

**NY-Sun INCENTIVE PROGRAM
CHANGE REQUEST FORM**

Rev. 14

Date _____ 4-Digit Installer # _____ 5-Digit Application # _____

Indicate: **PON2112** send to: PVForms@nyserda.ny.gov **PON2112LI** send to: PVFormsLI@pseg.com

Check One: Change Order _____ Cancellation _____ Extension Request _____

+

Please use the following naming convention in subject line of email:

Change Order/Cancel/Extension - PV (4 digit installer # + application #) – Name of Customer

Will project use GJGNY financing? ___No ___Yes (If yes, submit a new ProForma Tool for any change to system size)

Electric Utility – One box must be checked and must match Power Clerk submission	
CHG&E _____	Con Ed _____
N. Grid _____	NYSEG _____
O&R _____	NYPA _____
RG&E _____	PSEG LI _____

ATTACH A REVISED 1 or 3-LINE DRAWING, IF APPLICABLE

Reason for Change/Cancel/Extension _____

COMPLETE THE SECTION BELOW ONLY IF THIS IS A CHANGE ORDER

NEW SYSTEM Please refer to section 2.6 of the PV Solar Program Manual for rules.

System Size	_____ kW	Street Address:	_____
		Zip Code:	_____
NYSERDA Incentive*	\$ _____	*Is an additional incentive requested? <input type="checkbox"/> yes <input type="checkbox"/> no	
Equipment:	Quantity	Cost	Make and Model
Modules		\$ _____	
Inverter(s)		\$ _____	
Balance of System		\$ _____	
Installation/Labor		\$ _____	
Other		\$ _____	
Total Price		\$ _____	

To accept, sign below and return.

Contractor Signature _____ Date _____

If executed by Installer, Contractor certifies that Installer is authorized by Contractor to do so.

Customer Name _____

Customer Signature _____ Date _____

For NYSERDA use only:

Approved in PC by (initials) _____ Date _____ PO# _____

Original PO Amt \$ _____ Amt of Increase \$ _____ New PO Amt \$ _____