

ONLINE APPLICATION REQUIRED INFORMATION CHECKLIST

The checklist, below, lists the information you will need in order to complete and submit your online application (OLA), as well as the documents that must be uploaded. Please note that the OLA process allows you to save your work at any point and return to the application at a later time to complete it, if needed.

If you have any questions or concerns, please contact one of our project coordinators at 1-866-233-0450 between the hours of 8:00 a.m. and 5:00 p.m. Central Time or email us at TVABusinessIncentive@tva.gov.

	Requested Information	OLA Page
Customer Information		
<input type="checkbox"/>	Application Title – internal project name Customer Contact: <ul style="list-style-type: none"> • First Name • Last Name • Email • Day Phone • Cell Phone (optional) 	Customer/ Contractor Information
<input type="checkbox"/>	Company Name – Legal Company Name as Listed on Federal Tax Documents	Customer/ Contractor Information
<input type="checkbox"/>	Company Address: <ul style="list-style-type: none"> • Street • City • State • Zip Code 	Customer/ Contractor Information
<input type="checkbox"/>	Contractor Information (optional): <ul style="list-style-type: none"> • Company Name • Contractor First Name • Contractor Last Name • Office Phone Number • Cell Phone (optional) • Email 	Customer/ Contractor Information
Site Information		
<input type="checkbox"/>	Project Site Name	Site Information
<input type="checkbox"/>	Site Address: <ul style="list-style-type: none"> • Street • City • State • Zip Code 	Site Information
<input type="checkbox"/>	Site Contact Information: <ul style="list-style-type: none"> • First Name • Last Name • Office Phone Number • Cell Phone (optional) • Site Contact Email 	Site Information
<input type="checkbox"/>	Facility Type (Commercial/Industrial)	Site Information
<input type="checkbox"/>	Government Entity (yes/no)	Site Information
<input type="checkbox"/>	Site NAICS Code (optional)	Site Information
<input type="checkbox"/>	Disaster Related Project (yes/no)	Site Information
<input type="checkbox"/>	Local Power Company	Site Information
<input type="checkbox"/>	Account Number (optional)	Site Information

Requested Information: Measures		OLA Page
Project/Measure Details – Indoor Agriculture Pod/Container New Construction		
<input type="checkbox"/>	Measure Type / Measure	Measures
<input type="checkbox"/>	Pod/Container Square Footage	Measures
<input type="checkbox"/>	Total Estimated Project Cost	Measures
<input type="checkbox"/>	Number of Days for Project Completion (cannot exceed 365 days)	Measures
<input type="checkbox"/>	Brief Description of the Project (including legal food crop)	Measures
Required Documents for upload:		
<input type="checkbox"/>	Scope of Work including detailed layout of floor plans	Documents
<input type="checkbox"/>	Specification Sheets (including Model Numbers)	Documents
Recommended Documents for upload:		
<input type="checkbox"/>	Recent Utility Bill for Project Site	Documents

Project/Measure Details – Indoor Agriculture Vertical Farm Lighting		
<input type="checkbox"/>	Measure Type / Measure	Measures
<input type="checkbox"/>	Current Total Lighting Wattage	Measures
<input type="checkbox"/>	Proposed Total Lighting Wattage	Measures
<input type="checkbox"/>	Total Estimated Project Cost	Measures
<input type="checkbox"/>	Number of Days for Project Completion (cannot exceed 365 days)	Measures
<input type="checkbox"/>	Brief Description of the Project (including legal food crop)	Measures
Required Documents for upload:		
<input type="checkbox"/>	Scope of Work including detailed quantities, wattages and locations of existing lights (current total) and detailed quantities, wattages and locations of proposed lights, including model numbers	Documents
<input type="checkbox"/>	Specification Sheets (including Model Numbers)	Documents
Recommended Documents for upload:		
<input type="checkbox"/>	Recent Utility Bill for Project Site	Documents

Project/Measure Details – Indoor Agriculture Vertical Farm HVAC		
<input type="checkbox"/>	Measure Type / Measure	Measures
<input type="checkbox"/>	Equipment Type (Air Conditioner, Heat Pump, VRF)	Measures
<input type="checkbox"/>	Total Tonnage	Measures
<input type="checkbox"/>	Total Estimated Project Cost	Measures
<input type="checkbox"/>	Number of Days for Project Completion (cannot exceed 365 days)	Measures
<input type="checkbox"/>	Brief Description of the Project (including legal food crop)	Measures
Required Documents for upload:		
<input type="checkbox"/>	Scope of Work including total tonnage broken out by location served, quantity and model number	Documents
<input type="checkbox"/>	Specification Sheets (including Model Numbers)	Documents
Recommended Documents for upload:		
<input type="checkbox"/>	Recent Utility Bill for Project Site	Documents

Required Information		OLA Page
Incentive Recipient		
<input type="checkbox"/>	Legal Business Name as Listed on Federal Tax Documents	Incentive Recipient
<input type="checkbox"/>	Taxpayer Identification Number (TIN)	Incentive Recipient
<input type="checkbox"/>	Business Classification	Incentive Recipient
<input type="checkbox"/>	Recipient Name	Incentive Recipient
<input type="checkbox"/>	Recipient Address	Incentive Recipient
<input type="checkbox"/>	Recipient Email	Incentive Recipient
<input type="checkbox"/>	Recipient Phone Number	Incentive Recipient
Questionnaire:		
<input type="checkbox"/>	Answer questions: 1. Without program incentives or advice, what portion of this equipment would have been approved and/or implemented? 2. Without program incentives or advice, how likely were you to install electric rather than gas-fueled equipment? 3. Without program incentives, what would the timing of measure installation have been? 4. How important was your previous experience with EnergyRight for Business & Industry Program in making your decision to install the equipment?	Questionnaire
Terms and Conditions:		
<input type="checkbox"/>	Confirm acceptance of TVA EnergyRight Terms & Conditions	T&Cs
Adobe Sign:		
<input type="checkbox"/>	Electronically sign and submit the OLA	Adobe Sign

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