INCENTIVE PRODUCT INFORMATION SHEET

THIS FORM MUST BE ATTACHED TO COMPLETED INCENTIVE APPLICATION AND SUBMITTED TOGETHER. **NEED HELP? CALL 800.762.7077**

CUSTOMER INFORMATION

JOB SITE BUSINESS NAME

JOB SITE ADDRESS

TRADE ALLY NAME

HOW TO FILL OUT THIS FORM

Please refer to:

- The applicable incentive catalog for incentive codes, incentive per unit, and product eligibility requirements.
- **focusonenergy.com/business/qpls** for qualified products lists.
- **Invoice showing proof of purchase** for Manufacturer and Model Number.

Attach this form to a completed **Incentive Application** and submit together.

INCENTIVE CODE	MANUFACTURER NAME	MODEL #	UNIT MEASURE	# OF UNITS (A)	INCENTIVE PER UNIT (B)	TOTAL INCENTIVE (A X B)
(Example) L3111	STARK LIGHTING	LED5VZP	FIXTURE	10	$ 18.00	$ 180.00
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$

(Please note: continued on back side.)

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INCENTIVE PRODUCT INFORMATION SHEET (CONTINUED)

INCENTIVE CODE	MANUFACTURER NAME	MODEL #	UNIT MEASURE	# OF UNITS (A)	INCENTIVE PER UNIT (B)	TOTAL INCENTIVE (A X B)
(Example) L3111	STARK LIGHTING	LED5VZP	FIXTURE	10	$ 18.00	$ 180.00
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$
					$	$

If you need additional lines please use and attach a secondary Incentive Product Information Sheet

- ☐ **Itemized invoice(s) attached**
- ☐ **Manufacturer specifications attached**

INSTALLATION DATE

___ / ___ / _____

Subtotal*
(please transfer this number to the Incentive Application)

$

* Incentive total may be adjusted based on project caps.
See measure requirements and Terms and Conditions for more information.

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