



*Please print clearly, type, or complete this form electronically to print.*

**Legal Name** of Organization applying for grant: \_\_\_\_\_

**Primary Contact** at organization regarding this grant request:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Geothermal Project Information**

Name of Facility: \_\_\_\_\_ Address: \_\_\_\_\_

Type/Use of Facility: \_\_\_\_\_ Average Weekly Operating Hours: \_\_\_\_\_

What Utility(ies) serve/will serve this facility: Electric: \_\_\_\_\_ Gas: \_\_\_\_\_

Geothermal system is part of: New Construction\_\_\_\_ Building Renovation\_\_\_\_ HVAC Replacement\_\_\_\_

Area of Facility Conditioned by Geothermal System (sq ft): \_\_\_\_\_

Geothermal Heat Exchanger Type (check all applicable) Closed Loop\_\_\_\_ Open Loop\_\_\_\_

Ground Coupled\_\_\_\_ Pond Coupled\_\_\_\_ Horizontal\_\_\_\_ Vertical\_\_\_\_ Coil/Spiral\_\_\_\_

Standing Well Column \_\_\_\_ Surface Discharge\_\_\_\_ Injection Well Discharge\_\_\_\_

Geothermal System Capacity (tons): \_\_\_\_\_ Geothermal Cooling EER: \_\_\_\_\_ Geothermal Heating COP: \_\_\_\_\_

# of Heat Pump Units: \_\_\_\_\_ # of Wells: \_\_\_\_\_ Average Bore Depth (ft): \_\_\_\_\_

Loop Field Pump Power (HP): \_\_\_\_\_ # of Loop Circuits: \_\_\_\_\_ Loop Field Site Area (sq ft): \_\_\_\_\_

Integrated Hot Water Heating (Y/N): \_\_\_\_\_ Non CFC/Non Toxic Refrigerant (Y/N): \_\_\_\_\_

Soil Conductivity Tests Completed (Y/N): \_\_\_\_\_ Thermally Enhanced Grout (Y/N): \_\_\_\_\_

Estimated Warranties: Heat Pump (Years): \_\_\_\_\_ Loop Field (Years): \_\_\_\_\_

Supplemental/Back-Up Heating System (Y/N): \_\_\_\_\_ If yes, Type: \_\_\_\_\_

Comparison Conventional HVAC Type: \_\_\_\_\_ SEER/EER: \_\_\_\_\_ AFUE/E<sub>t</sub>: \_\_\_\_\_ %

Estimated Project Start Date: \_\_\_\_\_ Estimated Project Completion Date: \_\_\_\_\_

**Project Installation Cost**

Cost of Proposed Geothermal Installation: \$ \_\_\_\_\_ (include cost of Turn-Key Loop Field)

Cost of Conventional System Installation: \$ \_\_\_\_\_

Incremental Cost: \$ \_\_\_\_\_ Percent Increase in Cost: \_\_\_\_\_ %

**Grant Requested (1/3 of Incr. Cost): \$ \_\_\_\_\_ (PROGRAM FUNDING CAP - \$90,000)**

Net Geothermal System Cost to Applicant: \$ \_\_\_\_\_



**Projected Energy Savings & Payback**

Peak Demand: Conventional (kW): \_\_\_\_\_ Geothermal (kW): \_\_\_\_\_ Demand Reduction (kW): \_\_\_\_\_  
Annual Energy: Conventional (MMBtu): \_\_\_\_\_ Geothermal (MMBtu) : \_\_\_\_\_ Savings (MMBtu): \_\_\_\_\_  
% Reduction in Space Requirements: Mechanical Room \_\_\_\_\_% Floor to Floor \_\_\_\_\_%  
% Annual Fossil Fuel Emissions Reduction: \_\_\_\_\_%  
Estimated Annual Savings: Utility: \$ \_\_\_\_\_ + Maintenance: \$ \_\_\_\_\_ = Total: \$ \_\_\_\_\_  
Estimated Simple Payback on Incremental Cost w/o Grant Assistance (Years): \_\_\_\_\_

**Cover Letter**

Please provide a **cover letter, of no more than 4 pages in length**, on organization letterhead that is signed by an authorized representative of the organization and includes:

- a description of your organization as well as the intended type of use and hours of operation of the facility in which the system is to be installed, including average weekly hours of operation and annual weeks of operation;
- a summary of any other energy efficiency upgrades that have been completed at the facility or any other complementary energy efficient features to be implemented if the installation is part of a new construction project;
- a description of your planned educational efforts to inform facility users, the community, and/or other organizations in Illinois about the benefits of the geothermal system such that the project will contribute to the Foundation’s goal of developing institutional demand for geothermal systems throughout the state;
- a plan for financing the project beyond the Foundation’s contribution (please include a list of any approved and/or pending grant requests from other sources);
- a brief explanation of when and how you plan to evaluate the benefits of the project, once installed;

**Attached Documentation**

Copy of IRS Tax Status Determination Letter of 501(c)(3) or Other Tax Exempt Status (Y/N): \_\_\_\_\_  
Copy of Cost Estimate from Designer/Contractor for Conventional HVAC System (Y/N): \_\_\_\_\_  
Copy of Cost Estimate from Designer/Contractor for Geothermal System (Y/N): \_\_\_\_\_  
Copy of current year summary budget for your organization (Y/N): \_\_\_\_\_

If you have questions related to any of the items above in preparing this application, please contact Bob Romo by telephone at (312) 372-5191 x30 or by e-mail at [bromo@illinoiscleanenergy.org](mailto:bromo@illinoiscleanenergy.org).