

# Irrigation Incentive Application – Idaho

To apply for Wattsmart Business incentives:

1. Review the measure descriptions below to ensure that equipment meets eligibility criteria.
2. Purchase and install equipment. Complete and sign this application form (front and back). Attach a copy of invoice(s) or sales receipt(s). Also attach either a copy of a recent Rocky Mountain Power bill or write account number or meter number in the space below.
3. Fax, mail or email this form together with IRS Form W-9 to the address shown at end of form within six months of equipment purchase. Please allow 6 weeks for delivery of check.

Incentives below are available for retrofit installations only, where new items replace existing. The incentive check will be issued to the Participant name given below unless a third-party payment release is completed and submitted with this application. If you wish the incentive check to be made out to a third party, attach the completed third-party release and check here:

Send completed application by mail, fax, or email to:

wattsmartbusiness@rockymountainpower.net  
 Wattsmart Business  
 2162 West Grove Parkway, Suite 210  
 Pleasant Grove, UT 84062  
 fax 503-282-0177

For information or assistance with this application, please call **801-642-4472**

PARTICIPANT INFORMATION		Participant is (check all that apply)		<input type="checkbox"/> Customer	<input type="checkbox"/> Electricity User	<input type="checkbox"/> Facility Owner
Participant name (if account holder, name on Rocky Mountain Power bill):		Contact:		Title:		
Contact cell or telephone:	Fax:	Email:				
Mailing address:		City:		State:	Zip:	
PROJECT SITE INFORMATION where items are installed						
Address where items installed:		City:		State:	Zip:	
Field name or #:	Acres:	Crop (current year):		Installation date:	Dealer:	
Account # or meter # where installed:	Pump electrically driven? <input type="checkbox"/> Yes <input type="checkbox"/> No	Pump hp:	Water source: <input type="checkbox"/> Surface <input type="checkbox"/> Well	Pump type: <input type="checkbox"/> Centrifugal <input type="checkbox"/> Turbine	System type: <input type="checkbox"/> Wheel line <input type="checkbox"/> Pivot or Linear <input type="checkbox"/> Hand line <input type="checkbox"/> Portable Main Line	

**QUALIFYING CRITERIA.** To confirm eligibility, please review and check off:

- |   |   |
|---|---|
| <input type="checkbox"/> Equipment below is installed on linear, pivot, wheel line, or hand line system. Fixed-in-place systems are not eligible. | <input type="checkbox"/> Nozzles, sprinklers and regulators are of equal or lesser flow than those being replaced.                        |
| <input type="checkbox"/> Equipment has been installed at the site identified above. Application is submitted within 6 months of purchase.         | <input type="checkbox"/> Incentives have not been received for these components on the affected irrigation system(s) in the past 5 years. |

For Wheel lines, Hand Lines, or other Portable Systems - Retrofit Only (not New Construction)			
Incentive Description	Qty	Incentive	Total
1. New <b>rotating sprinkler</b> replacing worn or leaking impact or rotating sprinkler		\$0.50	\$
2. New <b>impact sprinkler</b> (including nozzle) replacing worn or leaking impact sprinkler		\$0.50	\$
3. New <b>nozzle</b> replacing worn nozzle of same design flow or less on existing sprinkler		\$1.50	\$
4. New <b>gasket</b> replacing leaking gasket - includes main line valve or section gasket, seal or riser cap (dome disc)		\$2.00	\$
5. New <b>drain</b> replacing leaking drain		\$2.00	\$
6. Cut and press or weld <b>pipe repair</b> of leaking wheel line, hand line or portable main line		\$8.00	\$
7. New or rebuilt <b>wheel line leveler</b> replacing leaking or malfunctioning leveler		\$1.00	\$
Sprinkler Packages for Pivots and Linears - Retrofit Only (not New Construction), per drop			
8. <b>Replacement</b> - High Pressure (Impact Sprinklers)		\$7.00	\$
9. <b>Replacement</b> - MESA (Mid-Elevation Spray Application)		\$4.00	\$
10. <b>Replacement</b> - LESA/LEPA/MDI (Low-Elevation Spray or Precision Application)		\$2.00	\$
11. <b>Upgrade</b> - High Pressure (Impact Sprinklers) to MESA		\$7.00	\$
12. <b>Upgrade</b> - High Pressure (Impact Sprinklers) to LESA/LEPA/MDI		\$7.00	\$
13. <b>Upgrade</b> - MESA to LESA/LEPA/MDI		\$5.00	\$
For Any Type Irrigation System - Retrofit or New Construction			
14. Irrigation pump <b>Variable Frequency Drive (VFD)</b> for new pump or existing pump. Incentive is paid at the rate of \$0.15 per kWh of annual savings. Please call for assistance with incentive determination. Incentive is capped at 70% of project cost, and incentives will not be available to reduce energy efficiency project simple payback below one year. Energy savings and costs are subject to Pacific Power approval.		\$0.15 per kWh	\$
		<b>Grand Total</b>	<b>\$</b>
<b>Important Notes:</b> Except for #14 pump VFD, fixed-in-place systems are not eligible. For #1 through #7 incentive is limited to two items per irrigated acre. Sprinkler package includes new sprinkler together with regulator, where applicable			

# Terms and Conditions

## How to participate:

Listed equipment incentives:

1. Pre-qualification is recommended but not required.
2. Purchase and install qualifying equipment.
3. Complete and sign this application form.
4. Submit application and supplemental documents as directed on the front of this form.

**Eligible participants:** Idaho Rocky Mountain Power participants who qualify to participate in voluntary Schedule I40.

**Incentive assignment to third party:** In the event that Rocky Mountain Power does not pay the incentive as a result of the Participant's failure to comply with the terms and conditions, the assignee's sole recourse shall be against participant.

**Inspections and analysis:** Participant agrees to cooperate with Rocky Mountain Power and its consultants to conduct energy analysis and inspections at the Participant's site. Rocky Mountain Power reserves the right to inspect qualifying equipment/energy management measures, which may include a telephone survey, site visit, and/or the installation of temporary monitoring equipment at any time up to 36 months after installation for quality control or program performance evaluations.

**Tax liability:** Neither Rocky Mountain Power nor its Program Administrator is providing tax advice or responsible for any tax liability which may be imposed on the Participant as a result of any incentive payment. Participant may be responsible for the tax reporting to the IRS of any incentive payments directed to third parties.

**Incentive limitations & limitation of damages:** Participants may not receive custom incentives in lieu of typical incentives. Participants are responsible for ensuring that equipment installed for this program meets all applicable codes, standards, environmental regulations and regulatory requirements. Rocky Mountain Power does not warrant the performance of qualifying installed equipment/energy management measures and does not warrant that the qualifying installed equipment/energy management measures will deliver any specified amount of energy or cost savings. Participant shall independently evaluate any advice or direction given by Rocky Mountain Power or its consultants related to the estimates of electricity savings or the cost, selection or installation of qualifying equipment/energy management measures. In no event will Rocky Mountain Power be liable for the failure of the Participant to achieve its expected amount of energy savings, for any personal injury or harm to participant's facilities of any kind, or for any incidental or consequential damages of any kind including hazardous material identification in connection with installation or inspection of qualifying equipment and energy management measures. Rocky Mountain Power is not responsible if a third party provides inaccurate information about the amount and/or conditions of the actual incentive and Rocky Mountain Power will not pay incentives for equipment that is mislabeled or misrepresented by third parties regarding incentive qualifications.

## APPLICATION ACKNOWLEDGEMENT

By my signature below, I certify that all information provided for participation is accurate including but not limited to supplemental material and claims of Participant and equipment information. I confirm I have read, understand and agree with the terms and conditions and agree to be bound by them. I authorize Rocky Mountain Power to provide my electric account information, this application and the attached IRS Form W-9 to Consultants associated with the Wattsmart Business program.

Signatory name (please print) \_\_\_\_\_

Title \_\_\_\_\_

Participant signature \_\_\_\_\_

Date \_\_\_\_\_

## Fax, mail, or email completed applications to:

Wattsmart Business  
2162 West Grove Parkway, Suite 210  
Pleasant Grove, UT 84062  
fax 503-282-0177

## For assistance or information, please call or email:

801-642-4472  
wattsmartbusiness@rockymountainpower.net  
rockymountainpower.net/wattsmart

**Incentive offer:** The incentive offer is an estimate. The final incentive will be based on actual electric savings and approved actual project costs incurred by the Participant for implemented approved energy efficiency measures. Participant agrees to provide any reasonable documentation to allow Rocky Mountain Power to determine electric savings and actual costs incurred. To the extent that Rocky Mountain Power determines (at its sole discretion) that any of the recommended measures have not been installed and commissioned in a satisfactory manner, Participant shall receive a reduced incentive, if any, based on the inspection and verification of installed and commissioned measures.

**Incentive repayment obligation:** If Participant terminates a material portion of its electric service requirements from Rocky Mountain Power for Participant's facility within 60 months of the date of incentive payment, and the facility remains in operation, Participant is obligated to repay the incentive to Rocky Mountain Power within 30 days of written request. The repayment ("Repayment") will be determined as:  $\text{Repayment} = \text{incentive} \times (60 - \text{Savings Delivery Term}) / 60$ , where Savings Delivery Term = number of months between the month the incentive payment was made and the month the Facility terminated a material portion of its electric service. For determining Repayment, the dates will be the first date of the month in which they occur.

**Transfer of environmental attributes:** Participant hereby transfers to Rocky Mountain Power all "Environmental Attributes" attributable to the installation of the qualifying equipment or its operation. Environmental Attributes include any and all credits, benefits, emissions reductions, offsets and allowances, howsoever entitled, resulting from the avoidance of the emission of any substance to the air, soil or water at or by the company's generating facilities, through reduced generation of energy or other savings or offsets on account of the qualifying equipment. Participant will not claim ownership of any Environmental Attributes. As long as Participant at the same time states the installation of the qualifying equipment was made possible with funding from Rocky Mountain Power, Participant may claim that it is facilitating the production of the Environmental Attributes attributable to the qualifying equipment.

**Additional details:** Incentive qualifications and amounts are subject to change and termination at any time. Visit the program's website at [rockymountainpower.net/wattsmart](http://rockymountainpower.net/wattsmart) or contact your local equipment dealer or Rocky Mountain Power for current program information.

**Confidential information:** Confidential information provided to Rocky Mountain Power or consultants shall not be disclosed to any third party. Confidential information shall mean data disclosed during the course of the energy analysis and identified by the Participant in writing as confidential. The obligation to protect confidential information will remain in force for two (2) years from the date the energy analysis is performed.

# Request for Taxpayer Identification Number and Certification

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give Form to the  
 requester. Do not  
 send to the IRS.**

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.																				
2 Business name/disregarded entity name, if different from above																				
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes. <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/> Individual/sole proprietor or single-member LLC</td> <td><input type="checkbox"/> C Corporation</td> <td><input type="checkbox"/> S Corporation</td> <td><input type="checkbox"/> Partnership</td> <td><input type="checkbox"/> Trust/estate</td> </tr> <tr> <td colspan="5"> <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____                             </td> </tr> <tr> <td colspan="5"> <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.                             </td> </tr> <tr> <td colspan="5"> <input type="checkbox"/> Other (see instructions) ▶ _____                             </td> </tr> </table>	<input type="checkbox"/> Individual/sole proprietor or single-member LLC	<input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust/estate	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____					<b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.					<input type="checkbox"/> Other (see instructions) ▶ _____				
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<input type="checkbox"/> Other (see instructions) ▶ _____																				
4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):																				
Exempt payee code (if any) _____																				
Exemption from FATCA reporting code (if any) _____																				
(Applies to accounts maintained outside the U.S.)																				
5 Address (number, street, and apt. or suite no.) See instructions.																				
Requester's name and address (optional)																				
6 City, state, and ZIP code																				
7 List account number(s) here (optional)																				

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
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or								
Employer identification number								
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## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶ _____	Date ▶ _____
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
  - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*