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<b>3. Architect, engineer, vendor or contractor for facility</b>	
Firm name of architect, engineer, vendor or contractor:	
Address:	Phone:
City/state/zip:	
Contact person:	E-mail:
<b>4. Public body competitive bidding</b>	
Are you a Public Body as defined in ORS 174.108 through ORS 174.118 ? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, describe the competitive bidding process you used to contract with the firm above.	
<b>5. Pass-through Option</b>	
<input type="checkbox"/> Yes, I want to use the Pass-through Option	
The Pass-through Option will allow you to transfer your tax credit eligibility to another business or individual (a pass-through partner) in exchange for a lump-sum payment. The payment amount is calculated using the pass-through rate. To use the Pass-through Option, check the Yes box. There may be tax implications to using the Pass-through Option, consult with your tax preparer.	
<b>6. Projected start and completion dates</b> The projected start date is when you expect to excavate or begin actual physical construction, see OAR 330-090-0110(30)(g). These dates must be in month, day, year format; for example May 8, 2011	
Projected start date:	Projected completion date:

**7. Resource supply—** (Check one.) Attach data that shows the resource can be used for the life of the facility. Following are requirements by resource type.

<input type="checkbox"/> Biomass	Data that show the fuel characteristics and that the resource is available in an amount that exceeds the facility's fuel needs. <b>In addition, attach appendix 1.</b>
<input type="checkbox"/> Biomass Infrastructure	Data that show the feedstock characteristics and that the resource is available in an amount that meets the facility's needs. <b>In addition, attach appendix 2.</b>
<input type="checkbox"/> Geothermal (Not a heat pump system)	A plot of well head temperature versus time at the design flow rate and steady state temperature. <b>In addition, attach appendix 1.</b>
<input type="checkbox"/> Hydro	Data that show that the head and average monthly flow of the source can provide energy at a level that meets or exceeds facility requirements. That applicant has appropriate water rights related to this flow. <b>In addition, attach appendix 1.</b>
<input type="checkbox"/> Solar Photovoltaic	Data that show that structure's life expectancy or durability will not be reduced by installing this facility. <b>In addition, attach appendix 3.</b>
<input type="checkbox"/> Solar Thermal	Data that show that the amount of solar energy available to the facility site and the capacity of the storage system exceed the facility's energy requirements. <b>In addition, attach appendix 4.</b>
<input type="checkbox"/> Wind	The average monthly wind speed for 12 months. Measure wind speed at the hub height of a horizontal axis wind machine, or measure wind speed at two heights, one at least 10 meters above ground. <b>In addition, attach appendix 1.</b>

**8. Facility description**

A. **Describe the facility briefly.** If your description is longer than space provided, please use a separate attached sheet.

**9. Facility Readiness**

**Explain how your facility will meet the program sunset deadline.** See ORS 315.357(1). Please attach a project schedule with key milestones identified. If your description is longer than space provided, please use a separate attached sheet.

**10. Jobs Creation Estimate**

Type of Job	Retained	Created	Contracted	Hours
Example: Electrician			1	150

**Describe how you arrived at these estimates:**

**11. Business Plan**

**Summarize your business plan.** Please attach a copy of your business plan, if applicable.

**12. Other Renewable and Conservation Activities**

**Please describe the other renewable and conservation activities you have in process or completed in conjunction with this renewable facility.** If applicable, please provide the completion date, BETC application number(s) or other appropriate information.

**13. Connection and Infrastructure**

**Please describe how your facility will connect to infrastructure and if that infrastructure is preexisting.**

**14. Facility Life Span**

**What is the expected life span of your facility?**

**Describe how you arrived at this estimate:**

**15. Facility Owner Preliminary Statement**

1. I understand that Oregon Department of Energy approval and certification of my facility is for tax credit purposes only. The Oregon Department of Energy does not guarantee or in any way ensure the performance of any equipment, the quality of any system or the reliability of any dealer.
2. I agree that the facility will comply with all local, state and federal requirements. I will obtain all necessary permits.
3. I will permit the Oregon Department of Energy or its agents to inspect the facility at its discretion to make sure the facility qualifies for the tax credit. I understand that if I give false information about the facility, or if I refuse to permit the Oregon Department of Energy to inspect the facility, I will not get the tax credit.
4. I understand that this tax credit application is a public record and that Oregon Department of Energy may be required by law to disclose information in this tax credit application to the public on request. I have marked any information that I request be kept confidential. I understand that marking information does not guarantee that it will be kept confidential and that the Director of the Oregon Department of Energy will make any decisions regarding public disclosure of information contained in this application in accordance with the Oregon Public Records Law.
5. I understand that the Oregon Department of Energy does not endorse any company that requests information on this application and does not sell information as a mailing list.
6. I hereby (a) release the State of Oregon and its commissions, agencies, officers, employees, contractors, and agents, and agree to defend and indemnify the foregoing from and against any claims, demands, or costs (including attorney and expert witness fees at trial and on appeal) arising from or in any way related to claims made by applicant or any parent or subsidiary of applicant and which are related in any way to the Oregon Department of Energy's issuance or failure to issue any pre-certification or final certification to applicant for a Business Energy Tax Credit, or the inability to obtain a Business Energy Tax Credit; and (b) agree to reimburse the State of Oregon for any damages, costs and expenses, including, but not limited to attorney fees and reasonable expenses for agency staff and in-house legal counsel incurred as a result of, or arising from or in any way related to the applicant obtaining certification for a Business Energy Tax Credit by fraud or misrepresentation or failing to construct or operate the facility in compliance with the plans, specifications and procedures in any certification to applicant for a Business Energy Tax Credit. Agreement to the terms of this paragraph by applicants that are agencies of the State of Oregon is subject to the limitations of Article XI, section 7 of the Oregon Constitution and the Oregon Tort Claims Act (ORS 30.260 through 30.300).
7. I understand that the sum of all financial incentives and the tax credit can not exceed the total eligible facility cost.
8. I have enclosed a check to the Oregon Department of Energy or will pay by Visa or MasterCard for the review charge.
9. I verify that the facility owner does not restrict membership, sales, or services on the basis of race, color, creed, religion, national origin, sexual preference or gender.
10. I have completed this form to the best of my knowledge and have not altered any of these statements.
11. I certify that I am the facility owner or the authorized agent.

By signing this Statement, I acknowledge that I have read and agree with the terms and conditions of the Facility Owner Preliminary Certification Statement and have not altered any part of the Statement.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_