

## Oregon Department of Energy Energy Incentives Program Renewable Energy Development – Amendment Application

| For Office Use Only   |  |  |          |       |  |       |  |     |  |
|---|--|--|----------|-------|--|-------|--|-----|--|
| ODOE will evaluate amendments to determine the impact on energy generation and other factors, |  |  |          |       |  |       |  |     |  |
| including whether the change would have affected  |  |  |          |       |  |       |  |     |  |
| the outcome of the competitive review. This may   |  |  |          |       |  |       |  |     |  |
| result in pro-rating the award amount based on  |  |  |          |       |  |       |  |     |  |
| 0,0   | energy generated or system costs, or denial of the |  |          |       |  |       |  |     |  |
| amendme   | ent requ   | iest.  |          |       |  |       |  |     |  |
| 1. Applicant Information  |  |  |          |       |  |       |  |     |  |
|   |  |  | <u> </u> |       |  |       |  |     |  |
| Application   | on Num   | ber  |          | 1     |  |       |  |     |  |
| Applicant   | t's Name   | e (legal   | l owner) |       |  |       |  |     |  |
| Business  | Name (i  | f diffe  | rent)    |       |  |       |  |     |  |
| Federal Tax ID or SSN   |  |  |          |       |  |       |  |     |  |
| Mailing A   | Mailing Address                                    |  |          |       |  |       |  |     |  |
| City  |  |  |          | State |  |       |  | Zip |  |
| Contact Name  |  |  | l        | Phone |  | Email |  |     |  |
|   |  |  |          |       |  |       |  |     |  |
| 2. System Description   |  |  |          |       |  |       |  |     |  |
| Note: Amendments will not increase the amount of the grant award.                             |  |  |          |       |  |       |  |     |  |
|   | ached so   | hed system Provide a description of the proposed changes to the proposed system. |          |       |  |       |  |     |  |
| The amended system must continue to meet the requirements of:  Out to (ODE 450D 250 255)      |  |  |          |       |  |       |  |     |  |
| o Statute ( <u>ORS 469B.250-265</u> );  |  |  |          |       |  |       |  |     |  |

| Note: Amendments will not increase the amount of the grant award. |   |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| Attached system description                                       |   | Provide a description of the proposed changes to the proposed system.      |  |  |  |  |  |
| <ul><li>The ar</li></ul>  | nended sys  | stem must continue to meet the requirements of:                            |  |  |  |  |  |
| o Statute (ORS 469B.250-265);                                     |   |  |  |  |  |  |  |
| 0   | Rules ( <u>O</u>  | Rules ( <u>OAR 330-200</u> ); and  |  |  |  |  |  |
| 0   | The oppo  | The opportunity announcement the system applied under.                     |  |  |  |  |  |
| The system must continue to be:                                   |   |  |  |  |  |  |  |
| 0   | Technica  | lly feasible;  |  |  |  |  |  |
| 0   | Operate   | Operate as represented; and  |  |  |  |  |  |
| 0   | Remain i  | Remain in operation for at least five years.                               |  |  |  |  |  |
| <ul> <li>Descri</li> </ul>  | ptions mus  | t also include:  |  |  |  |  |  |
| 0   | Informat  | ion that summarizes the system's projected energy generation that changed. |  |  |  |  |  |
| 0   | Any changes in the projected costs to the system (either increasing or decreasing). |  |  |  |  |  |  |
| 0   | If any equipment changed, those specifications, including size.                     |  |  |  |  |  |  |
| 0   | A schematic diagram of the proposed changes to the system.                          |  |  |  |  |  |  |
| Estimated System  |   |  |  |  |  |  |  |
| Completion Date   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |

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## 3. System Owner Statement

- 1. I understand that ODOE approval and certification of my system is for grant purposes only. ODOE 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 permit ODOE or its agents to inspect the system at its discretion to make sure the system qualifies for the EIP. I understand that if I give false information about the system, or if I refuse to permit ODOE to inspect the system, the application will be denied and I will not receive a grant.
- 3. I understand that the application is a public record and that ODOE may be required by law to disclose information in the 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 will make any decisions regarding public disclosure of information contained in this application in accordance with Oregon Public Records Law.
- 4. I understand that ODOE does not endorse any company that requests information on this application and does not sell information as a mailing list.
- 5. I verify that the system owner does not restrict membership, sales, or services on the basis of race, color, creed, religion, national origin, sexual preference or gender.
- 6. I agree that the system will comply with all local, state, and federal requirements. I will obtain all necessary permits.
- 7. I certify that I am the system owner or the authorized agent.
- 8. I understand that this application is specific to the system represented on this form and that this application cannot be transferred to any other ODOE systems or projects that I may apply for at a later date within the opportunity announcement.
- 9. I authorize any incentivizing entity outside of ODOE to release all relevant information on this system to ODOE. This includes, but is not limited to, system information, incentives offered and received, and inspection results.
- 10. I understand that this application must comply with ORS <u>469B.250-265</u>, <u>315.331</u> and <u>OAR 330-200</u> and that if there are any changes to the statute or rules this application will be subject to the law effective at the time.
- 11. I have enclosed a check to ODOE or will pay by Visa, MasterCard or Discover the required amendment fee, which is non-refundable.
- 12. I understand that the opportunity announcements and qualifying incentivized projects release by ODOE are subject to change and the availability of certain project incentives are not guaranteed.
- 13. I understand that I am responsible for reporting to ODOE as the system progresses.
- 14. I declare that the amendment requests within this application are the only changes made to this system and any other changes will be submitted in another amendment application resulting in additional fees.

By signing this statement, I acknowledge that I have read and agree with the terms and conditions of the opportunity announcement, the application and the statement above. I have not altered any part of the statement or the application.

| Signature: _ | _ Title: |  |
|--------------|----------|--|
| Print Name:  | _ Date:  |  |

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## 4. Application Fee

- 1. Payment must be received with the application or you will not be eligible for a RED grant.
- 2. Application will be incomplete if this payment is not submitted with application.
- 3. Payment is considered "Received" when a signed check is included or credit card information is filled in and signed by the cardholder.
- 4. If payment is unable to be processed or is declined, the application will be considered incomplete.

| RED Amendment Fee \$300.00   |  |            |          |  |                 |  |  |
|--|--|------------|----------|--|-----------------|--|--|
| Payment Method  Mail completed application and application fee to:  Oregon Department of Energy  RED Grants  550 Capitol Street NE, 1 <sup>st</sup> Floor  Salem, OR 97301 |  |            |          |  |                 |  |  |
| CHECK: Plea  | CHECK: Please make \$300 check payable to <u>Oregon Department of Energy</u> . |            |          |  |                 |  |  |
| OR   |  |            |          |  |                 |  |  |
| Visa   |  | MasterCard |          |  | Discover        |  |  |
| Credit card number   |  |            |          |  | Expiration date |  |  |
| Name of cardholder (as shown on credit card)   |  |            |          |  |                 |  |  |
| Security code (3 digits on back of card)   |  |            |          |  |                 |  |  |
| Billing address<br>(for credit card)   |  |            | Zip code |  |                 |  |  |
| Email address (for receipt)  |  |            |          |  |                 |  |  |
| Signature: Date:   |  |            |          |  |                 |  |  |

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