Qualified Energy Conservation Bonds Allocation Application South Carolina Energy Office 408 Wade Hampton Building 1200 Senate Street

Columbia, South Carolina 29201 Phone (803) 737-8030/ Fax (803) 737-9846

I. Applicant Information:			
_	Please print or type clearly.		
Name of Institution: _			
Street Address:			
Mailing Address: _			
Federal Tax ID#: _			
Contact Person:			
Telephone #:			
Signatory Official: _			
Position:			
Telephone #:			
Fax #: _			
II. Type of Insti	tution:		
Please mark appropriate d			
Public School District:	<u> </u>		
County / City:			
Municipality:			
State Agency:			
501(c)(3) Corporation:			
Other: Specify			

for eligible measures)		to 26 USC § 54D
Project Estimated Start Date: Project Estimated Completion Date: Estimated Number of Jobs Created:		
IV. Location of Project:		
Name of Building(s) Building Ownership Address:		
County of Improvements:		
V. <u>Technical Analysis (Name of personal Analysis (Name of persona) (Name of personal Analysis (Name of personal Analysis (Name o</u>	son or firm who compl	eted either):
Energy Audit: Or Architect/Engineer design:		<u> </u>
VI. Project Cost Summary:		
Type of Energy Measures	Estimated Cost	Projected Annual Saving
Total Project Cost:	Total Savings: _	/yr.



Date: _____