



SMALL BUSINESS ADVANTAGE GRANT APPLICATION

**INSTRUCTIONS ARE INCLUDED FOR YOUR REFERENCE
INCOMPLETE APPLICATIONS WILL BE REJECTED**

I. OWNER INFORMATION (Type or Print Legibly) – SEE Application Instructions

Commonwealth of Pennsylvania Vendor ID # (required) _____

Owner Name _____ EIN* _____

Company Name* _____ Number of Employees _____

Type of Entity: Sole Proprietorship Corporation Partnership Other _____

Address* _____

City* _____ State* _____ Zip* _____

Type of Business _____

Phone No. (____) _____ - _____

Contact Name _____ Phone No. (____) _____ - _____ Extension _____

E-mail Address _____

Permitted Facilities must provide information on any permitted processes: Water, Wastewater, Waste Handling, or Air Emissions. Compliance Status: Check "yes" if in compliance with the permit requirements or "No" if not in compliance with permit requirements. If "No", please attach additional information explaining compliance status. Businesses not requiring permits please mark: **Not Applicable**

DEP Permit Type	Permit Number	Date Issued	Compliance Status	
1.			<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.			<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.			<input type="checkbox"/> Yes	<input type="checkbox"/> No

II. PROJECT INFORMATION

Name _____

Type of Project (check one) Replacement/Upgrade of Existing Equipment New Construction

Technology Type (check all that apply)

Lighting HVAC Industrial Equipment Insulation/Air Sealing

Industrial Equipment (refrigeration, pumps, compressors, etc.)

Pollution Prevention/Material Recycling Auxiliary Power Units, Bunk Heaters or Anti-idling

Amount of Grant Request _____ Estimated Project Start Date _____

Total Cost of Project _____ Estimated Project Completion Date _____

Total Eligible Cost of Project _____

* All entries marked * must agree with data on file with PA Vendor Data Management Unit. (<http://www.vendorregistration.state.pa.us> for first filing) (Questions: 717-346-2676 or 877-435-7363 toll free). Data on this application not in agreement with that supplied to Vendor Data Management will cause rejection or delay of application processing.

VII. POLLUTION PREVENTION AND ENERGY CONSERVATION QUANTIFICATION

Waste/Emissions- include unit A. price-\$/gal, \$/month, \$/ton, etc.	Current Annual Generation/Cost	Projected Annual Generation/Cost	Estimated Annual Savings
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Pollution, Waste, or Emissions SUB-TOTAL (A)			_____
Energy/Resource include unit B. price-\$/gal, \$/kWh, \$/Mcf, etc.	Current Annual Quantity/Cost	Projected Annual Generation/Cost	Estimated Annual Savings
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Energy Usage/Resource Reduction SUB-TOTAL (B)			_____

Note about new construction: For assistance calculating savings for projects not involving the replacement of existing equipment or materials, it may be helpful to refer to the EPA Energy Star, Business Improvements website at www.energystar.gov.

VIII. RESULTS - SUMMARY OF SAVINGS AS PERCENTAGES

Total Eligible Cost of This Project	\$ _____
Estimated Annual Savings	
P2 - Pollution Prevention (A)	\$ _____
E2 - Energy Efficiency (B)	\$ _____

From Section VII. Part A. above
Pollution prevention percentage _____ %
(Estimated Annual Savings divided by the **Current Annual** Generation/Cost
Multiplied by 100)

From Section VII. Part B. above
Energy conservation percentage _____ %
(Estimated Annual Savings divided by the **Current Annual** Quantity/Cost
Projected annual multiplied by 100)

IX. ENERGY STAR PORTFOLIO MANAGER

Check each once completed.

- Set up a shared account with master account: PADEP-PA SMALL BUSINESS
- Provide at least 12 months of utility data in shared account
- Generate "Statement of Energy Performance", "Data Checklist" and "Facility Summary" reports and attach to this application.

X. COMPANY COMMITMENT

The Owner, President or CEO of the applying business must sign this document.

I certify that the information provided herein is true, accurate and complete to the best of my knowledge and belief. I have reviewed the grant application guidelines and understand the requirements of this grant program.

Name and Title: _____

Signature: _____
(Original signature required)

Date: _____

Please return the completed application to the:

Department of Environmental Protection
Office of External Affairs
Attn: Small Business Advantage
P.O. Box 8772
Harrisburg, PA 17105-8772

**Please mail applications through US Postal Service.
Completed applications will be accepted if mailed and
postmarked between July 25, 2011, and Aug. 29, 2011.**

**Write the word ADVANTAGE, and circle it, on the back of each application envelope or
related submission.**

**Faxed or e-mailed applications will not be accepted. Hand delivered applications
must be received by 4 p.m. on Aug. 29, 2011, and should be
delivered to the following address:**

**Department of Environmental Protection
Office of External Affairs
Advantage Grant Program
Rachel Carson State Office Building
400 Market St., 15th Floor
Harrisburg, PA 17101**