



## PHASE COMPLETION REPORT

PowerStream Inc.  
161 Cityview Blvd., Vaughan, ON L4H 0A9

**INSTRUCTIONS:**

After completing each Commissioning Phase you must complete and sign this **PHASE COMPLETION FORM** together with all reports and send to your LDC for approval.

Please complete ALL required fields below.

Check each box below to confirm the required documentation is submitted to the LDC for each Chilled Water System as part of this **PHASE COMPLETION FORM** following completion of each Commissioning Phase:

- the Commissioning Phase Report signed by the Commissioning Agent
- the invoice from the Commissioning Agent clearly stating the amount of fees payable or paid by the Participant for preparing the Commissioning Phase Report
- for the Investigation Phase only, invoices supporting the cost of the Data Acquisition System
- for the Investigation Phase only, the Project M&V Plan
- for the Implementation Phase only, invoices supporting the Eligible Costs (as defined in the Participant Agreement) of implementing the Efficiency Measures with a Project Payback of more than two years

You are responsible for confirming that the LDC has approved you proceeding to the next Commissioning Phase.

**1. Participant Information (required):** (Incentive payment will be made to the Participant ONLY)

LEGAL NAME OF PARTICIPANT \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ON \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

PARTICIPANT AGREEMENT NO. \_\_\_\_\_

**2. Contact Information:**

NAME AND TITLE OF CONTACT \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ON \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

DAY PHONE \_\_\_\_\_ FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

**3. The Commissioning Phases described herein are to be completed in the service area of:**

Name of LDC: \_\_\_\_\_

**4. Facility (where Commissioning Phases are conducted):**

FACILITY NAME (if applicable) \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ON \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

**5. Commissioning Phase Completed:**

Please indicate which phase of the Building Commissioning Project you have completed:

- Phase 1: Scoping Study
- Phase 2: Investigation
- Phase 3: Implementation
- Phase 4: Hand-Off/Completion



Please complete the information in the following boxes (Box 6 through 9) in relation to this completed Commissioning Phase.

**6. Actual Commissioning Phase Timelines:**

ACTUAL COMMISSIONING PHASE START DATE: \_\_\_\_ (DD/MM/YYYY)

ACTUAL COMMISSIONING PHASE COMPLETION DATE: \_\_\_\_ (DD/MM/YYYY)

**7. Actual Commissioning Phase Costs:**

ACTUAL COMMISSIONING PHASE COST (excluding taxes): \$ \_\_\_\_

**8. Third Party Contributions for completed Commissioning Phase**

Have you received any Third Party contributions (i.e., financial incentives associated with the completed Commissioning Phase generally funded by energy ratepayers or taxpayers of the Province of Ontario) for the completed Commissioning Phase through [Name of LDC] or any other public program, other than incentives under EXISTING BUILDING COMMISSIONING?  YES  NO

If yes, please specify the following:

NAME OF PROGRAM(S): \_\_\_\_\_ FUNDING PROVIDER(S): \_\_\_\_

TOTAL FUNDING AMOUNT (THIRD PARTY CONTRIBUTIONS): \$ \_\_\_\_

**9. Other comments** (for example, special site requirements or conditions which LDC should be aware of, etc):

**10. Application to proceed to next Commissioning Phase**

Please indicate which phase of the Building Commissioning Project you would like to complete next (LDC approval is required before proceeding):

- Phase 1: Scoping Study
- Phase 2: Investigation
- Phase 3: Implementation
- Phase 4: Hand-Off/Completion

Please complete the information in the following boxes (Box 11 through 14) in relation to this next Commissioning Phase.

**11. Estimated Commissioning Phase Timelines:**

ESTIMATED COMMISSIONING PHASE START DATE: \_\_\_\_ (DD/MM/YYYY)

ESTIMATED COMMISSIONING PHASE COMPLETION DATE: \_\_\_\_ (DD/MM/YYYY)

**12. Estimated Commissioning Phase Costs:**

ESTIMATED COMMISSIONING PHASE COST (excluding taxes): \$ \_\_\_\_



**13. Third Party Contributions in relation to the next Commissioning Phase**

Have you received any Third Party contributions (i.e., financial incentives associated with this Commissioning Phase generally funded by energy ratepayers or taxpayers of the Province of Ontario) for the Commissioning Phase through [Name of LDC] or any other public program, other than incentives under EXISTING BUILDING COMMISSIONING?       YES     NO

If yes, please specify the following:

NAME OF PROGRAM(S): \_\_\_\_\_

FUNDING PROVIDER(S): \_\_\_\_\_

TOTAL FUNDING AMOUNT (THIRD PARTY CONTRIBUTIONS): \$ \_\_\_\_\_

**14. Other comments** (for example, special site requirements or conditions which Project Evaluators should be aware of, etc):

**15. Participant's Signature(s)**

All information contained in this Phase Completion Report together with all attached documentation is complete true and accurate, and is submitted pursuant to and becomes part of the Participant Agreement.

PARTICIPANT NAME (NAME OF LEGAL ENTITY): \_\_\_\_\_

AUTHORIZED  
SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

I/We have authority to bind the Participant.

AUTHORIZED  
SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

I/We have authority to bind the Participant.

*\* please print and send an original copy with signatures to [the LDC]*



**16. For LDC Use Only**

Participant Agreement Number: \_\_\_\_\_

**APPLICATION APPROVAL**

APPROVED ESTIMATED PARTICIPANT INCENTIVES:

DATE APPLICATION APPROVED (MM/DD/YYYY):

APPROVED BY:

**PARTICIPANT INCENTIVE PAYMENT APPROVAL**

ESTIMATED PARTICIPANT INCENTIVES PAYMENT AMOUNT:

(LDC NAME)

AUTHORIZED SIGNATURE

DATE

NAME

TITLE

AUTHORIZED SIGNATURE

DATE

NAME

TITLE