

Commercial Grant Application

Maryland Community Solar Grant Program -FY18

The Commercial Grant Application and supporting documentation must be submitted to the Maryland Energy Administration after the subscription agreement has been signed by both the subscriber and the subscription organization. **Payment will occur only after the community solar system is operational, but before June 1, 2019**.

Checklist for Applications:
Grant Applicant (the Commercial subscriber) information and subscription information has been filled out completely, signed and dated.
☐ Include a valid email (if possible) and telephone number for communication purposes. This information will be invaluable to help MEA contact you in the event you move before the project is completed. MEA will not distribute your email or telephone number to any outside party or use it for any purpose other than grant status communication.
☐ Review the Commercial Community Solar Grant Program Terms and Conditions. This documentis included at the end of the application.
Required Supporting Documents from the Applicant:
☐ Show proof of business address: State Department of Assessment and Taxation printout or electric bill showing a Maryland Address are normally acceptable.
☐ Show proof of payment in full (invoice showing a zero balance, an invoice marked "Paid in Full", or other documentation showing the subscription has been fully paid for). This item does not include annual O&M payments.
☐ Show proof of your Utility (ex. Copy of your monthly electric bill).

Please Mail the original Application Form (including Tax ID Number) and Supporting Documentation to:

Maryland Energy Administration Attn: Residential Community Solar Grant Program 1800 Washington Blvd. Suite 755 Baltimore, MD 21230

Please Mail a Copy of the Application Form (without Tax ID Number) to the Subscriber Organization and Keep a Copy for Your Files

Questions about the application or Community Solar Grant Program may be directed to: David Comis, E: david.comis@maryland.gov, T: 410-537-4064



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A. Applicant Information

ant	Point of Contact (First Name)	Point of Contact (Last Name)				
Grant Applicant	Point of Contact (Phone Number)		Point of Contact (Title)				
Grant,	Name of Business		Point of Contact (Email)				
SSS	Business Address		Suite/Apt/Bld				
y Address	City	Zip	Maryland County				
Mailing	Congressional District		Legislative District				
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If you do not know your Congressional or Maryland Legislative District look it up here: http://mdelect.net

B.Electricity Usage

Annual Electricity Usage in kWh/year	Servicing Electric Utility to Your Business

C1. Project Information (Received from Subscriber Organization)

Subscriber Organization Number		Subscriber Organization Name				
Project Address		Suite/Apt/Bld				
City	Zip	Maryland County				

C2. Solar Photovoltaic (PV) System Information (Get information from Subscriber Organization)

System Capacity (kW DC)	Grant Request (\$) *	Kilowatts subscribed

^{*}The Commercial incentive rate is set as \$100/kW, with a size limit of the lesser of 100% of of annual energy use (kWh) divided by 1250 kWh/kW, or 200kW.



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D . ⁷	Terms	and	Conditions	Com	pliance
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☐ I hereby affirm that I have read and agree to the terms outlined in the Commercial Grant Terms and Conditions.

E. Applicant Signature

I affirm under penalties of law that the contents of the foregoing application are true to the best of my knowledge, information and belief.

Print Name (required)	Tax ID. No.**							
			OFFICIAL USE ONLY					
 Date								
Date	SIGN BELOW IN ORIGINAL INK		AGENCY	FUND		PCA	SUB-OBJ	FY
	Your application is not valid unless signed.							
Χ			SSN				AMOUNT	
Original Ink Signature								
	OFFICIAL USE ONLY		PM INIT	MEA INV	/OICI	NUMBER	DATE RE	ECEIVED
	DATE:POSTED:							
	FUSIED		MEA APPROVAL FI		FINANC	NCIAL ADM APPROVAL		

^{**} Tax ID Number <u>must</u> be on the MEA copy but is <u>not</u> required for the Subscriber Organization copy.