



## Business Intake Application – Business Energy Efficiency Retrofit Program

The 2023 Business Energy Efficiency Retrofit Program is now accepting applications for energy efficiency retrofits for **businesses**. The program is available to **registered** Inuit business owners who are beneficiaries in the Labrador Inuit Settlement Area, meet the requirements of the program, and reside in the Inuit Communities of Nain, Hopedale, Postville, Makkovik, and Rigolet. Eligible businesses primary heating system must be electric. The primary heating source is responsible for 50% or greater of the heating in your building.

Applications for this program will be accepted until May 31, 2023.

**If you are uncertain if your business is eligible, have any questions or need any help when filling out this application, please contact Jamie Hewlett (1-866-922-2942 ext 280) or Stuart Michel (1-709-947-3558).**

Applicant's Full Name and Position:	Registered Business Name:
Street Address:	Mailing Address:
Applicant's Phone Number:	Postal Code:
Cell: _____	Community Name:
Office: _____	
Applicant's Email:	Business Status:
	<input type="checkbox"/> Privately Owned (required to be eligible)

<p>Are you or a business partner a beneficiary of the Labrador Inuit Land Claim Agreement?</p> <p style="text-align: center;"><input type="checkbox"/> Yes      <input type="checkbox"/> No</p>	<p>If yes, please include beneficiary number below.</p> <p>Beneficiary #: _____</p>
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**Business Information**

<p>Is your Business Seasonal or Year-Round?</p>	<p style="text-align: center;"><input type="checkbox"/> Seasonal      <input type="checkbox"/> Year-Round</p>
<p>If seasonal, how many months per year is your business open?</p>	<p>Number of months: _____</p>
<p>How many days per week is your business open?</p>	<p>Number of days: _____</p>
<p>How many hours per week is your business open?</p>	<p>Number of hours: _____</p>
<p>How many employees does your business have?</p>	<p>Number of employees: _____</p>
<p>Is the <b>primary heating source</b> in your building <b>electric?</b> (<i>"Yes" is required to be eligible for this program</i>)</p> <p><b>Please note:</b> the primary heating source is responsible for <b>50%</b> or greater of the heating in your building</p>	<p style="text-align: center;"><input type="checkbox"/> Yes      <input type="checkbox"/> No</p>
<p>Please select your primary heating source (50% or greater)</p>	<p><input type="checkbox"/> Electric Baseboard</p> <p><input type="checkbox"/> Electric Furnace – Forced Air</p> <p><input type="checkbox"/> Electric Hot Water – Radiator or Baseboard</p> <p><input type="checkbox"/> Electric Heat Pump – Central Ducted Please include appx. age _____</p> <p><input type="checkbox"/> Electric Heat Pump – Ductless Mini Split Please include appx. age _____</p> <p><input type="checkbox"/> Other: _____</p>
<p><b>EXCLUDING</b> areas of your building that are <b>not heated</b> (garage, unheated storage area, etc. what is the total square footage?)</p>	<p><input type="checkbox"/> Less than 500 sq. ft</p> <p><input type="checkbox"/> 501 to 1000 sq. ft</p> <p><input type="checkbox"/> 1001 to 2000 sq. ft</p> <p><input type="checkbox"/> 2001 to 3000 sq. ft</p> <p><input type="checkbox"/> 3001 to 5000 sq. ft</p> <p><input type="checkbox"/> 5001 to 10,000 sq.ft</p> <p><input type="checkbox"/> 10,000+ sq.ft</p> <p><input type="checkbox"/> Unsure</p>

Is there Wi-Fi in your building?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Building Systems**

Do you have a refrigeration system in your building? Freezers, cold storage etc. (Other than an employee lunchroom fridge)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the building well insulated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Is there a commercial kitchen in the building?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How is the hot water in the building heated?	<input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Other: _____
What percent of lighting in your building has been upgraded to LED?	<input type="checkbox"/> Percent LED: _____

Please note that for eligibility in this program, a program representative and installation contractor must visit your business to determine if it is safe and viable to install various retrofit measures.

Do you consent to a representative and contractor entering your building at an agreed upon date and time?

**Please note:** "Yes" is required to advance with the application.

Yes     No

To the best of your knowledge, is all information included in this application true?

Yes     No

Date: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_