



For office use only
Certified Cost: \$
Tax Credit: \$

Energy Incentives Program

Transit Services Application for Final Certification

Application #:

1. Project Owner Information

Business Name:			
Federal Tax ID (REQUIRED):		SSN*:	
Contact Name:			
Mailing Address:			
City:	State:	Zip:	County:
Phone:	Email:		

2. Project Site Information

Project Site Address:			
City:	State: OR	Zip:	County:
Date the project is operational and all contractors, vendors, etc. are paid in full: _____			
Date the project was placed in service: _____			
Was the project completed as proposed in the Preliminary Certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If no, please answer the following questions (attach additional pages if necessary):			
A. Describe the changes.			
B. How do these changes affect energy savings or production?			
C. How did these changes affect project costs?			

3. Vendor, Architect, Engineer, or Contractor Information

Firm name of vendor, architect, engineer, or contractor:			
Address:		Phone:	
City:	State:	Zip:	
Contact Person:		Email:	

4. Permits and Licenses (Check one)

<input type="checkbox"/> The facility complies with all applicable permits and licenses required under local and state laws.
<input type="checkbox"/> My facility did not require any permits or licenses under local and state laws.

*OAR 330-225-0030 authorizes the Oregon Department of Energy to use your federal tax identification or social security number as an identification number in maintaining internal records and may be shared with the Oregon Department of Revenue to establish the identity of an individual in order to administer state tax law.

5. Compliance with Land Use Laws of City and/or County (Check one)

- The facility complies with or has a variance from the land use laws of the city/county where the facility is located.
- Compliance with land use laws was not applicable to my facility.

6. Jobs & Employment

Provide the jobs and employment hours of those directly related to the construction, installation, operation or maintenance of the project. ODOE may require you to provide documentation or other written proof to support reported estimates on jobs and hours worked related to this project.

Step 1: Determine the jobs that directly relate to the construction, installation, operation or maintenance of the project. You may include jobs of contractors and sub-contractors if their scope of work is directly related to the project. Do not include the jobs of those who work in the facility but are unrelated to the construction, installation, operation or maintenance of the project (such as overhead, support staff or workers whose scope of work does not involve the construction, installation, operation or maintenance of the project). Do not include employment impact upon material suppliers and central service providers (indirect jobs) or on the local community (induced jobs).

Step 2: For each job listed, estimate the number of hours worked directly related to (a) construction or installation activities for this project and (b) operation or maintenance activities for this project. For operation or maintenance hours, you may include an estimate for first five years of project operation.

Step 3: Total the number of hours (6a, 6b).

a. Construction or Installation Jobs and Hours

Type of Construction or Installation Job	# of Jobs	Total # of Hours
Construction or Installation Jobs and Hours Total		6a.

b. Operation or Maintenance Jobs and Hours (first five years of operation/maintenance of the project)

Type of Operation or Maintenance Job	# of Jobs	Total # of Hours
Operation or Maintenance Jobs and Hours Total		6b.

7. Business Plan

As project owner, I intend to maintain and operate this business for at least 5 years.

Yes No

Have you received or applied for other Energy Incentives Program tax credits for this facility or other facilities? Please provide the EIP application numbers.

Yes No

Are you the recipient or sub-recipient of state or federal funding for this project? If 'YES', please attach a copy of the grant documentation.

Yes No

8. Project Cost

Final Project Cost

Regardless if these costs are eligible costs for a tax credit.

\$ _____ (8A)

- I have enclosed a CPA letter if the final project costs are \$50,000 or more, or
- I have enclosed a completed audit in compliance with OMB Circular A-133 as in effect on June, 2010 if the final project costs are \$50,000 or more.
- I have included PAID Itemized Invoices if the final project costs are less than \$50,000.

Deduct Ineligible Costs

Items that are ineligible per OAR 330-225-0070(4)(b).

\$ _____ (8B)

Total Project Cost:

\$ _____ (8C)
(8A – 8B)

9. Loans Contracts or Binding Agreements

Loan Contracts or Binding Agreements:

If your project was paid for with loan agreements or binding contracts, you must provide documentation from the lender that your loan/contract is not in default.

- Yes** – I have a loan agreement or binding contract to pay for this project. I have included **required** documentation from the lender that my loan is current and not in default.

Amount of Loan: _____

Lender: _____

Contact: _____

Phone: _____

- No** – I did not have a loan agreement or binding contract to pay for this project.

10. Pass-through Program Intention – Project owners that use the Pass-through option will be issued a Certified Amount Letter that indicates the final certified cost once this application for final certification is approved.

Refer to *Transit Services Project Opportunity Announcement Section 3.2* for information on the Pass-through Program.

1. Has the Project Owner identified a Pass-through partner?

Yes No

- If 'YES', complete the separate Pass-through Program Attachment.
(<http://www.oregon.gov/energy/BUSINESS/Incentives/Pages/EIP-Trans.aspx>)
- If 'NO', answer question 2 below.

2. Will the Project Owner request assistance finding a pass-through partner(s) from the Oregon Department of Energy?

Yes No

- If assistance finding a partner(s) is requested, the Department will place your application on "Hold" status until a partner(s) is secured. The Department will exercise due diligence to find a partner(s) but cannot guarantee that a partner(s) will be found.

11. Other Incentives

List any utility, Energy Trust of Oregon, or other organization rebates or incentives (not loans) or any federal tax credits that you received (or expect to receive) for this project. List the name of the group and the amount received. If there are none, check the appropriate box.

The sum of all financial incentives and a federal tax credit and the Energy Incentives Program tax credit may **not** exceed 100% of the Final Certified Project Cost.

This project did not receive any incentives. Please place \$0 in Total

Type of Incentive:	Amount:
Federal Business Energy Investment Tax Credit (ITC) <input type="checkbox"/> Tax Credit <input type="checkbox"/> Taking as a grant	\$ _____
Federal/State Grant Number _____	\$ _____
Other Federal Tax Credits	\$ _____
Large Electric Consumer Self Directed Funds Incentives	\$ _____
Other Incentives	\$ _____
Total of Incentives:	\$ _____

12. Project Owner Statement – All fields must be completed.

1. I certify that the information in this application is correct and I am the owner of this energy project. I have complied with all conditions of the Opportunity Announcement. I grant ODOE permission to inspect the project for compliance with tax credit requirements either before issuing Final Certification or during the years in which the tax credit is being claimed. I understand that failure to grant an inspection is grounds for revoking a Final Certificate.
2. I understand that ODOE approval and certification of my project is for tax credit 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.
3. I will comply with the provision that the facility must operate in accordance with the representation made in the Application for Preliminary Certification.
4. I certify that the project complies with all local, state, and federal requirements and I obtained all necessary permits.
5. I understand that this tax credit application is a public record and that ODOE 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 ODOE will make any decisions regarding public disclosure of information contained in this application in accordance with the Oregon Public Records Law.
6. I understand that ODOE does not endorse any company that requests information on this application and does not sell information as a mailing list.
7. I understand that the sum of all financial incentives for this project and the tax credit amount cannot exceed the total project payment.
8. I verify that the project owner does not restrict membership, sales, or services on the basis of race, color, creed, religion, national origin, sexual preference, or gender.
9. I have met the conditions of the Preliminary Certificate.
10. I have completed this form to the best of my knowledge.

Project Owner (Please print)		Application #:	
Name of project owner:			
Federal Tax ID or SSN:			
Mailing Address:			
City:	State:	Zip:	
Phone:		Email:	

By signing this statement, I certify that I am the above named project owner or an owner, partner, member or shareholder of the above named project owner. I have read and agree with the terms and conditions of the Project Owner Statement above and have not altered it in any way.

Signature: _____ Title: _____

Print Name: _____ Date: _____



Energy Incentives Program

Please refer to this checklist before submitting application to ODOE to ensure all requirements have been satisfied. An application is considered incomplete if any part of the application is left blank, is omitted, or is not included.



**ALL INCOMPLETE APPLICATIONS WILL BE
REJECTED AND RETURNED TO APPLICANT
AND WILL NOT BE PROCESSED.**



- The Application is **COMPLETE**.
 - All spaces/sections completed
 - All appropriate attachments/documents to supplement technical appendices

- Installation/Construction of the project is complete.
 - Included documentation confirms the installed equipment and labor for the project is complete and paid for in full.

- Final Review fee included.

All boxes **MUST** be checked in order for Application to be considered **COMPLETE**



IMPORTANT



- Energy Incentives Program tax credit will be taken the same year the application for **Final Certification** is submitted, **regardless of Preliminary Certificate date or the date that the project was started or completed.**

Credit card information will be destroyed once the payment is processed.

Final Review Fee

1. Payment **MUST** be received with application or you will not be eligible for a credit
2. Application will be **INCOMPLETE** if this payment is not submitted with application.
3. Payments 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**



Energy Incentives Program Final Review Fee= 0.55% of Total Project Payment

Total Project Cost (8C)*: _____ x 0.0055 = \$

Final Review Fee

* See **Project Cost** (Page 3, Section 8).

Payment Method:

- Check: Please make check payable to **Oregon Department of Energy**, indicate the EIP application number on the check, and include check with form.

Please mail check and complete application to:

EIP Transit Services Final Application
Oregon Department of Energy
PO Box 2008
Salem, OR 97308

OR

- Visa MasterCard Discover

ALL FIELDS REQUIRED TO PROCESS:

Credit Card Number: _____ Expiration Date: _____

Name of cardholder as shown on credit card: _____

Security Code (3 digits on back of card): _____

Billing Address for the card: _____ Zip Code: _____

Email Address for receipt: _____

Cardholder Signature: _____ Date: _____

Credit card information will be destroyed once the payment has been processed.