



**Hawaiian
Electric**

FAST DEMAND RESPONSE PILOT PROGRAM AUDIT APPLICATION

APPLICANT INFORMATION

Customer Name:		
Mailing Address:		
City:	State:	ZIP Code:
Contact Name:	Title:	Phone:
Email Address:		Fax:
HECO Customer #:		Federal Tax ID Number:
Tax Status (check one): <input type="checkbox"/> Individual / Sole Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Exempt/Non Profit <input type="checkbox"/> Other		

PROGRAM CONTACT INFORMATION

Hawaiian Electric Fast DR Pilot Program
P.O. Box 3920
Honolulu, HI 96812
808-94-POWER (947-6937)
dr.heco.com

FACILITY INFORMATION – LOCATION #1

Site Name:		HECO Account Number:
Service Address:	City:	Zip:
Rate Schedule:	Annual Max kW:	Annual kWh:

FACILITY INFORMATION – LOCATION #2

Site Name:		HECO Account Number:
Service Address:	City:	Zip:
Rate Schedule:	Annual Max kW:	Annual kWh:

FACILITY INFORMATION – LOCATION #3

Site Name:		HECO Account Number:
Service Address:	City:	Zip:
Rate Schedule:	Annual Max kW:	Annual kWh:

SIGNATURES

I, _____, am authorized by _____ (“Customer”) to sign this Application. By submitting and signing this Application, I acknowledge that I have reviewed all of the information in this Application, including the Terms and Conditions set forth below and agree to be bound by their terms and conditions.

Signature of Authorized Customer:	Date:
Printed Name:	Title:



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TERMS AND CONDITIONS

1. Hawaiian Electric Company, Inc. (HECO) reserves the right to modify or discontinue the Fast Demand Response Pilot Program (Program), at its discretion, without prior notice, or by order of the Hawaii Public Utilities Commission.
2. I permit HECO employees, contractors and agents (HECO representatives) to enter onto Customer's facilities identified in this Application for purposes of initiating, performing and/or verifying the Fast DR Pilot Program Preliminary Assessment and/or Technical Audit and I agree to provide requested available facility data, drawings and information in my possession as it may pertain to the Preliminary Assessment and/or Technical Audit.
3. For purposes of the Technical Audit, I permit HECO representatives to install and monitor equipment necessary to obtain electric load profiles of Customer's facility equipment as may be required.
4. I acknowledge that all data and analysis provided by HECO is preliminary in nature and performance of the Preliminary Assessment and/or Technical Audit is no guarantee that Customer will be accepted or enrolled in the Program.
5. I acknowledge and agree that HECO shall not be liable, and hereby waive any and all claims against HECO, for any claims, demands, losses, damages, costs, expenses, or liability arising out of or in connection with any act or omission of HECO or any officer, employee, contractor or agent of HECO, in the performance of any activities in connection with the Program, including, without limitation, the initiation and performance of a Preliminary Assessment and/or Technical Audit, however caused, regardless of any strict liability or negligence of HECO, whether active or passive, excepting only such loss, damage, cost, expense, or liability that is caused by the sole negligence or willful misconduct of HECO, its officers or employees.
6. I acknowledge that HECO employees, contractors and agents have been authorized to contact me with regard to the initiation, performance and/or verification of any Preliminary Audit and/or Technical Audit offered by the Program. I understand that any other services, installations, improvements or equipment provided to me by any HECO employee, contractor or agent have not been authorized by HECO, and HECO assumes no responsibility therefore.