



CERTIFIED BUILDING COMMISSIONING FIRM (CBCF)

Application

Note: This form to be used only by a firm who employ's at least one CBCP who is responsible for overseeing all commissioning activities and has worked on or completed at least three commissioning projects.

Please remit with \$1,500.00 processing fee to:

The Association of Energy Engineers
CBCF Certification
4025 Pleasantdale Road, Ste. 420
Atlanta, GA 30340-4264

PAYMENT METHOD:

- Check Enclosed
- Credit Card (Visa/MC/AMEX)
- Account #: _____
- Expiration Date: _____
- Signature: _____

CBCP: Last Name First MI

Company Name

Mailing Address

City State Zip Code
() ()

Phone Number Fax Number

CBCP # (REQUIRED or this application will not be processed) Email Address

****Please submit this application form along with the attached Project Summary Sheet and Client Reference Forms. Incomplete applications will not be processed.**

I agree that AEE has the right to audit and verify successful completion of the projects provided. I certify that all the information contained in this application are correct and accurate to the best of my knowledge and hold harmless the Association of Energy Engineers (AEE), its contractors, the Certification Board, and those affiliated with AEE and its programs.

Applicant Signature: _____ Date: _____

COMMISSIONING PROJECT SUMMARY SHEET

Please describe at least 3 commissioning projects, existing building or new construction, that the firm has been involved in or completed.

Firm Name: _____

CBCP Signature: _____

Project Name & Description	Description of Commissioning Activities Performed	New or Existing Construction	Client's Name, Address and Phone Number **also provide Client Reference Form	Type of Facility	Square Footage of Facility	Project Cost	Date of Completion
1.							
2.							
3.							
4.							

APPLICANT FILL IN (type or print)

Project Name: _____ Date: _____
Firm Name: _____
Address: _____
City: _____ State: _____ Zip: _____

LETTER OF CLIENT REFERENCE

The following information verifies the Contractor/Consultant and duties of the above applicant for AEE Certification.

Client: _____ Telephone: _____
Company: _____
Address: _____
City: _____ State: _____ Zip: _____

The above contractor/consultant has provided service(s) to our company from:
_____ to _____

Please describe fully the commissioning activities performed by the applicant. Attach descriptions if necessary to answer fully.

To the best of my knowledge, I hereby attest that the above information is true and correct.
Name of person supplying information: _____
(please type or print)
Official Title of Respondent: _____
Signature: _____ Date: _____

**Return to: AEE Certification Board – CBCF
4025 Pleasantdale Road, Suite 420
Atlanta, GA 30340**