**MEA Combined Heat and Power Grant Program**

**Groundbreaking Report and Disbursement Request**

**Part 1: Reporting Period**

|  |  |  |  |
| --- | --- | --- | --- |
| **Month** |  | **Year** |  |

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

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

**Part 2: Grantee Information**

|  |  |
| --- | --- |
| **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** |
|  |  |

**Part 3: Disbursement Amount & Signature**

|  |  |  |
| --- | --- | --- |
| **Total Grant Amount*(As indicated in Section 3 of the Grant Agreement)*** | **Multiplier*****(Groundbreaking incentive is 30% of the Total Grant Amount)*** | **Disbursement Request from MEA** |
| $  | x up to 30% | $  |

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 FY21 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 |

**Part 4: Required Attachments**

|  |
| --- |
| **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)

|  |
| --- |
| *The following attachments are* ***required*** *to receive the Groundbreaking 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 Groundbreaking Report and Disbursement Request Form |
| ☐ | Copy of developer/contractor/manufacturer invoice(s) (issued to Grantee) providing an itemized breakdown of costs incurred |
| ☐ | Copy of finalized CHP system design drawings (PDF preferred) |
| ☐ | CHP manufacturer cutsheets/datasheets |
| ☐ | *For Grantee-owned Systems:* Copy of the executed agreement between the Grantee and the contractor for the CHP system |
| ☐ | *For Third Party-owned Systems:* Copy of the executed agreement between the Grantee and the Third Party Owner of the CHP system |
| ☐ | Signed IRS Form W9 from the Grantee (to provide proof of Federal Tax ID) |
| ☐ | Certificate(s) of Insurance evidencing that MEA has been named as an additional insured party pursuant to Section 10 of the Grant Agreement |
| ☐ | Copies of all required permits as required by all local, State, and federal jurisdictions |
| ☐ | Utility interconnection agreement |
| ☐ | *For systems receiving utility CHP incentives:* Copy of the utility approval letter |
| ☐ | *For systems receiving utility CHP incentives:* Copy of the most recent utility monthly progress report and supporting documentation |
| ☐ | Copy of five (5) year warranty and/or service agreement for the CHP system |
| ☐ | CHP Project Team organizational chart with contact information |
| ☐ | Copy of the CHP system commissioning plan, to include at minimum the construction phase, acceptance phase, and post-acceptance phase |

**SUBMIT THIS COMPLETED GROUNDBREAKING REPORT AND DISBURSEMENT REQUEST FORM TO MEA AT** **CHP.MEA@MARYLAND.GOV****.**