

Instant Lighting Incentive Program Enrollment Application

Please confirm that you meet the definitions and requirements outlined in the Instant Lighting Incentive Program's handbook before completing this form.

If approved, you will be required to sign a participation agreement, complete a Con Edison-hosted training, and create a user profile to qualify and submit sales.

Please complete all fields as Con Edison will not review incomplete applications.

Company name:

Address:

Email Address/Contact URL (for program website):

Primary and secondary contact:

Name	Title	Phone	Email
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Name	Title	Phone	Email
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How long has your organization been in business? _____ Years _____ Months

Do you perform your own installations? Yes No

If not, who performs the installation?

How is your organization classified?

Distributor Manufacturer ESCO Aggregator Other:

How do you purchase your LEDs?

Directly from manufacturers and/or rep agencies

Directly from distributors

Other

Do you sell ENERGY STAR® or DLC LED lamps? Yes No

Which specific markets do you target, if any?

Which other Con Edison programs have you participated in, if any?

Would you be able to note the Con Edison discount on your invoices?

Do you have liability insurance coverage of at least \$1 million?

If yes, please provide a copy of your Certificate of Insurance with CECONY added as the certificate holder when submitting this form.

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Please complete the table with the number of units sold and expected to be sold by your organization within the Con Edison territory.

Measure	Prior annual units	Forecasted annual units
4 Pin		
PL-L 2G11-base		
A Line		
BR30/40		
Decorative		
TLED T8 (all lengths)		
MR16		
PAR16/20/30/38		
R20		
HID Interior/Exterior LT 250W		
HID Interior/Exterior - GTE 1000W		
HID Interior/Exterior 250W to 399W		
HID Interior/Exterior 400W to 999W		
TLED T5 4ft		
TLED T5 4ft HO		
TLED U Bend		

Please list at least three references from whom you regularly purchase LED lamps:

Organization	Name	
Email	Phone	
Organization	Name	
Email	Phone	
Organization	Name	
Email	Phone	
Organization	Name	
Email	Phone	

Please email completed form to InstantLighting@conEd.com. You'll be notified via email with the result of your application. Please allow up to 2 weeks for the program team to review the application.