



Commercial Lighting Program Custom Option Incentive Calculations

Application no.
Page _____ of _____

PHOTOCOPY AND RETAIN ONE COPY
FOR YOUR RECORDS.

Instructions: Complete this form to describe your existing and proposed lighting system where no prescriptive incentives exist. If additional space is required, make copies of this page and attach the completed pages to the application. If the project has any type of lighting controls, complete Appendix D: Lighting Control Systems and Occupancy Sensors. If the project has LED backlit signage complete Appendix E: LED Backlit Signage.

The Customer is responsible for ensuring that the LED product being purchased is suitable for the environment in which it is being installed. The CLP will determine if the LED product is suitable for any incentives.

This option may also be used for **innovative equipment and designs** where no prescriptive incentives exist. Customized proposals submitted by qualified lighting designers that can demonstrate demand reductions will be evaluated upon request.

Required information:

- Copy of the price quote detailing material costs for each proposed lighting product.
- Existing System and Proposed System information **must** be filled out in the tables below.

Reasons for change
 Illumination: more same less
 Need for white light
 Reduce maintenance
 Reduce lighting bill
 Building renovation
 Improve aesthetics
 Fixtures are at end of life (<2 years usage remaining)

Description of proposed lighting system

EXISTING SYSTEM								
Location no.	Location	Usage	Fixture/lamp type	Lamp input power (W)	Lamps/fixture	Fixture input power (W)	No. of fixtures	Annual hours of operation
1.		<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor		W		W		h
2.		<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor		W		W		h
3.		<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor		W		W		h
4.		<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor		W		W		h
5.		<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor		W		W		h
6.		<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor		W		W		h

PROPOSED SYSTEM										
Location no. ¹	Manufacturer	Model no.	Approval		Fixture/lamp type	Fixture input power (W)	Fixture initial Lumens (L)	No. of fixtures	Material cost (\$)	Annual hours of operation
			EPL	DLC ²						
						W	L		\$	h
						W	L		\$	h
						W	L		\$	h
						W	L		\$	h
						W	L		\$	h
						W	L		\$	h

¹ List location number from Existing System table above.

² Required documents for DLC products:

- Attach a specification sheet (indicating electrical characteristics, DLC listing, warranty, and temperature rating).
- Outdoor use LED fixtures must meet –40°C temperature requirements.

Available in accessible formats upon request.

TOTAL MATERIAL COST ► \$

Manitoba Hydro use only: TOTAL INCENTIVE ► 5. \$