*Please review your application form and associated attachments prior to submitting an application to the Residential Clean Energy Rebate Program offered by the Maryland Energy Administration (“MEA”). Be advised that any incomplete or missing information and/or documentation will prevent your application from being approved.*

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| **Checklist for Application** | |
| ☐ | The applicant who has purchased and installed a qualified Clean Energy system is a resident of the State of Maryland. The installation address is the applicant’s primary residence. The applicant is an owner of the residence, or the residence is held in a revocable trust controlled by the applicant. |
| ☐ | Applicant and system information has been filled out completely and has been signed and dated by the Applicant. |
| ☐ | Installation Contractor and Project information, including hours worked, has been filled out completely. |
| ☐ | Permit and final Inspection information has been included for all required permits. |
| ☐ | The Residential Clean Energy Rebate Program Terms and Conditions have been reviewed. This document is found on “The Rebate Process Tab” ofthe MEA website (see <https://energy.maryland.gov/residential/Pages/incentives/CleanEnergyGrants.aspx> |

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| **Required Supporting Documentation to be Submitted with Application** | |
| ☐ | Copies of all permits required by all applicable local, State, and federal jurisdictions. |
| ☐ | Copies of all final inspections indicating a passed/approved status from all applicable local, State, and federal jurisdictions. |
| ☐ | Itemized $0.00 balance invoice from the Installation Contractor indicating that all costs associated with the installation and commissioning of the clean energy system have been paid-in-full. |
| ☐ | Please attach a copy (screenshot) of the [SDAT Real Property documentation](https://sdat.dat.maryland.gov/RealProperty/Pages/default.aspx)[[1]](#footnote-0) for your property. |
| ☐ | Photograph(s) of the completed clean energy system in operation depicting that the system has been fully-installed. Photos should show the entire system.   * For solar projects on homes that are more than 45 years old or that are recorded, individually or within an area, in the Maryland Inventory of Historic Properties, a street level photo of the front of the house from the street will help expedite the application eligibility review process. |
|  | |
| **Historic Review** | |
| MEA is required by State law to assess the impact of Residential Clean Energy Rebates on historic resources. Prominent installations of clean energy systems on historic properties, properties within historic areas, or properties determined to be eligible for historic designation may not qualify for this Rebate program. You can check the historical status of your property via Maryland’s [MERLIN Online map](https://gisapps.dnr.state.md.us/MERLIN/Index.html)[[2]](#footnote-1). | |

**Please mail the complete completion package to MEA at the following address:**

**Maryland Energy Administration  
Attn: Residential Clean Energy Rebate Program**

**1800 Washington Blvd, Suite 755  
Baltimore, MD 21230**

**As another option, applications can also be submitted securely through the State of Maryland’s Virtru encryption software.** To submit electronically via Virtru, please first email MEA with your first and last name, zip code, and email address in the body of the email to [cerp.mea@maryland.gov](mailto:cerp.mea@maryland.gov)​. Please do not attach your application to this initial email. An MEA staff member will reach out to you with instructions on how to submit your application via Virtru.

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| **Section 1 – Applicant Information (System Owner)** | | | | | | |
| **First Name**  (As shown on MD income tax return) | **Middle Initial**  (**Only if** used on your MD tax return) | | **Last Name, Incl. “Suffix” (i.e., Jr, III)**  (As shown on your MD income tax return) | | | |
| Click to enter | Click to enter | | Click to enter | | | |
| **Email Address of System Owner (this should not be the email of the installation contractor)** | | | **Applicant Phone Number** | | | |
| Click to enter | | | Click to enter | | | |
| **Installation Address** | | **City** | | **State** | **Zip Code** | |
| Click to enter | | Click to enter | | **MD** | Click to enter | |
| **County** | | **Congressional District\*** | | **MD Legislative District\*** | | |
| Click to enter | | Choose an item. | | Choose an item. | | |
| *\*Find your Congressional and MD Legislative Districts at* [*https://www.mdelect.net*](https://www.mdelect.net) | | | | | | |
| **Mailing Address** (If different than Installation Address) | | **City** | | **State** | **Zip Code** | |
| Click to enter | | Click to enter | | Click to enter | Click to enter | |

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| **Section 2 – Clean Energy System Information** | | | | | |
| **Clean Energy Technology** | | **System Capacity** | | **Total System Cost** | **Rebate Amount** |
| ☐ | Solar Photovoltaic (PV) | Click to enter | kW DC | Click to enter | $1,000.00 |
| ☐ | Solar Shingles | Click to enter | kW DC | Click to enter | $1,000.00 |
| ☐ | Solar Water Heating (SWH) | Click to enter | Sq. Ft. | Click to enter | $500.00 |
| ☐ | Geothermal Heat Pump (GEO) | Click to enter | Tons | Click to enter | $3,000.00 |
| ☐ | Geothermal Heat Pump Replacement | Click to enter | Tons | Click to enter | $500.00 |

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| **Section 3 – Applicant Signature – CAREFULLY READ THE STATEMENTS BELOW BEFORE SIGNING** | | | | | | | | |
| **I affirm under penalties of law that: 1.** A qualified clean energy system has been installed on the installation property specified in Section 1 of this Residential Clean Energy Rebate Application. **2.** I am a legal resident of the State of Maryland. **3.** I own the property for which I am applying, and it is my primary residence. **4.** *If the property is held in a trust:* I attest that the trust is revocable and that I have the right to remove the property from the trust. **5.** I have complied with all state laws, local ordinances, and other legally-binding requirements. **6.** The contents of this application are true to the best of my knowledge, information, and belief. **7.** I have read and agree to the terms outlined in the Residential Clean Energy Rebate Program Terms and Conditions. | | | | | | | | |
| **Print Full Name (As shown on your MD Income Tax Return and matching Section 1 above)** | OFFICIAL USE ONLY | | | | | | | |
| D13 | | 03 | | 512SA | | 1298 |  |
| Click to enter | AGENCY | | FUND | | PCA | | SUB-OBJ | FY |
|  | | | | | |  | |
| **Social Security Number (REQUIRED to issue payment)** | SSN | | | | | | AMOUNT | |
| Click to enter |  | MEA- | | | | |  | |
| PM INIT | MEA INVOICE NUMBER | | | | | DATE RECEIVED | |
| **Handwritten Signature** |  | | | | |  | | |
| **X** | MEA APPROVAL | | | | | FINANCIAL ADM APPROVAL | | |
| DATE: | | |  | | | | |
| **PLEASE NOTE**  **YOUR APPLICATION IS NOT VALID UNLESS SIGNED** | POSTED: | | |  | | | | |

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| **Section 4 – Permitting & Installation Information** | | | |
| For each type of permit, list the Permitting Authority (i.e., the County or Municipality having jurisdiction over permitting) and all applicable permit numbers and dates of final inspections below. For geothermal, all vertical well permits are issued by the State of Maryland through the Maryland Department of the Environment. | | | |
| ***Type of Permit:*** |  |  | ***Final Inspections:*** |
| **Building** **Permit**: Permit Number, if applicable | Required? | Name of Permitting Authority | Date ***Passed*** |
| Click to enter | ☐ Y ☐ N | Click to enter | Click to enter |
| **Electrical** **Permit:** Permit Number, if applicable | Required? | Name of Permitting Authority | Date ***Passed*** |
| Click to enter | ☐ Y ☐ N | Click to enter | Click to enter |
| **HVAC Permit**: Permit Number, if applicable | Required? | Name of Permitting Authority | Date ***Passed*** |
| Click to enter | ☐ Y ☐ N | Click to enter | Click to enter |
| **Plumbing** **Permit:**  Permit Number, if applicable | Required? | Name of Permitting Authority | Date ***Passed*** |
| Click to enter | ☐ Y ☐ N | Click to enter | Click to enter |
| **Well Permit:** Permit Number, if applicable | Required? | Name of Permitting Authority | Date ***Passed*** |
| Click to enter | ☐ Y ☐ N | State of Maryland | Click to enter |

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| **Project Information** | | |
| Project Start Date | Project Completion Date\* | Total Person-Hours Worked |
| Click to enter | Click to enter | Click to enter |

*\*The date on which the project is fully-installed, operational, and all required inspections are passed*

**The following question applies ONLY to Solar Water Heating Systems (leave blank otherwise):**Please indicate the type of Hot Water Heater replaced by the SHW System:

|  |  |  |
| --- | --- | --- |
| ☐ Electric | ☐ Non-electric | ☐ N/A – New Construction |

**The following questions apply ONLY to Geothermal Systems (leave blank otherwise):**Please indicate the geothermal system type:

|  |  |  |
| --- | --- | --- |
| ☐ Horizontal Loop | ☐ Vertical Well | ☐ Pond/Lake |
| ☐ Other (Please Specify): Click to enter | | |

Indicate the type of HVAC system replaced by the geothermal system:

|  |  |  |
| --- | --- | --- |
| ☐ Electric | ☐ Non-electric | ☐ N/A – New Construction |

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| **Section 5 – Installation Contractor Information** | | | | | |
| Please enter the information for the installation contracting company which installed the clean energy system in the section below. Contractors must be registered to do business in the State of Maryland, possess all licenses and certifications required by all applicable Federal, State, and local laws, regulations, and other legally-binding requirements and be in Good Standing with the Maryland State Department of Assessments and Taxation. Out-of-state contractors should check licensing requirements with the Maryland Department of Labor (<https://www.dllr.state.md.us/license/>). | | | | | |
| Company Name | | License Type | | License Number | |
| Click to enter | | Click to enter | | Click to enter | |
| Name of Contact Person within installation contractor company | | Title of Contact Person | | | |
| Click to enter | | Click to enter | | | |
| Company Phone number | | Contact Person’s Email Address | | | |
| Click to enter | | Click to enter | | | |
| Company Street Address | City | | State | | Zip Code |
| Click to enter | Click to enter | | Choose | | Click to enter |

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| **For Solar PV Systems Only: MANDATORY NABCEP PV Installation Professional (PVIP) Certification *(To be completed by Installation Contractor)*** | |
| Name of NABCEP **PV Installation Professional (PVIP)** | NABCEP PVIP Certification Number |
| Click to enter | Click to enter |

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| **System and Site Verification by Installation Contractor** | |
| By signing the application below, I affirm that the foregoing information is true and correct to the best of my knowledge, information, and belief. In addition, I affirm that each component of the installed system is listed or labeled by a recognized national testing laboratory. | |
| Contractor/Authorized Representative Printed Name | Title |
|  | Click to enter |
| Contractor/Authorized Representative Signature | Date Signed |
| **X** |  |

1. <https://sdat.dat.maryland.gov/RealProperty/Pages/default.aspx> [↑](#footnote-ref-0)
2. <https://gisapps.dnr.state.md.us/MERLIN/Index.html> [↑](#footnote-ref-1)