

To be completed by participant and Trade Ally

REMINDER: ALL PROJECTS MUST BE PRE-APPROVED BY TACOMA POWER BEFORE MATERIALS ARE ORDERED

Please fill in the highlighted fields.

Tacoma Power Use Only

Project ID

Staff Contact

Date Received

Participant Information

Project Name:			
Customer Name:			
Facility Address:	City:	State:	Zip:
Mailing Address:	City:	State:	Zip:
Customer Contact:	Title:		
Telephone:	Cell Phone:	Fax:	
Email:			
Which of the following best describes Participant?			
<input type="checkbox"/> Institution	<input type="checkbox"/> Management Company	<input type="checkbox"/> Owner	<input type="checkbox"/> Tenant
Building Use Type:		Non-profit or Government Entity?	

Facility Information

Square Footage Affected by Lighting Project:	(required)		
Facility Heating Fuel Type:	(required)		
Daily Occupied Hours			
Sunday	Thursday	Open Major Holidays?	Number of units:
Monday	Friday		Number of buildings:
Tuesday	Saturday	Total Weekly Hours	Number of floors:
Wednesday		Total Annual Hours	Year built:

Account Information

UBI # (Unique Business Identifier)	Rate Schedule
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Account Number (required)	Permit Number
Connection Object	

Project Information

Start Date	Estimated Completion Date
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Trade Ally Information

Company	Metro Group, LLC	Date	
Representative	Paul Koo	Title	Energy Program Director
Telephone	800-757-3469	Fax	888-887-0939
		Email	pkoo@ezmetro.com