

# Program Modification Request Form

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Fax: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Check One – Request for  *New Technology* or  *Program Rule Modification*

For *New Technology*

Technology Name: \_\_\_\_\_

Check One –  *Level 1*  *Level 2*  *Level 3-R*  *Level 3-N*

For *Program Rule Modification*

Program Rule Modification Name: \_\_\_\_\_

### Screening Checklist:

The Applicant (App) & Sponsoring Program Administrator (SPA) must check that each screening criterion has been addressed in the proposal by checking the appropriate list of boxes below.

<b>New Technology</b>	<b>App</b>	<b>SPA</b>
Applicable to California electric customers.	<input type="checkbox"/>	<input type="checkbox"/>
Can be sized to operate at or below the site peak demand.	<input type="checkbox"/>	<input type="checkbox"/>
Equipment life is at least 20 years or has sufficient ratepayer & social benefits.	<input type="checkbox"/>	<input type="checkbox"/>
Needs financial assistance or has sufficient ratepayer & social benefits.	<input type="checkbox"/>	<input type="checkbox"/>
Equipment is safe and practical to install and operate.	<input type="checkbox"/>	<input type="checkbox"/>
Can meet utility interconnection requirements.	<input type="checkbox"/>	<input type="checkbox"/>
No significant environmental impacts.	<input type="checkbox"/>	<input type="checkbox"/>
Meets current SGIP equipment eligibility or concurrent rule change proposal included.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Program Rule Modification</b>	<b>App</b>	<b>SPA</b>
Does not conflict with existing utility tariffs or rules.	<input type="checkbox"/>	<input type="checkbox"/>
Does not violate local, state or federal laws and regulations.	<input type="checkbox"/>	<input type="checkbox"/>
Does not decrease SGIP cost effectiveness.	<input type="checkbox"/>	<input type="checkbox"/>
Incentive modifications based on economic & social benefits.	<input type="checkbox"/>	<input type="checkbox"/>
Does not increase costs for SGIP Applicants, Host Customers or Administrators in development, submission or processing applications.	<input type="checkbox"/>	<input type="checkbox"/>
Preserves the intent of the SGIP.	<input type="checkbox"/>	<input type="checkbox"/>

The undersigned declares under penalty of perjury under the laws of the State of California that the information provided in this form is true, accurate and complete.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Program Modification Request Form

(To be filled in by Sponsoring Program Administrator)  
 Application #:

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**SPONSORING ADMINISTRATOR USE ONLY**

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Sponsoring Administrator:  SoCalGas  SDREO  
 (Check One)  SCE  PG&E

SPA Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Milestone Dates:**

Milestone	Date Completed	Comments/Notes
First Draft Received		
Application Deemed Complete		
Application Distributed to Working Group		
Application Presentation to Working Group		
Working Group Proposed Recommendations Complete		
Recommendations Forwarded to Applicant		
Applicant's Comments Received		
Working Group Final Recommendation Complete		
Energy Division Submission to Assigned Commissioner		
Assigned Commissioner's Ruling		
Commission Decision		
Modification Implemented		