



AgriPower

INCORPORATED

SHORT FORM PROJECT QUESTIONNAIRE

The basic information provided by you in this questionnaire is intended to permit AgriPower to make an initial recommendation to you about which of our Systems (size, output, configuration and price) may be suitable for your project and enable us to promptly assist you to the maximum extent possible. Please provide us with all of the information that you believe will help us to understand and evaluate your project and make this recommendation. **All information provided by you is and will remain confidential. Please try to answer all questions as fully as possible (and please attach additional sheets as necessary).**

IMPORTANT NOTE: [If any of the material you intend to use as fuel consists of Municipal Solid Waste \(“MSW”\) it is important that you also include a *detailed* Waste Characterization Study.](#)

#	QUESTIONS	ANSWERS AND COMMENTS
1	(A) WHERE WILL YOUR PROJECT BE LOCATED? (B) IF YOU REQUIRE POWER, WILL YOUR PROJECT BE ON-GRID OR OFF-GRID?	(A) _____ (B) _____
2	HOW MANY TONS OF BIOMASS WASTE (WOOD, CARDBOARD, PAPER, FOREST RESIDUALS AND AGRICULTURAL WASTE) AND PLASTIC WASTE ARE GENERATED AT YOUR SITE ON A MONTHLY BASIS?	BIOMASS: _____ PLASTIC: _____
3	HOW IS THIS WASTE CURRENTLY DISPOSED OF?	
4	(A) IF YOU PAY TO DISPOSE OF THIS WASTE, HOW MUCH PER TON DOES IT COST? (B) IF YOU SELL YOUR WASTE, HOW MUCH PER TON ARE YOU PAID?	(A) \$ _____ PER TON (B) \$ _____ PER TON
5	(A) COULD YOU BE PAID A TIPPING FEE FROM OTHER NEARBY WASTE PRODUCERS IF YOU COULD CLEANLY DISPOSE OF THEIR BIOMASS AND PLASTIC WASTE? (B) IF YES, HOW MUCH PER TON COULD YOU BE PAID? (C) IF YES, HOW MANY TONS PER MONTH COULD YOU OBTAIN?	(A) { } YES { } NO (B) \$ _____ PER TON (C) _____ TONS PER MONTH
6	DO YOU CURRENTLY GENERATE HEAT FOR HEATING BUILDINGS, OR TO PRODUCE HOT WATER OR STEAM, OR TO HEAT OR DRY VARIOUS PRODUCTS? IF SO, CHECK ALL FUELS THAT APPLY.	{ } PROPANE { } DIESEL { } FUEL OIL { } NATURAL GAS { } OTHER (SPECIFY): _____
7	HOW MUCH DO YOU CURRENTLY SPEND PER GALLON OF FUEL OR MCF?	\$ _____
8	(A) HOW MANY MILLIONS OF BTU'S OF HEAT DO YOU USE IN AN AVERAGE DAY? (B) WHAT IS YOUR HIGHEST USAGE AMOUNT PER HOUR? (C) WHAT IS YOUR LOWEST USAGE AMOUNT PER HOUR?	(A) _____ MM BTU (B) HIGH: _____ MM BTU (C) LOW: _____ MM BTU
9	(A) HOW MANY KILOWATTS OF ELECTRICITY DO YOU USE IN AN AVERAGE HOUR? (B) WHAT IS YOUR HIGHEST USAGE AMOUNT PER HOUR? (C) WHAT IS YOUR LOWEST USAGE AMOUNT PER HOUR?	(A) _____ kW (B) HIGH: _____ kW (C) LOW: _____ kW
10	HOW MUCH DO YOU CURRENTLY SPEND PER KILOWATT INCLUDING DELIVERY CHARGES AND TAXES?	\$ _____ kW

11	(A) DO YOU USE AIR CONDITIONING OR REFRIGERATION ON A DAILY BASIS? (B) IF YES, WHAT SIZE AND TYPE OF UNITS ARE IN USE? (C) WHAT IS THE SIZE AND HEIGHT OF THE BUILDING?	(A) _____ (B) _____ SIZE _____ TYPE (C) _____ SIZE _____ HEIGHT
12	(A) DO YOU HAVE ROOM TO LOCATE A WASTE-TO-ENERGY SYSTEM REQUIRING A 50' x 100' BUILDING WITH A 25' CEILING HEIGHT TO HOUSE IT AT YOUR SITE? (B) DO YOU HAVE AN EXISTING BUILDING WITH SUFFICIENT SPACE AND HEIGHT? (C) HOW FAR IS YOUR BUILDING FROM YOUR HEATING, HOT WATER, COOLING AND ELECTRICAL EQUIPMENT?	(A) _____ (B) _____ (C) _____
13	DO YOU INTEND TO USE THE HEAT AND/OR POWER THE SYSTEM PRODUCES FOR YOUR OWN OPERATIONS?	{ } YES { } NO
14	DO YOU INTEND TO BECOME AN INDEPENDENT POWER PRODUCER ("IPP") AND SELL THE ELECTRIC POWER IN ACCORDANCE WITH A POWER PURCHASE AGREEMENT ("PPA")?	{ } YES { } NO
15	IF SO, FOR HOW MUCH PER KILOWATT?	\$ _____
16	WHAT IS YOUR TIMELINE FOR POSSIBLY HAVING A SYSTEM INSTALLED?	{ } 2018 { } 2019 { } 2020 { } 2021 { } NOT SURE

YOUR COMPANY INFORMATION (Items Marked With * Are Required)

Company Name*: _____

Street Address*: _____

City, State, Country, Postal Code*: _____

Main Telephone*: () _____ Fax*: () _____ Mobile Telephone*: () _____

Website*: _____ Year Established: _____

Name and Title of Person Completing this Project Questionnaire*: _____

Date*: _____ E-Mail Address*: _____

Company's Primary Business: _____

ADDITIONAL INFORMATION YOU THINK WILL HELP US UNDERSTAND YOUR PROJECT. PLEASE USE ADDITIONAL SHEETS IF NECESSARY.

FOR ASSISTANCE, OR FURTHER INFORMATION, PLEASE CONTACT (AND PLEASE SCAN AND RETURN THIS FORM TO):

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