April 2022

# 2022 Steam Trap Express Application



**Consumers Energy** Business Energy Efficiency Programs

Consumers Energy



# **About this Application**

Steam traps operate in a corrosive environment and fail on a regular basis, wasting valuable energy needed for heating or manufacturing processes. A single failed trap can waste up to \$500 per year. Steam trap maintenance is easy and Consumers Energy will help pay to replace traps that fail open. Fill out this simple application and then view our standard incentive application at ConsumersEnergy.com/hvacrebate for more ways Consumers Energy can optimize your energy, like a boiler tune-up or a comprehensive steam system assessment.

# **Application Instructions**

#### 1. Is your project eligible?

- You must be a current natural gas customer of Consumers Energy on an eligible commercial or industrial rate.
- Pro-Notification is required for projects with estimated incentives greater than \$5,000.
- Projects for steam systems that have a steam pressure greater than 50 psig and an annual operating period greater than 4,000 hours should apply for a custom incentive instead of this prescriptive measure.

#### 2. Measure requirements

- Purchase and install the products according to the manufacturer's recommendations.
- This measure is available only for repair or replacement of traps that have malfunctioned and are leaking steam. It is not available for traps that have failed in the closed position or are plugged.
- This measure is available once in a 24-month period per individual trap.
- Replacement with an orifice trap is not eligible for this measure.
- A steam trap survey must be recorded and attached to the application, using a spreadsheet with survey/repair/ replacement results, or use the form at the end of this application. Repair or replacement of steam traps is not eligible for this measure if a survey was not completed, however in lieu of this measure, replacement steam traps and/or parts may be available at a reduced price through the Business Instant Discount Program.
- This measure must be less than or equal to \$175/trap, not to exceed 100% of the total project cost.

#### 3. Submit your incentive application

- Return the following within 60 days of project completion:
  - Signed copy of application.
  - W-9 for payee.
  - Copy of invoice (must be itemized and clearly state the invoice number and date; distributor name and address; customer name and address; itemized list of steam trap equipment, including manufacturer, model number, price and quantity of steam traps installed and total cost of the purchase).
- Send your application to Consumers Energy via one of the following methods:

## Email: SteamTrapExpress@cmsenergy.com

## Fax: 877-607-0738

Mail: Consumers Energy Business Energy Efficiency Programs

#### Attn: Steam Trap Express

PO Box 1040

## Okemos, MI 48805

#### 4. Receive your incentive check

• Incentive checks will generally be delivered within four to six weeks after receipt of a completed application.

PDF application must be downloaded and saved prior to filling in fields.

# **Need Help?**

# Call 877-607-0737 or Email: SteamTrapExpress@cmsenergy.com

Our team is ready to help you with any questions you may have.

04/15/2022

Your Consumers Energy Advisor (if known) \_\_\_\_\_

Consumers Energy Account Manager (if known) \_\_\_\_\_

Tax Status **       Individual/Sole proprietor single-member LLC       C Corporation       Partnership LLC Enter Tax Classification         Tax ID Number: Please provide your EIN/Federal Tax ID below.       Tax ID Number: Please provide your EIN/Federal Tax ID below.       EIN/Federal Tax ID       Payee Code	Customer Information (Required for all applications)	
Mailing Address         City       State       ZIP         Phone       Email         We will use your email address solely to provide timely information about the Consumers Energy Business Energy Efficiency Programs and your projects. Consumers Energy Natural Gas Account Number (at Project Location)       Image: Consumers Energy Efficiency Programs and your projects.         Primary Business Type       Agriculture       Heavy Industrial       Hotel       Big Box Retail         Aduat Repair       Light Industrial       Motel       Small Retail       Eastername         Biotech       High School       Large Office       Quick Service Restaurant       Facility Size (Area)         Grocery       University/College       Religious       Warehouse       ft <sup>2</sup> Castomer Tax Information (Required for all applications)       Tax Status **       Individual/Sole proprietor       C Corporation       Partnership       LLC Enter Tax Classification         Tax ID Number: Please provide your EIN/Federal Tax ID below.       Exemptions       ElN/Federal Tax ID       Payee Code       FATCA Code         Project Information       Project Information       Payee Code       FATCA Code       Installation Address		
City       State       ZIP         Phone       Email         We will use your email address solely to provide timely information about the Consumers Energy Business Energy Efficiency Programs and your projects.         Consumers Energy Natural Gas Account Number (at Project Location)	Contact Name	Title
Phone       Email         We will use your email address solely to provide timely information about the Consumers Energy Business Energy Efficiency Programs and your projects.         Consumers Energy Natural Cas Account Number (at Project Location)	Mailing Address	
We will use your email address solely to provide timely information about the Consumers Energy Business Energy Efficiency Programs and your projects. Consumers Energy Natural Gas Account Number (at Project Location)  Primary Business Type Agriculture Heavy Industrial Hotel Garage Office High School High School High School Garage Office Gaucia Service Restaurant Convenience Store School (K-8) Small Office Gaucia Service Restaurant Category How School (K-8) Garage Office Heavy Industrial Public Assembly Other  Category How School (K-8) Category Cat	City	State ZIP
Consumers Energy Natural Gas Account Number (at Project Location)         Primary Business Type         Agriculture       Heavy Industrial         Agriculture       Heavy Industrial         Auto Repair       Light Industrial         Biotech       High School         Convenience Store       School (K-8)         Convenience Store       School (K-8)         Grocery       University/College         Public Assembly       Other         Castomer Tax Information (Required for all applications)         Tax Status **       Individual/Sole proprietor         S Corporation       Partnership       LLC Enter Tax Classification         single-member LLC       S Corporation       Partnership         Tax ID Number: Please provide your EIN/Federal Tax ID below.       Exemptions         EIN/Federal Tax ID       Payee Code       FATCA Code         Project Information       Fapileable       Payee Code       FATCA Code         Project Information       If applicable       Payee Code       FATCA Code	Phone	Email
Primary Business Type         Agriculture       Heavy Industrial       Hotel       Big Box Retail         Auto Repair       Light Industrial       Motel       Small Retail         Biotech       High School       Large Office       Full Service Restaurant       Facility Size (Areo)         Convenience Store       School (K-8)       Small Office       Quick Service Restaurant       Facility Size (Areo)         Grocery       University/College       Religious       Warehouse       ft²         Data       Hospital       Public Assembly       Other	We will use your email address solely to provide timely information about the Const	umers Energy Business Energy Efficiency Programs and your projects.
Agriculture       Heavy Industrial       Hotel       Big Box Retail         Auto Repair       Light Industrial       Motel       Small Retail         Biotech       High School       Large Office       Full Service Restaurant         Convenience Store       School (K-8)       Small Office       Quick Service Restaurant       Facility Size (Areo)         Convenience Store       School (K-8)       Small Office       Quick Service Restaurant       Facility Size (Areo)         Corcery       University/College       Religious       Warehouse       ft²         Data       Hospital       Public Assembly       Other	Consumers Energy Natural Gas Account Number (at Project Location)	
Auto Repair       Light Industrial       Motel       Small Retail         Biotech       High School       Large Office       Full Service Restaurant       Facility Size (Area)         Convenience Store       School (K-8)       Small Office       Quick Service Restaurant       Facility Size (Area)         Grocery       University/College       Religious       Warehouse       ft²         Data       Hospital       Public Assembly       Other	Primary Business Type	
Biotech       High School       Large Office       Full Service Restaurant       Facility Size (Area)         Convenience Store       School (K-8)       Small Office       Quick Service Restaurant       Facility Size (Area)         Grocery       University/College       Religious       Warehouse       ft²         Data       Hospital       Public Assembly       Other	Agriculture Heavy Industrial Hotel	Big Box Retail
Convenience Store School (K-8) Small Office Quick Service Restaurant Facility Size (Area)   Grocery University/College Religious Warehouse ft <sup>2</sup> Data Hospital Public Assembly Other	Auto Repair Light Industrial Motel	Small Retail
Convenience store       School (K-8)       Small Office       Quick Service Restaurant         Grocery       University/College       Religious       Warehouse       ft <sup>2</sup> Data       Hospital       Public Assembly       Other	Biotech     High School     Large Office	
Indextry Indextry (Conteger   Data Hospital   Public Assembly Other	Convenience Store School (K-8) Small Office	Quick Service Restaurant
Customer Tax Information (Required for all applications)         Tax Status **       Individual/Sole proprietor       C Corporation         single-member LLC       S Corporation       Partnership       LLC Enter Tax Classification         Tax ID Number: Please provide your EIN/Federal Tax ID below.       Trust/estate       Other         EIN/Federal Tax ID        Payee Code       FATCA Code         Project Information       Project Name (if applicable)       Installation Address	Grocery University/College Religious	Warehouse ft <sup>2</sup>
Tax Status **       Individual/Sole proprietor single-member LLC       C Corporation       Partnership       LLC Enter Tax Classification         Tax ID Number:       Please provide your EIN/Federal Tax ID below.       Trust/estate       Other         EIN/Federal Tax ID	Data Hospital Public Assembly	Other
single-member LLC S Corporation Trust/estate Other Tax ID Number: Please provide your EIN/Federal Tax ID below. Exemptions EIN/Federal Tax ID Payee Code FATCA Code Project Information Project Name (if applicable) Installation Address	Customer Tax Information (Required for all applications)	
Tax ID Number: Please provide your EIN/Federal Tax ID below.   EIN/Federal Tax ID     Project Information   Project Name (if applicable) Installation Address	Tax Status ** 🔲 Individual/Sole proprietor 🔄 C Corporation	Partnership LLC Enter Tax Classification
EIN/Federal Tax ID Payee Code FATCA Code Project Information Project Name (if applicable) Installation Address	single-member LLC S Corporation	Trust/estate Other
EIN/Federal Tax ID Payee Code FATCA Code Project Information Project Name (if applicable) Installation Address	Tax ID Number: Please provide your EIN/Federal Tax ID below.	Exemptions
Project Name (if applicable) Installation Address		
Installation Address	Project Information	
	Project Name (if applicable)	
City State Zip	Installation Address	
	City	State Zip
Technical Contact Information (Trade Ally, Contractor, Designer, etc.)	Technical Contact Information (Trade Ally, Contractor, Designer, etc.)	
Company Name* Consumers Energy Contractor ID (if known)		eray Contractor ID (if known)
Contact Name Title		
Mailing Address		
	City	State Zip
	Phone	
Rebate Adminstrator (RA) Name RA Email	Rebate Adminstrator (RA) Name	RA Email

\* Company name as it appears on your W-9.

\*\* W-9 must be provided for payee with application.

For internal us	e only		
Date	Assigned	CE -	6
			1/1/0



Incentive Requested				-
Equipment Type	Incentive	# of Units	Total Incentive	*
TU205 Steam Trap Repair or Replacement	\$175.00 per Trap			

Total Measure Incentive cannot exceed 100% of the installed project cost of the replacement (material and labor).

Check the Buy Michigan Box only if the incentivized piece of the equipment meets the Buy Michigan bonus specifications and we can verify the manufacturer affidavit.

Incentive Requested		
Total Project Cost	Total Incentive Requested	Actual Completion Date
Company Name*		Project #
Customer Signature		Date
Print Name		Title

Upon signing, I am stating that I have read and understand the Terms and Conditions set forth by this program.

#### **Third Party Payment Release**

#### Skip This Section If Rebate Check Will Be Made Payable To Customer

I authorize the payment of the incentive to the third party named below and I understand that I will not be receiving the incentive payment. I also understand that my release of the payment to a third party does not exempt me from the program requirements outlined in the Incentive Catalog, Final Application Agreement and Terms and Conditions. **Authorized By:** 

Customer Name	Signature	Date
Check should be made payable to: Individual/Company Name*		Phone
Mailing Address		
City	State	ZIP
Tax Status**: Individual/Sole proprieto single-member LLC	or C Corporation Partnership	LLC Enter Tax Classification
Tax ID Number Please provide your EIN/Feder EIN/Federal Tax ID		xemptions ayee Code FATCA Code

> Please note that this document will require re-saving each time a digital signature is used.

\* Company name as it appears on your W-9.

\*\* W-9 must be provided for payee with application.



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04/15/2022

## 1. Survey form

• This application requires that you provide a spreadsheet with survey/repair/replacement results as part of your steam trap maintenance program. A template is provided below, or you may use a professional report or another document with the same required information.

## 2. How to conduct the survey

- The survey may be conducted by a certified contractor or certified customer technician. Surveys are typically performed using listening or temperature devices.
- Check and record the results for all steam traps being replaced in the facility that is requesting a rebate.

#### 3. Submit your survey

• Include your completed survey as supporting documentation with the rest of your application.

Existi	ng		New		
	Location in Facility	Fail Status (Open/Closed)	Make	Model#	Trap Type
27	North Press	Open	Manufacturer	800	Inverted Bucket

Surveyor's Name

Company

Survey Date

Surveyor's Signature

Interactive PDF is available at ConsumersEnergy.com/steamtrapexpress



04/15/2022