Application No: \_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CLP ECO BUILDING FUND**  **energy efficiency projects**  **COMPLETION REPORT**  *(Revision Date: 22 February 2022)* | | | | | | | | | | | |
| **Project Details** | Application No. | | : |  | | | | | | | |
|  |  | | | | | | | | | | |
|  | Name of Building | | : |  | | | | | | | |
|  |  | | | | | | | | | | |
|  | Amount of Approved Fund | | HK$ |  | | | | | | | |
|  |  | | | | | | | | | | |
|  | Actual Date of Commencement and Completion of the Project : | | | | | | | | | | |
|  | Actual Commencement Date | | | | | Actual Completion Date | | | | | |
|  | | | | |  | | | | | |
|  |  | | | | | | | | | | |
|  | Revenue Generated from the Project | | : | □ | No | | | □ | Yes. HK$ | |  |
|  |  | | | | | | | | | | |
| **Certification by the Recipient Organisation / Recipient** | Dear Sir/Madam,  I certify that this report on completion of installation and invoices are correct and that the goods and services purchased and acquired are necessary for the activities of the project and that the prices are fair and reasonable.  □ I declare to confirm that the Qualified Service Provider (QSP) has reviewed and agreed the correctness of the information filled in this completion report (applicable only if QSP is engaged). | | | | | | | | | | |
|  | Recipient Organisation | | : |  | | | | | | | |
|  | Person-in-charge | | : |  | | | | | | | |
|  | Position held | | : |  | | | | | | | |
|  | Signature | | : |  | | | | | | | |
|  | Telephone No.: |  | | | | | Fax No.: | | |  | |
|  | E-mail address (if any) | | : |  | | | | | | | |
|  | Official Chop of Organisation | | : |  | | | | | | | |
| Date of Report | | : |  | | | | | | | |

Application No: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Please complete the installation summary and submit it to CLP Eco Building Fund after completion of a Project and before applying for final disbursement of fund.**

1. Retrofitting Project – Air-conditioning Installations

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Type of Work | Installed Location | Original Installation | | | New Installation | | |
| Equipment Name | Rated Capacity (kW) | Qty | Equipment Name | Rated Capacity (kW) | Qty |
| Air-conditioning |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

2. Retrofitting Project – Lighting, Electrical, Lift & Escalator Installations, Retro-commissioning (RCx) Project, and Implementation of Smart / IT Technologies Project. Please indicate the type of work.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Type of Work  (Lighting, Electrical, Lift, RCx, Smart / IT Technologies) | Installed Location | Original Installation | | | New Installation | | |
| Equipment Name | Rated Power (kW) | Qty | Equipment Name | Rated Power (kW) | Qty |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
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