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Larry Hogan, *Governor*  
Boyd K. Rutherford, *Lt. Governor*Mary Beth Tung, *Director*

**FY2023 Resilient Maryland Program**Area of Interest 1: Feasibility and Planning  
Application Form

This application form is for the Maryland Energy Administration (MEA) FY2023 Resilient Maryland Program, Area of Interest 1 (AOI 1): Feasibility and Planning. Application forms for all AOIs can be found on the Resilient Maryland webpage.

**Instructions:** Please review the FY23 Resilient Maryland Program Overview Document (Overview Document) and AOI 1 Funding Opportunity Announcement (FOA) prior to completing this application form. Applications that do not meet the requirements listed in the FOA will not be considered for funding. Carefully read each section of the application form and provide all required information. The supporting documentation requested in the FOA must be submitted with this completed application form in order to constitute a complete application package. Applications are due to MEA by **5:00 P.M. EST, January 26, 2023.**

**Section 1: Applicant Information**

Please provide information about the Applicant below. **All fields are required.**

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| **Name of Applicant (must exactly match its IRS Form W9)** |
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|  |  |  |
| --- | --- | --- |
| **Street Address (must exactly match its IRS Form W9)** | | |
|  | | |
| **City** | **State** | **Zip Code** |
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Describe the Applicant in the box below **(250 words or fewer)**. Please **indicate the type of organization**, e.g., “business,” “nonprofit,” “local government,” “university/college,” “critical infrastructure,” “medical,” “agricultural,” etc.

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| **Name of Application Point of Contact\*** | | |
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| **Title** | **Email** | **Phone** |
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\*Individual MEA can contact regarding this application. Must be employed by the Applicant or an authorized agent.

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| **Name of Applicant Authorized Representative\*\*** | | |
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| **Title** | **Email** | **Phone** |
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\*\*Individual holding signatory authority to sign this application form and enter the Applicant into a Grant Agreement with MEA, if awarded.

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| **Name of Project Point of Contact\*\*\*** | | |
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| **Title** | **Email** | **Phone** |
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\*\*\*Individual that will act as the regular point of contact between the Applicant and MEA during the completion of the Resilient Maryland project, if Applicant is awarded.

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| **Name of Applicant Legal Counsel** | | |
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| **Title** | **Email** | **Phone** |
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**Section 2: Project Information**

Please provide information about the project below. **All fields are required.**

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| **Project Category (select one only)** |
| Category 1: Community and Campus Microgrids |
| Category 2: Resilient Facility Power Systems |
| Category 3: Resiliency Hubs |

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| **Project Site Name** |
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|  |  |  |
| --- | --- | --- |
| **Project Street Address\*** | | |
|  | | |
| **City** | **State** | **Zip Code** |
|  | MD |  |

\*If this project will have multiple locations, provide the main project site address and list additional addresses in the project site description box on the following page.

Describe the project site(s) in the box below **(250 words or fewer)**. Please provide information on general location, geography, any existing facilities or infrastructure, etc.

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| **Distributed Energy Resources (DERs) Under Consideration (select all that apply)** | |
| Solar Photovoltaics (PV) | Absorption Chilling |
| Battery Energy Storage System (BESS) | Solar Thermal (Water Heating) |
| Thermal Storage | Wind Turbine |
| Combined Heat and Power (CHP) | Backup Diesel/NG Generator |
| Fuel Cell | Other (explain below) |
|  | |

Provide a brief, high-level summary of the project in the box below **(250 words or fewer)**. This summary should not replicate everything in the project proposal. It should be short and broadly explain the project.

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**Section 3: Financial Information**

Please provide all information regarding the project’s funding below. **All fields are required.**

**Grant Request**

Please enter the amount of funding requested from the Resilient Maryland AOI 1 in the box below. Note the following maximum grant amount for each category, as explained in the FOA:

* **Category 1:** Up to $100,000
* **Category 2:** Up to $25,000
* **Category 3:** Up to $10,000 per resiliency hub

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| **Resilient Maryland AOI 1 Grant Request** | $ |

**Total Project Cost**

Please enter the total cost of the project before the consideration of rebates and incentives.

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| **Total Project Cost** | $ |

**Applicant Resource Contribution**

An Applicant to AOI 1 must contribute at least 20% of the total project cost listed above to be considered for an award. This can be in the form of cost-match, value of donated labor, or leveraged funds such as private financing or other non-MEA incentives.

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| **Cost-match Amount (if applicable)** | $ |
| **Value of Donated Labor (if applicable)** | $ |
| **Leveraged Funds\* (if applicable)** | $ |

\*Describe the leveraged funds in the box below (e.g., “private financing,” “C-PACE financing,” “incentive(s)” (list name(s) of incentive(s), amount(s), and issuer), etc.)

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**Section 4: Required Supporting Documents Checklist**

The following supporting documents must be provided with this application form at the time of submission to constitute a complete application package. Failure to provide any of the required documents will result in rejection from funding consideration. An Applicant whose application package is rejected for this reason may reapply when all required documents are obtained. Please indicate that each document has been included by checking the box beside it.

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|  | Complete application form (this form), signed by an Applicant authorized representative |
|  | Project proposal conforming to the requirements as explained in the FOA |
|  | Complete, current, and accurate IRS Form W9 for the Applicant |

**Section 5: Electronic Communications**

Electronic communication provides the fastest and most efficient method of interacting with MEA; therefore, MEA encourages the use of electronic communication for all matters relating to this grant program. Unless the applicant opts out as indicated below, MEA will require the electronic submission and receipt of all documents (including but not limited to the application, the grant agreement, reports, and invoices.

The Applicant agrees to use electronic communication for all purposes relating to this grant program:

I agree

The contact information MEA should use to communicate with the Applicant electronically is: Email via [RMP.MEA@Maryland.gov](mailto:RMP.MEA@Maryland.gov).

OR

The Applicant does not agree to communicate electronically with MEA:  I do not agree

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**Section 6: Attestations, Acknowledgements, Certifications, and Signature**

Carefully read the list of attestations, acknowledgements, and certifications below prior to signing this application form. The application may be rejected from consideration if any of the following are found to be untrue during the course of the evaluation of the application package.

**Attestations, Acknowledgements, and Certifications**

**By signing this application, I certify that the information provided on this application form and in each of the attached supporting documents required by the FOA is complete, accurate, and true, to the best of my knowledge and belief. I certify that I am authorized to sign this application and submit the application package on behalf of the Applicant, and I agree to the attestations, acknowledgements, and certifications listed below on behalf of the Applicant:**

1. I affirm to the best of my knowledge, information, and belief that the entire contents of this application package meet all requirements of the FY23 Resilient Maryland Program Overview Document (Overview Document); and FY23 Resilient Maryland Program, Area of Interest 1: Feasibility and Planning Funding Opportunity Announcement (FOA).
2. I understand and acknowledge that MEA accepts application packages and awards FY23 Resilient Maryland AOI 1 awards on a competitive basis, and that application packages are due to MEA no later than **5:00 P.M. EST, January 26, 2023.**
3. I affirm that the project for which the grant funds have been requested, if ultimately installed, will be located on (a) facility (facilities) within the State of Maryland.
4. I understand and acknowledge that the use of any funds awarded under this grant program for projects designed to benefit one or more person(s) outside of the State of Maryland is strictly prohibited.
5. I understand that submission of this application package does not obligate MEA to award a grant under the grant program.
6. I affirm that any feasibility analysis and planning funds awarded under this grant program will not be used for any equipment or installation costs. I acknowledge that funds are only permitted for feasibility analysis and preconstruction activities as specified by the FOA.
7. I understand that grant funds cannot be used to offset costs that are incurred by the Applicant or any contractor(s) or developer(s) prior to the execution of a Grant Agreement or Commitment Letter between the Applicant and MEA.
8. I understand and acknowledge that MEA reserves the right to determine the final award amount for each grant issued under the grant program, and that the amount of funds that have been requested in this application are not guaranteed.
9. I understand and acknowledge that MEA or its representative(s) may use photos and video footage of the Applicant’s facility (facilities), or the facility (facilities) under analysis if not owned by the Applicant subject to written agreement with MEA by the facility (facilities) owner, and data presented in the Applicant’s reports for marketing, publicity, and advertising purposes. MEA and its representatives, subject to the requirements of the Maryland Public Information Act, and other applicable laws, will not divulge any confidential information or trade secrets.
10. I understand and acknowledge that if the Applicant is selected for a grant award, the Applicant must provide MEA with a complete, current, and accurate IRS Form W9. All information about the Applicant provided on this application form must exactly match the information as it appears on the Applicant’s IRS Form W9.
11. I, the Authorized Representative for the Applicant, certify that: (1) the Federal Tax Identification Number or Employer Identification Number provided on this application form is the correct Federal Tax Identification Number or Employer Identification Number for the Applicant, or the Applicant is waiting for a number to be issued to them; and (2) the Applicant is not subject to backup withholding because:  
    1. the Applicant is exempt from backup withholding; or
    2. the Applicant 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
    3. the IRS has notified the Applicant that it is no longer subject to backup withholding; and I am a U.S. citizen or other U.S. person (as defined in IRS Form W9).
12. I understand and acknowledge that any Grant award received through this program is taxable as income. Therefore, if a Grant award is provided to the Applicant for this project, the State of Maryland will send a 1099-G form, which the applicant must report as income on its federal and state tax returns. For more information, an Applicant should contact a qualified tax professional.
13. I understand and acknowledge that if a Grant award is provided for this project, MEA Representatives and MEA agents must have reasonable access to the relevant facility or facilities to conduct site inspections and measurement and verification activities, and to take photos or videos of the project, as deemed appropriate by MEA in consultation with the Grantee. If the relevant facility or facilities is (are) owned by (a) third party (parties), a written agreement between the Applicant and the facility (facilities) owner(s) is (are) required.
14. I understand and acknowledge that the FY23 Resilient Maryland program terms and conditions are subject to change at the discretion of MEA.
15. I understand and acknowledge that if MEA wards a grant to the Applicant, any grant award payment will be contingent upon the successful MEA review and approval of the Grantee’s submissions, including but not limited to: progress reports and requests for reimbursement, including supporting documentation, etc.
16. I understand and acknowledge that the FY23 Resilient Maryland program funding is limited as outlined in the Resilient Maryland Overview Document and FOA.

**[SIGNATURE PAGE TO FOLLOW]**

**The Authorized Representative for the Applicant must sign and date the section below to constitute a complete application form. Unsigned Application forms will result in the entire application package being rejected from MEA consideration. Applicants whose application packages are rejected for this reason are free to reapply.**

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| **X** |

**Name (Printed):**

**Title:**

**Date:**

**SUBMISSION INSTRUCTIONS**

**Submit this completed and signed application form and all required supporting documents as described in Section 4 to the following email address:**

[**RMP.MEA@Maryland.gov**](mailto:RMP.MEA@Maryland.gov)

**ALL APPLICATION PACKAGES ARE DUE TO MEA NO LATER THAN 5:00 P.M. EST, JANUARY 26, 2023. NO EXCEPTIONS WILL BE MADE.**

Please contact Brandon Bowser, MEA Resilient Maryland Program Manager, with any questions about completing this application form or for questions regarding the terms, conditions, rules, and restrictions of the Resilient Maryland program:

Email: [BrandonW.Bowser@Maryland.gov](mailto:BrandonW.Bowser@Maryland.gov)

Phone: 443.306.0304