CUSTOM ENERGY SOLUTIONS PROGRAM

# 2026 APPLICATION

## A. CUSTOMER (ACCOUNT HOLDER) AND ACCOUNT INFORMATION

| | | | |
|---|---|---|---|
| Company Name: | | IID Contract No. | |
| Contact Name: | Title: | Site Name: | |
| Installation Address: | City: | State: | Zip: |
| Payment Address *(if different)*: | City: | State: | Zip: |
| Phone Number: | Alt. Phone Number (optional): | Email: | |

## B. APPLICANT *(Complete this section if Applicant is not the Account Holder.)*

| | | | |
|---|---|---|---|
| Company Name: | Type: ☐ Vendor ☐ Tenant ☐ Parent Corp. ☐ Landlord ☐ Other | | |
| Payment Address: | City: | State: | Zip: |
| Applicant Phone Number: | Email: | | |

## C. PAYMENT RELEASE AUTHORIZATION *(Skip this section if the payment will be made payable to the Account Holder.)*

I am authorizing my rebate payment to be released to the Applicant listed in Section B of this application; furthermore, I understand that by signing this section, I will not receive the rebate check from Imperial Irrigation District. I understand that releasing my payment to this third party does not exempt me from the program requirements outlined in the Imperial Irrigation District's Custom Energy Solutions Program Rebate Agreement. I further understand and approve that the applicant may receive and use certain account information from Imperial Irrigation District, such as my account number and rate information as required to resolve any issues pertaining to the rebate requested through IID's Custom Energy Solutions Program.

Signature _____ Name and Title (Print) _____ Date _____

## D. GENERAL INFORMATION

Why did you install the energy efficiency measure(s) for this program? (Choose one.)

☐ To lower energy consumption ☐ Remodel ☐ Rebate Incentive ☐ Environmental Stewardship ☐ Other _____

## E. APPLICANT ACKNOWLEDGEMENT

I acknowledge that by submitting this program application, it does not guarantee the acceptance of the customer into Imperial Irrigation District's Custom Energy Solutions Program. I further understand that, if accepted, IID expects a good faith effort to implement the energy efficiency measures proposed. IID will assist the Customer by providing technical assistance, if appropriate, throughout the implementation process. I am authorized by the company listed in Section A of this application to submit this project application on its behalf, and I understand that it is the Customer's responsibility to verify by independent means all costs and savings estimates.

Signature _____ Name and Title (Print) _____ Date _____

IID DISTRICT WATER POWER — A century of service.

After completing this application, please sign and submit with supporting documentation to:

**CESP@iid.com or**
**IID Office of Energy Management and Strategic Marketing**
**P.O. Box 937, Imperial, CA 92251**