐ Wood ☐ Fiberglass ☐ Aluminum

Is Low-E present? ☐ Yes ☐ No

Total Sq Ft of Film Installed	SHGC Pre-Installation	SHGC Post-Installation	SHGC Improvement

Building Data

Building Age	Total Sq Ft of Area	Cooling System Type	Cooling System Capacity Per Unit (Tons)	Heating System Type	Heating System Capacity Per Unit (Btu/hr)	Primary Heating Fuel
		☐ Air-Cooled Chiller ☐ Water-Cooled Chiller ☐ Rooftop DX ☐ PTAC ☐ PTHP ☐ Hydronic Heat Pump		☐ Boiler ☐ Furnace ☐ PTAC ☐ Heat Pump Packaged ☐ PTHP ☐ Heat Pump Split		☐ Electric ☐ Non-Electric ☐ None

Reason: ☐ Retrofit ☐ New Construction ☐ Replace Deteriorated

Rebate Data

Final SHGC level after film installation must be ≤ 0.5 in order to be eligible for rebate.

SHGC Improvement	Rebate Incentive
≤ 0.5	$1.00 per sq ft x _____ sq ft = $ _____

Total Estimated Rebate: $ _____

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Building Information

Rebate cannot be processed with any missing information.

Annual Operating Hours:	No. of Floors:	Structure Type (Select one): ☐ Attached ☐ Detached

Building Type (Select one):

- ☐ Education – Elementary and Middle School
- ☐ Education – High School
- ☐ Education – College and University
- ☐ Food Sales – Convenience Store
- ☐ Food Sales – Gas Station Convenience Store
- ☐ Food Sales – Grocery
- ☐ Food Service – Fast Food
- ☐ Food Service – Full Service
- ☐ Health Care – Inpatient
- ☐ Health Care – Outpatient
- ☐ Lodging – Hotel, Motel and Dormitory
- ☐ Mercantile – Mall
- ☐ Mercantile – Retail (not Mall)
- ☐ Office – Large (≥40,000 sq ft)
- ☐ Office – Small (<40,000 sq ft)
- ☐ Public Assembly
- ☐ Public Order and Safety – Police and Fire Station
- ☐ Religious Worship
- ☐ Service – Beauty, Auto Repair Workshop
- ☐ Warehouse and Storage
- ☐ Other:_____

Initial Assessment Review Notes (For Internal Use Only)

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