



NEW EQUIPMENT

2026 Compressed Air Incentive



APPLICATION INSTRUCTIONS

Fill out Steps 1-3 and submit to your electric utility provider. **Do not sign Steps 5-6 until instructed by your utility provider.**

STEP 1 CUSTOMER INFORMATION

Select your electric utility: ☐ Eversource ☐ Liberty ☐ NH Electric Co-op ☐ Unitil Date: _____

Electric Account #: _____ Natural Gas Account #: _____

Company Name: _____ Contact Person: _____

Phone Number: _____ Contact Email: _____

Installation Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

STEP 2 CONTRACTOR INFORMATION (if self-installed leave blank)

Contractor Company (if applicable): _____ Contact Person: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Contact Phone: _____ Contact Email: _____

STEP 3 PAYEE INFORMATION

Check Payable to: ☐ Customer ☐ Contractor ☐ Other Payment To: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

LIBERTY CUSTOMERS ONLY – Signature (for payment to Contractor/Other): _____

STEP 4 RETURN APPLICATION TO UTILITY REPRESENTATIVE

Send to your utility representative or email to your utility here:

Eversource: efficiencynh@eversource.com

Liberty: nhsaves@libertyutilities.com

New Hampshire Electric Co-op: solutions@nhec.com

Unitil: efficiency@unitil.com

STEP 5 PRE APPROVAL OFFER (DO NOT SIGN UNTIL INSTRUCTED BY YOUR UTILITY PARTNER)

STOP Once you have received Utility Pre-approval notification, sign below accepting incentive offer, payment arrangement, and Program Terms and Conditions.

Utility Signature: _____ Date: _____

Amount Of Incentive: _____ Valid Through: _____

CUSTOMER SIGNATURE: _____ Date: _____

STEP 6 PROJECT COMPLETION (DO NOT SIGN UNTIL INSTRUCTED BY YOUR UTILITY PARTNER)

STOP Sign below to indicate that project is completed. Send final signed application to Utility.

Final Incentive calculated based on 'as-installed' conditions.

Utility Signature: _____ Date: _____

CUSTOMER SIGNATURE: _____ Date: _____

Final Project Cost: _____ Final Incentive Amount: _____

Powered by:

EVERSOURCE



January 1, 2026

COMPRESSED AIR MEASURE INFORMATION

Table 1: Air Compressor Incentives

Horespower	Incentive per HP Variable Speed
=or>15 hp and <25 hp	\$200/hp
=or>25 hp and <50 hp	\$150/hp
=or>50 hp and <75 hp	\$100/hp

Table 2: Refrigerated Dryer Incentives

Incentive per CFM Cycling & VSD Dryers	\$5.25
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Table 3: Storage Incentives

Incentive per Gallon	\$2.75
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Table 4: Zero-Loss Condensate Drain Incentives

Incentive per Drain (limit 3 per facility)	\$125
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Table 5: Low Pressure Drop Filter Incentives

Incentive per Filter (limit 3 per facility)	\$0.80 / scfm
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Table 6: Engineered Air Nozzles

Incentive per Nozzle: 1/8" or 1/4"	\$20 / ea
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Table 7: Compressed Air System Incentive Calculations

Air Compressor Description (Manufacturer & Model)	Rated HP & CFM	Operating PSI	Storage Requirement (Gallons)	Existing Storage (Gallons)	New Added Storage (Gallons)	Annual Operating Hours	Incentive Dollar Per HP	Requested Incentive Dollars
Example: ABC Company VSD 50 HP Model: #123	50 HP 220 cfm	110	440	240	240	2,000	\$100	\$5,000

Table 8: Refrigerated Dryer Incentive Calculations

Refrigerated Dryer Manufacturer	Model Number	Dryer Type Cycling or VSD	Annual Operating Hours	Primary Storage	Rated CFM	Incentive Dollar per CFM	Requested Incentive Dollars
						\$5.25	

Table 9: Compressor Storage Incentive Calculations

Air Compressor CFM	(A) Required Storage in Gallons	(B) Existing Storage in Gallons	(C) = (A-B) Additional Storage Requirement in Gallons	New Added Storage in Gallons	Incentive per Gallon	Requested Incentive Dollars
					\$2.75	

Table 10: Zero-Loss Condensate Drain Incentive Calculations

Manufacturer	Annual Operating Hours	Operating PSI	Inlet/Outlet Connection (inch)	Quantity of Installed Drains	Incentive per Drain	Requested Incentive Dollars
					\$125.00	

Table 11: Low Pressure Drop Filter Incentive Calculations

Manufacturer	Annual Operating Hours	Existing Systems PSI	Proposed System PSI	Quantity of Installed Filters	Filter Size (scfm)	Incentive per scfm	Requested Incentive Dollars
						\$0.80	

Table 12: Engineered Nozzle Calculations

Manufacturer	Quantity	Type (1/8", 1/4")	Annual Operating Hours	Operating PSI	SCFM Existing	SCFM Proposed	Incentive per Nozzle	Requested Incentive Dollars
							\$20.00	
TOTAL REQUESTED INCENTIVE								

COMPRESSED AIR SURVEY DOCUMENT

The following information is to be completed by the equipment vendor in coordination with the customer. Please describe the major components of our existing facility compressor and compressed air system.

Existing Compressor (Manufacturer & Model)	Rated HP & CFM	Operating PSI	Control Type*	Existing Primary Storage (Gallons)	Operating Hours/Wk	Compressor Loading (% Rated CFM)	Original Install Date	Status After New Install**
Example: XYZ Company Model: #ABCDEF	50 HP	110	Mod	100	90	10hr @90% 30hr @30% 50hr @60%	1998	Removed
	220 cfm							
1.	HP							
	cfm							
2.								
3.								

*Modulating (Mod), Load/No-Load (L/NL), Variable Speed Drive (VSD), Variable Displacement (VD)

**Removed; Backup; Lead/Lag

Note: When installing a new compressor and the existing compressor becomes lead or lag, the project will not qualify for an incentive as it will not be a single compressor system.

COMPRESSED AIR SYSTEM OPERATIONAL ISSUES

How many shifts _____ and how does production vary? _____

What is the current system pressure at the furthest point from the compressor? _____ psi

What is the minimum pressure required for proper equipment operation? _____ psi

Any significnat operational problems

- Inadequate pressure ☐ Yes ☐ No
- Moisture or air quality ☐ Yes ☐ No
- Production problemsW due to pressure fluctatons ☐ Yes ☐ No
- Other _____

Compressor Cooling Medium (air or water) _____

Number of Condensate Drains _____ Type _____ Timer Style Drain Setting _____

Dryer Type:

- ☐ Desiccant ☐ Refrigerant ☐ None

Dryer Capacity (CFM) _____

How many gallons of storage listed above are from tank mounted compressors? _____

Date of Last Leak Survey if Any _____

Would you like additional compressed air efficiency services?

- Compressed Air Challenge technical Training ☐ Yes ☐ No
- Technical assistance with a more complex compressed air project ☐ Yes ☐ No
- Leak assessment assistance ☐ Yes ☐ No

For Compressed Air Challenge technical and training information, please visit: www.compressedairchallenge.org

Compressed Air New Equipment

Instructions for completing the Compressed Air Measure Information worksheet

General Notes:

1. A vendor proposal is required for an Incentive and must include the Compressed Air Survey Document found on page three in these instructions.
2. The applicable compressed air incentive section must be completed on page 2 and the Incentive must be approved prior to purchasing and installing the equipment.
3. Compressors under 15 HP are not eligible for Incentives.
4. Compressors over 75 HP are not eligible for a prescriptive Incentive but may be eligible for a Custom Incentive.
5. Invoices will be required for payment of Incentives.
6. The Incentive, in conjunction with all other sources of funding, cannot exceed the total project cost.

Eligibility Requirements:

To be eligible for Incentives, the equipment must meet the following requirements:

COMPRESSORS

1. Nameplate horsepower of compressors must be equal to or greater than 15 HP and less than or equal to 75HP. Compressors with manufacturers ratings only in kilowatts will be assumed to have horsepower ratings equal to Compressor kW rating (motor only) / 0.746.
2. Existing compressor being replaced must use modulating control. Compressors with other control methods must use the Custom Incentive process.
3. Prescriptive Incentives are only applicable to single compressor systems. Multiple compressor systems of any size that serve a common distribution system may submit applications as a Custom Incentive. Projects that have multiple and comprehensive measures shall be processed as a Custom Incentive.
4. Prescriptive Incentives are only applicable to compressors with an operating pressure of 145 psi or below. Compressors with higher operating pressures shall be processed as a Custom Incentive.
5. Prescriptive Incentives are only applicable to oil flooded Rotary Screw Compressors. Other compressor types may be eligible for an Incentive as a Custom Incentive project.
6. Compressor control shall be Variable Speed Drive (VSD).
7. Compressors must operate a minimum of 2000 hours a year.
8. Air compressors with VSDs must have as a minimum a 3% impedance series reactor in its AC power input connection.

STORAGE

1. Primary storage is required on all compressors receiving incentives.
2. Incentives are only available for air storage tank(s) in association with new compressor equipment installations.

Post-Installation:

Utility Representative must verify that:

1. The single compressor has been installed and operating as follows:
 - a. System operating pressure _____ psi
 - b. Original primary storage capacity _____ gallons
 - c. Additional primary storage capacity _____ gallons
 - d. Total primary storage capacity _____ gallons
 - e. Final gallons per compressor CFM _____
 - f. Verify compressor manufacturer, compressor model, horsepower, and rated CFM
2. The compressor matches the Compressed Air Measure Information. If the equipment has changed from what was approved for the initial Incentive offer, the substituted equipment specifications must be submitted and reviewed by the utility to verify compliance with technical requirements and approved before an Incentive is considered.
3. The invoice or proof of payment has been submitted.
4. The Utility Representative & Customer have signed & dated the post installation inspection block in Section 6 on the first page of the form.