Energy Management Program
Trade Ally Application

Thank you for your interest in joining the New Jersey Energy Management program. A company must be approved as an Energy Management Trade Ally to submit projects through this program on behalf of Atlantic City Electric customers. To become an approved Trade Ally, please follow the steps below:

1. Send application to ace.energysavings@TRCcompanies.com with the following attached:

- ☐ This completed application.
- ☐ Completed W-9 Form.
- ☐ New Jersey Division of Revenue Registration (Copy of Business Registration Certificate from the NJ Division of Revenue website for your company https://www1.state.nj.us/TYTR_BRC/jsp/BRCLoginJsp.jsp)
    - Current Alternate Name form (dba) filed with the state of NJ, if applicable
- ☐ Certificate of insurance from your insurer. Required insurance policy and coverage listed in the application below, see Trade Ally Requirements for more information.
- ☐ At least one (1) example each of a Retro-Commissioning (RCx) and/or Monitoring Based Commissioning (MBCx) report (as applicable to your application) completed in the past three (3) years.
- ☐ Signed Trade Ally Agreement for Energy Management found on the Atlantic City Electric website: https://homeenergysavings.atlanticcityelectric.com/business/trade-allies

2. Review Program's Trade Ally Requirements and ensure your company meets or exceeds these requirements.

3. Program Training: If approved, the Trade Ally agrees to requiring at least one person from the Trade Ally's firm to participate in an initial program training session, plus additional training updates as needed. All training requirements for the Energy Management Program may be in addition to other training requirements for **ATLANTIC CITY ELECTRIC** administered programs.

If you have any questions, comments, and/or need clarifications regarding this application, please contact ace.energysavings@TRCcompanies.com.

Applicant Information								
Company Name:								
Contact:		Title:		Email:				
Mailing Address:		City:		State:		ZIP:		
Office Phone:		Cell Phone:						
Website:								
Years in Business:		Years under current ownership:		Number of employees:				
Check any that apply:	☐ Minority Owned	☐ Woman Owned	☐ Veteran Owned					
Federal Tax ID #:		Corporation ○	Partnership ○	Individual/Sole Proprietor ○	Exempt (Tax exempt/non-profit) ○			
How did you hear about the program?								

Company Information				
Business Type				
☐ Electrical Contractor	☐ Manufacturer	☐ Distributor	☐ Architect	☐ Consultant
☐ Manufacturer's Rep	☐ Retailer	☐ Engineer	☐ Mechanical Contractor (HVAC)	
Please check what services you are interested in providing (Check all that apply):				
☐ HVAC Tune-Up	☐ Building Tune-Up	☐ Monitoring-Based Commissioning (MBCx)	☐ Retro- Commissioning (RCx)	
Please provide a brief company overview and note any other comments about your focused specialties:				
If applying to provide Monitoring-Based Commissioning (MBCx) services: What software(s) do you use?				

Leads
Do you have any active leads for projects that you plan to submit to the Atlantic City Electric program? If so, please provide details here:

Summary of Insurance
As noted earlier, you will be required to provide Certificates of Insurance listing ATLATIC CITY ELECTRIC, Program Implementer, and any overlapping utilities where you intend to operate as a condition of participation in this program. For this summary, it is acceptable to note if address and contact is the same for multiple policies.

General Liability Insurance Information								
Company:								
Mailing Address:		City:		State:		ZIP:		
Contact Name:		Phone:		Amount of Coverage: *Must be at least $1 million*				

Employer's Liability Insurance Information								
Company:								
Mailing Address:		City:		State:		ZIP:		
Contact Name:		Phone:		Amount of Coverage: *Must be at least $1 million*				

Auto Insurance Information								
Company:								
Mailing Address:		City:		State:		ZIP:		
Contact Name:		Phone:		Amount of Coverage: *Must be at least $1 million*				

Excess Umbrella Insurance Information								
Company:								
Mailing Address:		City:		State:		ZIP:		
Contact Name:		Phone:		Amount of Coverage: *Must be at least $4 million*				

Customer References

Provide at least one (1) recent reference for a for each type of service indicated in application above (e.g. HVAC Tune-Up, Building Tune-Up, MBCx, RCx). Attach additional pages if necessary.

1	Company Name:		Describe Project:
	Contact Person		
	Phone:		
	Email:		
2	Company Name:		Describe Project:
	Contact Person		
	Phone:		
	Email:		
3	Company Name:		Describe Project:
	Contact Person		
	Phone:		
	Email:		

Key Staff

Please list all KEY STAFF who will be working on Atlantic City Electric projects, including name, title, certifications, and years of experience. Attach additional pages if necessary.

Name	Current Title	Certifications Relevant to this Program	Years of Experience

Business Plan

In the space below, briefly describe your company's process for conducting a project from start to finish. Please provide a process for each applicable service indicated in application above (e.g. HVAC Tune-Up, Building Tune-Up, MBCx, RCx). Attach additional pages if necessary.

Interested in Project Financing from Atlantic City Electric?

NEIF is the third-party financing agency for the Atlantic City Electric C&I Energy Efficiency programs. By checking below, you, on behalf of your company, authorize TRC to share information and supporting documentation from this application with NEIF to begin their process of authorizing your company as an NEIF Approved Contractor. This status is required to procure financing for your company's Atlantic City Electric C&I projects. If there are any questions regarding financing, please visit https://www.neifund.org/atlantic-city-electric-commercial-financing/.

☐ On behalf of my company, I authorize TRC to share this application and relevant supporting documentation with NEIF.

Agreement and Signature

By submission of this application, the applicant and person signing on behalf of any applicant subscribes and affirms under penalties of law that the statements made in this application for inclusion as an Energy Management Trade Ally have been examined and to the best of his/ her/their knowledge and belief are true and correct. The applicant affirms that no person named in this application is subject to disqualification under the terms and guidelines of the state of New Jersey unless herein stated. The applicant understands that by signing this application it consents to any other inquiry to verify or confirm the information herein. The applicant understands that this application for inclusion as an Energy Management Trade Ally does not guarantee that inclusion will be granted but will be used in the determination of eligibility for inclusion. As an Energy Management Trade Ally you acknowledge you are acting as an independent entity to provide Energy Efficiency services for customers under the Energy Management Program and have not entered into a contractual agreement to provide services or other work for Atlantic City Electric, TRC Companies Inc., or any other overlapping utilities.

Authorized Representative *(please print)*	Title:	Date:

Signature:	