



KHC inc.

Ken Hostetler Construction, Inc.

Project Information

Date: _____

Client/Owner: _____

First: _____ Last: _____

Company: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax: _____

Email: _____

Billing Address

Project Location

Street: _____ Street: _____

City: _____ City: _____

State: _____ State: _____

Zip: _____ Zip: _____

Site Information

Describe potential turbine location including terrain, grade, access and distance to nearest electrical panel: _____

Describe wind quality at turbine's location (estimate average speed, direction, sporadic, constant, etc?): _____

Estimate average monthly electrical bill: _____ Electric Utility Provider: _____

Estimate previous twelve months energy consumption: _____

Jan: _____ Feb: _____ Mar: _____ Apr: _____ May: _____

June: _____ July: _____ Aug: _____ Sep: _____ Oct: _____

Nov: _____ Dec: _____

Financial Information

Do you have a business or farm located on the same property as the potential turbine?

Is your state tax liability greater than \$8,000 annually?

What are your expectations of energy savings annually?

Other comments or pertinent information?

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Licensed Bonded Insured
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