

# Business Energy Retrofit Program Application

## Applicant and Business Information

Business Name: \_\_\_\_\_ # of Employees at this location: \_\_\_\_\_

Business Address: \_\_\_\_\_ Federal ID # \_\_\_\_\_

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

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Have you participated in BER? \_\_\_\_\_ Located in a downtown setting? \_\_\_\_\_ Do you have bids? \_\_\_\_\_ Ready to start? \_\_\_\_\_ Estimated Start Date? \_\_\_\_\_

Property Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\* Electronic signature will be represented by typing full, legal name in the specified signature box and I agree that my electronic signature is the legally binding equivalent to my handwritten signature.

## Type of Facility

Agriculture	Restaurant	Lodging	Warehouse	Retail
Grocery	Office	Educational	Manufacturer	Non-Profit
Convenience	Health Care	Industrial	Other: _____	

\*All facilities are subject for review and approval.

\*Government, city, church and housing are not eligible.

\*Businesses are to be locally owned and operated.

## Proposed Project

Please give a brief overview of the upgrades you are interested in completing.

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How much are you willing to invest? \$ \_\_\_\_\_ List Funding Sources (Self, Loan, Grant, etc.): \_\_\_\_\_

## Eligible Activities

Lighting & Fixture Upgrades  
Insulation & Ventilation  
Renewable Energy (Wind / Solar)

Building Envelope & Air Sealing  
Heating, Cooling & Refrigeration  
Roofing (1/3 up to \$10k max)

Appliances, Motors & Equipment  
Window & Door Replacement  
All Energy Related Upgrades

## Program Information

**\*\*A \$500.00 application fee will be required at the initial inspection & processed when the work is awarded\*\***

**\*\*BIDS SUBMITTED MUST MEET CURRENT STATE FUNDED COMMERCIAL PREVAILING WAGE\*\***

Mail or Email completed application and release form to:



AEOA  
attn: Noah Ningen  
2900 E Beltline STE: #9  
Hibbing, MN 55746  
Phone: 218-780-8061  
Email: noah.ningen@aeoa.org



**AUTHORIZATION TO RELEASE ENERGY USE, BILLING AND PHOTO INFORMATION**

AEOA  
attn: Noah Ningen  
2900 E Beltline STE: #9  
Hibbing, MN 55746  
Phone: 218-780-8061  
Email: noah.ningen@aeoa.org

To: ARROWHEAD ECONOMIC OPPORTUNITY AGENCY  
PLEASE RELEASE ENERGY USE AND BILLING INFORMATION – ELECTRIC AND FUEL TO:  
**NAME OF COMPANY OR ORGANIZATION**  
Arrowhead Economic Opportunity Agency  
Noah Ningen  
FOR PURPOSE OF ASSESSING ENERGY USE AND/OR SAVINGS FOR: ***BUSINESS ENERGY RETROFIT PROGRAM***

**LIST BELOW ALL ACCOUNT(S) ASSOCIATED WITH THE PROPERTY**

UTILITY COMPANY	ACCOUNT NUMBER(S)	SPECIFY FUEL OR ELECTRIC

BY SIGNING THIS RELEASE FORM YOU ALSO HEREBY GRANT PERMISSION FOR AEOA AND IRRRB, TO TAKE AND USE: TESTIMONIALS AND/OR COMMENTS SAID DURING THE BUSINESSES PROJECT AND PHOTOGRAPHS AND/OR DIGITAL IMAGES OF THE BUSINESS/PROJECT FOR USE IN NEWS RELEASES AND/OR EDUCATIONAL MATERIALS. THESE MATERIALS MIGHT INCLUDE PRINTED OR ELECTRONIC PUBLICATIONS, WEB SITES OR OTHER ELECTRONIC COMMUNICATIONS. YOU FURTHER AGREE THAT YOUR BUSINESS NAME AND IDENTITY MAY BE REVEALED IN DESCRIPTIVE TEXT OR COMMENTARY IN CONNECTION WITH THE IMAGE(S). YOU AUTHORIZE THE USE OF THESE IMAGES WITHOUT COMPENSATION. ALL NEGATIVES, PRINTS, DIGITAL REPRODUCTIONS SHALL BE PROPERTY OF AEOA.

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

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

Mailing Address: \_\_\_\_\_ County: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**BER Application**

Revised 09-24-25 Noah Ningen