**MEA Combined Heat and Power Grant Program**

**Commissioning Disbursement Request**

**Grantees are encouraged to submit their Commissioning Disbursement Requests using MEA’s online** [**Commissioning Disbursement Request Portal**](https://form.jotform.com/220836629233154)**[[1]](#footnote-1) in lieu of this form.**

**Section 1: Grantee Information**

|  |  |
| --- | --- |
| **MEA Grant Number\*** |  |

*\*The number specified in the Grant Agreement (e.g. 2021-00-456S2)*

|  |  |
| --- | --- |
| **Grantee Name** | **Federal Tax ID** |
|  |  |
| **Grantee Address as Reported on IRS Form W9** |
|  |
| **City** | **State** | **Zip Code** |
|  |  |  |
| **Contact Name** | **Contact Title** |
|  |  |
| **Phone Number** | **Email Address** |
|  |  |

*\*Find your Congressional and MD Legislative Districts at* [*www.mdelect.net*](http://www.mdelect.net)

**Section 2: Disbursement Request Amount and Signature**

|  |  |  |
| --- | --- | --- |
| **Total Grant Amount*(As indicated in the Grant Agreement)*** | **Instructions** | **Commissioning Disbursement Request from MEA** |
| $  | **FY21 and Newer:** The Commissioning Incentive and Groundbreaking Incentive, if taken, cannot exceed 90% of the Total Grant Amount.**All Others:** Total Grant Amount minus Groundbreaking payment, if taken. | $  |

By signing this invoice, I affirm that the CHP project for which this award was executed is in compliance with all terms, conditions, and requirements of the Grant Agreement.

***For FY20 and Newer Projects only:*** I affirm that all activities funded through the Program award have been completed in compliance with section 9-20B-05 of the State Government Article which requires that at least 80% of workers participating in a project or program that receives money from the Strategic Energy Investment Fund ("SEIF") must reside within 50 miles of the project or program. As the SEIF funds a statewide program, MEA will determine compliance based on whether at least 80% of workers participating in a SEIF-funded project reside in Maryland, or within 50 miles of Maryland’s borders. In addition, and if applicable to my organization, I affirm that this project also complies with §14-416 and §17-303 of the State Finance and Procurement Article.

|  |  |
| --- | --- |
| **Signature of Authorized Representative** | OFFICIAL USE ONLY |
| **X** | ☐ | OK TO PAY |
| AMOUNT: |  |
| **Printed Name** | **Title** | **Date Signed** |  |
|  |  |  | MEA PM APPROVALSIGNATURE |

**Section 3: Project Site Information**

|  |
| --- |
| **Project Site Name** |
|  |
| **Project Site Address** | **City** |
|  |  |
| **State** | **Zip Code** | **County** | **Congressional District\*** | **MD Legislative District\*** |
| MD |  |  |  |  |

*\*Find your Congressional and MD Legislative Districts at* [*www.mdelect.net*](http://www.mdelect.net)

**Section 4: Required Attachments and Additional Notes**

(*Table continues on next page.)*

|  |
| --- |
| *The following attachments are* ***required*** *to receive the Commissioning incentive disbursement. Failure to submit any of the documents below will result in delay of payment until all missing information is submitted to the Maryland Energy Administration (“MEA”). If you have questions, concerns, or are uncertain about any of the documents below, please contact MEA at* *CHP.MEA@Maryland.gov* *or by calling (443) 306-0304.* |
|  |
| ☐ | **Complete and signed Commissioning Disbursement Request Form (this form)**Please ensure that this form has been completely and accurately filled out. The Grantee’s Authorized Representative must sign the form on the first page. **Forms that are not signed will not be accepted.** |
| ☐ | **Developer/Contractor/Manufacturer Invoice(s)**Attach one or more invoices for the CHP costs incurred so far. They should document that the unit has been installed, commissioned, and interconnected. |
| ☐ | **Finalized CHP System Design Drawings (if applicable)**Attach one or more files documenting the finalized CHP system design drawings. This is not required if they were uploaded in a Groundbreaking Disbursement Request and have not changed. If not required, disregard this attachment request and make a note that no changes have occurred in the Additional Notes section (next page). |
| ☐ | **CHP Manufacturer Startup Report**Attach a copy of the completed CHP manufacturer startup report. |
| ☐ | **Proof of Final Inspection(s)**Attach documentation of passed final inspection for all permits required by all authorities having jurisdiction. If no permits or inspections were required, attach a document that states none were required and provides an explanation as for why. |
| ☐ | **Utility Interconnection – Approval to Operate**Attach documentation from the electric utility confirming that the CHP system has been approved to operate. |
| ☐ | **Measurement and Verification Data – CHP Fuel Use Efficiency**Attach data for AT LEAST one continuous week of CHP system operation interval data that demonstrates its higher heating value (HHV) fuel use efficiency is at least 60%. This data must include, at minimum, amount of fuel input, amount of electricity produced, and amount of thermal energy captured and utilized. Data intervals should be no longer than hour-by-hour. Enough data must be provided so that fuel input and electrical and thermal energy output can be converted to MMBtu. |
| ☐ | **Warranty or Service Agreement (if applicable)**Attach a copy of the warranty/service agreement for the CHP system. The minimum period of servicing/warranty is five (5) years. If this was uploaded as part of the Groundbreaking Disbursement request AND has not changed, skip this attachment request and note that the original agreement has not changed in the Additional Notes section below. |
| ☐ | **CHP System Photo(s)**Attach one or more photos of the project site documenting that the CHP system has been fully-installed, commissioned, and is operational. |
| ☐ | **EmPOWER CHP Incentive Completion Documentation (if applicable)**If this CHP system has received an EmPOWER utility CHP incentive, upload a copy of the utility letter stating that the CHP system has met or exceeded all utility requirements as related to the fully-commissioned CHP system. If not applicable, skip this attachment request and note that this letter has not been provided with an explanation why (e.g. the CHP system is in a service territory that does not offer EmPOWER CHP incentives) in the Additional Notes section below. |

|  |
| --- |
| **Additional Notes**Enter any additional information you believe is relevant to the CHP System, this Commissioning Disbursement Request, (an) explanation(s) for why certain attachments have been omitted, etc. If you have no additional comments or information, leave this box blank. |
|  |

**COMPLIANCE EVALUATION REQUIREMENT**

The MEA CHP Program Manager will contact the Grantee Point of Contact to complete a Commissioning Compliance Evaluation for the CHP system. This can be done either in person as a site visitation and inspection by the CHP Program Manager or completed remotely by the Grantee and/or its representatives. Evaluation type is at the sole discretion of the MEA CHP Program Manager. **The Grantee is required to pass the Commissioning Compliance Evaluation in order to receive the Groundbreaking Disbursement.**

**SUBMIT THIS COMPLETED COMMISSIONING DISBURSEMENT REQUEST FORM TO MEA AT** **CHP.MEA@MARYLAND.GOV****.**

1. <https://form.jotform.com/220836629233154> [↑](#footnote-ref-1)