



## FY18 Clean Energy Communities Low-to-Moderate Income Grant Program

### County-Allocated Platform Application Form

**APPLICATION DEADLINE: FRIDAY, OCTOBER 6, 2017**

Please review the application instructions and fill out all sections with the requested information. Writing "See attachment" is not an acceptable substitute for providing the information herein.

#### Part A: Organization and Contact Information

<b>1. Name of Applicant Organization (Must be the <u>full</u> legal name of the organization as it appears on the IRS W9 tax form.)</b>	
<b>2. Street Address</b>	<b>3. Mailing Address (if different than street)</b>
<b>4. Authorized Representative</b> (The individual who would sign a Grant Agreement)	<b>5. Individual Preparing Application</b>
<b>Name:</b> Click or tap here to enter text. <b>Title:</b> Click or tap here to enter text. <b>Phone:</b> Click or tap here to enter text. <b>Email:</b> Click or tap here to enter text.	<b>Name:</b> Click or tap here to enter text. <b>Title:</b> Click or tap here to enter text. <b>Phone:</b> Click or tap here to enter text. <b>Email:</b> Click or tap here to enter text.
<b>6. Point of Contact</b> (The individual who would manage the grant on a day-to-day basis)	<b>7. Legal Counsel Responsible for Grant Review (FOR LOCAL GOVERNMENTS ONLY – Nonprofits skip to 8.)</b>
<b>Name:</b> Click or tap here to enter text. <b>Title:</b> Click or tap here to enter text. <b>Phone:</b> Click or tap here to enter text. <b>Email:</b> Click or tap here to enter text.	<b>Name:</b> Click or tap here to enter text. <b>Title:</b> Click or tap here to enter text. <b>Phone:</b> Click or tap here to enter text. <b>Email:</b> Click or tap here to enter text.
<b>8. Does your organization have a Federal Tax Identification Number? (If selected for a grant award, this number will need to be provided prior to grant execution. The Federal Tax ID and organization name must match what is listed on your organization's IRS W9 form.)</b>	<b>9. <u>U.S. Congressional District and MD Legislative District</u> where work is to be performed. Enter address and click "Find." Your U.S. Congressional district will be shown on the left side of the screen as "U.S. Representative (Maryland District #)." Your Maryland Legislative district will be shown on the left side of the screen as "State Senator (District #)." Do not include any</b>



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	letters in these numbers (E.g. "1A" should be listed as "01.")
<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>U.S. Cong. District:</b> Choose an item. <b>MD Leg. District:</b> Choose an item.
<b>10. Maryland county in which work will occur</b> (Please select <u>only one</u> county. Projects in multiple counties will require separate applications for each.)	
<input type="checkbox"/> Allegany <input type="checkbox"/> Charles <input type="checkbox"/> Anne Arundel <input type="checkbox"/> Dorchester <input type="checkbox"/> Baltimore City <input type="checkbox"/> Frederick <input type="checkbox"/> Baltimore County <input type="checkbox"/> Garrett <input type="checkbox"/> Calvert <input type="checkbox"/> Harford <input type="checkbox"/> Caroline <input type="checkbox"/> Howard <input type="checkbox"/> Carroll <input type="checkbox"/> Kent <input type="checkbox"/> Cecil <input type="checkbox"/> Montgomery	<input type="checkbox"/> Prince George's <input type="checkbox"/> Queen Anne's <input type="checkbox"/> St. Mary's <input type="checkbox"/> Somerset <input type="checkbox"/> Talbot <input type="checkbox"/> Washington <input type="checkbox"/> Wicomico <input type="checkbox"/> Worcester
<b>11. Organization Overview:</b> Please provide MEA with a brief description (500 words or less) of your organization's mission and/or purpose as well as an overview of your organizational structure. <b>If applicable, please provide a link to your organization's website.</b>	
<b>12. Proof of Incorporation:</b> Proof of incorporation is required for all nonprofit organizations. Local governments do not need to provide proof of incorporation.	
<p><b>Proof of incorporation for the applicant organization has been attached to this application.</b></p> <p><input type="checkbox"/> Yes   <input type="checkbox"/> No   <input type="checkbox"/> N/A (Local Governments Only)</p>	

**Part B: Proposed Project**

<b>13. Total LMI Grant Request</b>
\$
<b>14. Total Funding Match/Leveraged Funds</b> Please list all funding matches (dollars, labor, supplies, administrative support, etc.) provided by the applicant organization or organizations other than MEA that are helping to fund the proposed energy efficiency project. <i>Note: Matching funds are not required of this grant program.</i>



**Does your electric utility offer an incentive program for energy efficiency improvements?**

Yes  No

*Check the offerings of your utility at the appropriate website:*

[Baltimore Gas & Electric \(BGE\)](#)  [Potomac Edison](#)  
 [Pepco](#)  [SMECO](#)  [Delmarva](#)  [Washington Gas](#)  Other (Specify): Click or tap here to enter text.

**Have you secured leveraged funding from a utility incentive program?**

Yes  No

*If yes: Which utilities? Select all that apply.*

Baltimore Gas & Electric (BGE)  Potomac Edison  
 Pepco  SMECO  Delmarva  Washington Gas  Other (Specify): Click or tap here to enter text.

*What is the incentive amount?* Click or tap here to enter text.

**Have you applied to a utility incentive program but are unsure if you will receive funding?**

Yes  No

*If yes: Which utilities? Select all that apply.*

Baltimore Gas & Electric (BGE)  Potomac Edison  
 Pepco  SMECO  Delmarva  Washington Gas  Other (Specify): Click or tap here to enter text.

*What is the potential incentive amount?* Click or tap here to enter text.

*If approved, what is the expected award date?* Click or tap to enter a date.

**Do you intend to leverage non-utility funding sources (e.g. donations, private grant funds) for this project?**

Yes  No

*If yes, report all:*

Funding Source	Description of Funding	Amount (\$)

<b>TOTAL</b>	
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Please attach applications, award letters, or other documentation related to utility and other incentive programs for which you've applied or been awarded.

I affirm that documentation is attached to this application.

**15. Project Description:** Please answer the following questions about your project. The summary should include a detailed description of your proposed energy efficiency and/or weatherization measures. If your project is occurring in multiple locations, please clearly describe the work that will be occurring in each location. While developing your project, please review the County-Allocated Platform Application Instructions.

**This section must be completed and should not state "see attachment."**

**A. Will your proposed project consist mainly of Whole Home/Whole Building upgrades?**

Yes  No

*Whole Home/Whole Building upgrades consist of performing an energy audit on the home or building and then installing the most cost-effective energy efficiency and weatherization measures to achieve an aggregate 10-or-fewer-year simple payback. Examples of installed measures are LED light bulbs, ENERGY STAR appliance upgrades, insulation improvements, air sealing, etc. This was previously known as the "Home Performance with ENERGY STAR" or "HPwES" model under previous cycles of the LMI Program.*

**B. i. If you answered "yes" to the previous question, approximately how many homes/buildings do you plan to upgrade?**

**ii. If you answered "no" to the question above, please instead use this space to provide a detailed summary of your proposed project.**



**16. Annual Estimated Energy Savings:** Please provide an estimate of the amount of energy that will be saved annually through your proposed project by the appropriate unit (e.g., kWh, MMBtu, gallons). **If you have not already had an energy audit performed on the building(s) you plan to upgrade in your proposed project, MEA requests that you use the Mid-Atlantic Technical Resource Manual (“TRM”) energy assumptions provided on pages 8 – 10 of the FY18 Clean Energy Communities Low-to-Moderate Income Grant Program Application Instructions to perform your energy savings calculations.** The energy saved through your project is a key review criterion for funding consideration, so please do your best to show accurate energy savings data. In addition to energy savings, include your calculations and assumptions below, or attach energy audit documentation if applicable.

For commercial energy measures, as well as any residential energy measures not included in the list of energy assumptions outlined on pages 8 – 10 of the application instructions, grant applicants should use energy estimates from qualified auditors, online calculators maintained by the U.S. Department of Energy (DOE), ENERGY STAR calculators, etc.

A sample energy savings calculation can be found on pages 10-11 of the application instructions.

**This section must be completed and should not state only “see attachment.”**

**Have you already had an energy audit performed?**  Yes  No

*If yes, attach a copy of the audit report.*



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**17. Impact on Low-to-Moderate Income Marylanders:** Please include an estimate of the number of low-to-moderate income individuals and/or households that will benefit from this project over a fifteen-year period (this is the anticipated life of many potential energy efficiency measures). MEA looks at two housing categories: temporary housing (high turnover with a low length of residence, such as a homeless shelter) and permanent housing (single-family homes where the family is not expected to relocate within the next 15 years).

**Formula for Temporary Housing:**

$$\# \text{ of homes/units} \times \frac{\# \text{ of LMI individuals per home}}{\text{years in home (must be } < 15 \text{ years)}} \times 15 \text{ years}$$

**Formula for Permanent Housing (residents not expected to relocate in the next 15 years):**

$$\# \text{ of homes/units} \times \frac{\# \text{ of LMI individuals per home}}{\text{years in home}} \times 15 \text{ years}$$

See page 6 of the FY18 Clean Energy Communities Low-to-Moderate Income Grant Program Application Instructions for a detailed example.

**This section must be completed and should not state “see attachment.”**

Please show your calculations:

Click or tap here to enter text. (number) of LMI **Marylanders** would benefit directly from this MEA grant project.

Please describe how LMI Marylanders would benefit:

**18. Priority Funding Areas:** The State of Maryland gives priority to projects occurring in Priority Funding Areas. According to the [Maryland Department of Planning \(MDP\) website](#), Priority Funding Areas are existing communities and places where local governments want State investment to support future growth. The following areas qualify as Priority Funding Areas:

- **Every municipality, as they existed in 1997**
- **Areas inside the Washington Beltway (I-495) and the Baltimore Beltway (I-695)**





Do you plan to charge administrative costs to your potential Grant Award?  Yes  No

If yes, what percentage of your potential Grant Award do you plan to use for Administrative Costs? (Max 10%) [Click or tap here to enter text.](#)

For what purposes and/or activities do you wish to use administrative funds?

**21. Project Timeline:** In the second column of the table below, please list the expected completion date for project milestones. Assume that **March 1, 2018** is the earliest that your potential grant funds will be available. Construction and installation on your project must be completed by **April 1, 2019**, with final reports and invoices submitted to MEA by **May 1, 2019**. Draft your project timeline accordingly to comply with this timeframe, taking into consideration scheduling concerns that may impact your organization (facility schedules, holidays, weather, etc.), as well as equipment and material lead times.

**This section must be completed and should not state “see attachment.”**

Project Milestone	Expected Completion Date
Receive MEA Funds	<b>March 1, 2018 (Earliest)</b>
Work Begins	<a href="#">Click or tap here to enter text.</a>
Work 50% Complete	<a href="#">Click or tap here to enter text.</a>
Complete Construction & Installation	<a href="#">Click or tap here to enter text.</a> <b>(No later than April 1, 2019)</b>
Submit Final Reports to MEA	<a href="#">Click or tap here to enter text.</a> <b>(No later than May 1, 2019)</b>

**22. Procurement Policy and/or Practices:** Briefly describe your organization’s procurement policy for obtaining contractors, materials, etc. If your organization does not have a formalized procurement policy, explain how you would identify contractors and vendors to provide goods and services, should you receive a grant award from MEA.

**23. Will your organization perform the work on your proposed project, or will you hire (a) contractor(s)?**

Hire Contractor(s)  Perform Work In-house

**If you selected “Hire Contractor(s)” and already have a contractor in mind, please explain how you procured that contractor and your organization’s business affiliation with them, if any such relationship is present:**

**24. Project Scalability:** If you receive a Grant Award, but it is not as much as your requested amount, or if additional LMI Grant funding becomes available, does your organization have an interest and the capability to scale your project accordingly? Scaling a project is increasing or decreasing the number of homes, buildings, or weatherization/energy efficiency measures based on funding availability.

Yes  No

**Comments:** Click or tap here to enter text.

**25. Eligibility Verification (Individual Participants):** If your organization is awarded a Low-to-Moderate Income Energy Efficiency Grant, describe the process that will be used to verify that all participants/beneficiaries comply with the low-to-moderate income requirements described on page 3 of the FY18 Clean Energy Communities Low-to-Moderate Income Grant Program Application Instructions.

**This section must be completed and should not state “see attachment.”**

**26. FY18 LMI Statewide Platform:** A statewide platform of the FY18 Clean Energy Communities Low-to-Moderate Income Grant Program is also available for large scale, innovative projects. This competitive fund is available to any program-eligible organization regardless of county allocations. Will you also submit an application for this funding source?

Yes  No

**Comments:** Click or tap here to enter text.

## Part C: Agreement to Terms, Conditions, and Signature

By signing and dating this application, I certify that I agree to the following terms and conditions:

1. I understand that applications are accepted and grants are awarded on a competitive basis. **Applications must be submitted electronically to [mealmi@csra.com](mailto:mealmi@csra.com) no later than Friday, October 6, 2017 by 11:59 P.M. Eastern Daylight Time.** If submitting the application via U.S. mail or in-person, it must be delivered to MEA by close of business (5:00 P.M. Eastern Daylight Time) on Friday, October 6, 2017. Paper applications should be addressed to:  
  
Maryland Energy Administration  
Attn: LMI Program – FY18 Application  
1800 Washington Boulevard, Suite 755  
Baltimore, MD 21230
2. I certify that the building(s) to be upgraded under my proposed project are located in the State of Maryland.
3. I understand that this application does not guarantee that I will be awarded for a grant for the proposed energy efficiency project.
4. To be eligible for grant funding, I understand that the equipment **may not** be purchased or installed before my organization has an executed Grant Agreement with MEA.
5. I give permission to MEA or its representative(s) to use photos of my facility, and data presented in my final energy evaluation or audit report for marketing, publicity, and advertising purposes. MEA and its representatives, subject to the requirements of the Maryland Public Information Act, §10-611 et seq. of the State Government Article, will not divulge any confidential information or trade secrets.
6. Under penalties of perjury, I certify that the Applicant Organization will be able to provide a Federal Tax ID number should it be selected for an award; it is not subject to backup withholding because: (a) it is exempt from backup withholding, or (b) it has not been notified by the Internal Revenue Service (IRS) that it is subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified it that it is no longer subject to backup withholding. I certify that I am a U.S. citizen or other U.S. person (as defined in IRS Form W-9).
7. I understand that any grant received through the FY18 Clean Energy Communities Low-to-Moderate Income Grant Program is taxable as income; therefore, the State of Maryland will be sending a 1099-G form. The contents of the 1099-G form shall be reported on federal and state tax returns, as appropriate. For more



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information, applicants should contact a qualified tax professional.

8. I will allow authorized representatives of the FY18 Clean Energy Communities Low-to-Moderate Income Grant Program access to my facility in order to conduct energy audits, site inspections, or measurement & verification activities. If selected for an award, I understand that the MEA grant agreement will contain participation requirements for project showcasing.
9. I understand that the program terms & conditions are subject to change at the sole discretion of MEA.
10. I understand that any grant payment will be contingent upon MEA acceptance and/or inspection of the equipment installed.
11. Each party shall indemnify the other for any losses or damages, except to the extent that the losses or damages arise from a party's sole negligence or willful misconduct.
12. MEA and its contractors make no representation or warranty, and assume no liability with respect to quality, safety, performance, or other aspect of any design, system, or appliance installed pursuant to this application, and expressly disclaim any such representation, warranty, or liability.
13. I certify that I am an authorized signatory for the Applicant Organization.

**Authorized Applicant Signature:** \_\_\_\_\_  
*Typing your name constitutes a signature*

**Name and Title (Please Print):** [Click or tap here to enter text.](#)

**Organization Name:** [Click or tap here to enter text.](#)

**Date:** [Click or tap to enter a date.](#)