

For Office Use Only:

Contract # _____



Order Form:

Los Angeles Existing Buildings Energy and Water Efficiency Ordinance (EBEWE)

Name of Contracting Party (Building Owner): _____

Type of Corporate Entity:

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> California | <input type="checkbox"/> LLP |
| <input type="checkbox"/> Other State _____ | <input type="checkbox"/> LLC |
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Individual |
| <input type="checkbox"/> Other _____ | |

Contact Name/Title: _____

Contact Phone: _____

Contact Email: _____

Building Address: _____

Assessor Identification Number (aka APN): _____

LA City Building ID (refer to LADBS letter): _____

Please check the proof of ownership available for EBEWE compliance (1 of 3 Required):

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Current Property Tax Statement | <input type="checkbox"/> Title Report |
| <input type="checkbox"/> Current Deed of Trust | |

Please check meter type and enter quantity that exists at the building:

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Electric: _____ | <input type="checkbox"/> Gas: _____ |
| <input type="checkbox"/> Water: _____ | |

Gross Floor Area of the Building: _____ Year Built: _____

Type of Building Use (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Commercial/Office | <input type="checkbox"/> Medical Office |
| <input type="checkbox"/> Multi-Family | <input type="checkbox"/> Manufacturing/Industrial |
| <input type="checkbox"/> Distribution/Warehouse | <input type="checkbox"/> Supermarket |
| <input type="checkbox"/> Retail | <input type="checkbox"/> Hotel |
| <input type="checkbox"/> Self-storage | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Other _____ | |

PLEASE COMPLETE THIS FORM AND EMAIL -OR- FAX TO THE CONTACTS BELOW

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