

**ON-FARM BIOGAS RECOVERY FACILITY
INCENTIVE PAYMENT APPLICATION
January 1, 2002 through March 31, 2002**

Applicant Name

Address/ P.O. Box #

City/State/Zip Code

Location of the anaerobic digester system (biogas recovery facility): _____

- Is the biogas recovery facility located at the site of an agricultural operation? Yes No
- Do you own the biogas recovery facility? Yes No
- Do you own or rent the land where the facility is located? Yes No
- Date on which the facility began generating electricity: _____
- Nameplate wattage rating of the facility: _____
- Number of kilowatt hours of electricity generated by the facility from January 1, 2002 through March 31, 2002: _____

Incentive payment = \$.015 X _____ kilowatt hours = \$ _____

I certify to the best of my knowledge and belief that this application is correct.

Signature Print Name Date Daytime Phone Number

***Mail to:*
Renewable Energy Production Incentive
Minnesota Department of Commerce
85 7th Place East, Suite 500
St. Paul, Minnesota 55101-2198**

Attn: Jeremy de Fiebre