

# Long Island Power Authority

## ENERGY AUDIT REQUEST

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_  
(Include dba - if applicable)

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Company Address: \_\_\_\_\_  
(Being audited)

Zip Code: \_\_\_\_\_

Account #'s: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Type of Business: \_\_\_\_\_

Square Footage of Building: \_\_\_\_\_

Type of Audit Being Requested:

\_\_\_\_\_ Commercial/Industrial

\_\_\_\_\_ Industrial Process

\_\_\_\_\_ Audit Update

\_\_\_\_\_ Debrief

\_\_\_\_\_ Energy Consultation

\_\_\_\_\_ Business Develop Rate Customer

\_\_\_\_\_ RCM

\_\_\_\_\_ SC-13 Customer

Reason for Request: \_\_\_\_\_

\_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Audit Requested by: \_\_\_\_\_ Phone #: \_\_\_\_\_

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