

Feasibility Study Co-funding Application



COMPANY DETAILS

Company name	LEGAL ENTITY NAME		
Physical address	STREET NUMBER	STREET NAME	
	SUBURB	TOWN / CITY	POSTCODE
	PO BOX		
Registered office postal address (if different from above)	SUBURB	TOWN / CITY	POSTCODE
Energy spend (annual)	\$		

CONTACT PERSON (PROJECT CO-ORDINATOR)

Full name	FIRST NAME	LAST NAME
Position		
Email address		
Contact numbers	PHONE NUMBER	FAX NUMBER

INVESTMENT CRITERION

State the company's investment criterion in terms of simple payback period required for commitment to the project being studied.

Years or months

FEASIBILITY STUDY INFORMATION

Total price quoted for study (ex GST)	\$
Amount of co-funding assistance applied for (ex GST)	\$
Date co-funding is expected to be claimed from EECA (completion of study)	<input type="text" value="dd/mm/yyyy"/>

If any other form of government assistance exists or is to be sought for the study, please specify it here.

CONSULTANT DETAILS (PARTY PERFORMING THE STUDY)

Name of consultant		
Consultant's company name		
Email address		
Contact numbers	PHONE NUMBER	FAX NUMBER

Please attach a copy of the consultant's proposal. This is to include the scope of work and total price.

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I confirm that the information in this application is true and accurate, and acknowledge that accepting EECA Feasibility Study Co-funding funding could result in the business committing to implementing the findings.

Full name (please print)

FIRST NAME	LAST NAME
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Position

Signature

Date

Send this application with a copy of the consultant's proposal to:

Feasibility Co-fundings, EECA Business,
PO Box 388, Wellington 6011

or email business@eeca.govt.nz

For further information: Contact EECA on **0800 358 676**

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