Logo

Description automatically generated with medium confidenceLarry Hogan, *Governor*

Boyd K. Rutherford, *Lt. Governor*

Mary Beth Tung, *Director*

**Application Form**

FY22 Resilient Maryland Capital Development (RMCD)

Pilot Program

**Application Deadline: 5:00 P.M. EDT, Tuesday, April 19, 2022**

**Instructions:** Please thoroughly read the FY22 Resilient Maryland Capital Development (RMCD) Pilot Program (“RMCD Program,” “the Program”) Funding Opportunity Announcement (FOA), available on the Maryland Energy Administration (MEA) RMCD webpage, prior to completing and submitting the Application package. Providing concise and accurate information is important for presenting a good case to the RMCD Review Team. Please be sure that all required information is provided and all required documents specified by the FOA are included when submitting the Application package. An application missing required information will not be considered and will be rejected outright.

**Submit your complete Application package via email to** [**RMP.MEA@Maryland.gov**](mailto:RMP.MEA@Maryland.gov)**.**

**Section 1: Eligibility Requirements**

Verify that the project meets the following eligibility requirements, as specified by the FOA. Check each box upon verification that the criterion has been met. An a**pplication must meet all eligibility requirements to qualify for consideration under the Resilient Maryland program.**

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|  | **Site Location:** The proposed microgrid will be installed within and serve facilities located within the State of Maryland. |
|  | **DER Restrictions:** The proposed DER system under study does not include hydrocarbon fuel sources, with the exception of natural gas and propane for resilient CHP systems and diesel fuel for emergency standby diesel generators. |
|  | **Historical Properties:** The microgrid must not have an adverse effect on the historical significance of the property, as determined by the Maryland Historic Trust (MHT). The MEA Historical Preservation Specialist will review each application, and a more detailed review may be required by MHT. If an adverse effect is identified, the microgrid must be modified so that the effect is mitigated or it cannot be awarded funds from the RMCD Program. |
|  | **Prior Expenses Restriction:** RMCD funds cannot be used to offset costs that were incurred prior to the filing of an application with the RMCD program. |
|  | **Good Standing Requirement:** Non-governmental project developers, site owners, and system owners must be in Good Standing with the Maryland State Department of Assessments and Taxation (SDAT). |
|  | **Applicant Contribution/Leveraged Funds:** The Applicant must contribute and/or leverage at least **fifty percent (50%)** of the total cost of the project. This may be done in the form of cost-match, contributed labor, loans, bonds, third-party funds, equity investments, etc. |
|  | **General Provisions:** MEA grant programs are covered by general requirements that will be made part of the grant agreement between MEA and a grantee. A copy of the General Provisions document is available on [MEA’s website](https://energy.maryland.gov/Pages/all-incentives.aspx)[[1]](#footnote-1); this document will be incorporated into all MEA FY22 grant agreements. By checking this box, Applicant acknowledges that it will be required to adhere to these General Provisions if awarded a grant. |
|  | **Signature Requirements:** An authorized representative of the facility(ies) owner and the project development organization, if known at the time of application, must sign the Application Form. If the development organization is selected after the RMCD grant is awarded, the development organization must review this FOA and submit a signed letter on organization letterhead indicating that it has reviewed the FOA and agrees with all requirements contained within it. |

**Section 2: Required Documents (continues on next page)**

Before submitting this Application form, verify that each of the following required documents has been completed and is included. **The Application package will not be accepted for consideration if any of these documents are missing.**

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|  | **Complete and accurate FY22 RMCD Program Application Form (this form)** |
|  | **Cover Letter:** Ensure that the cover letter is on Applicant letterhead and conforms to all FOA requirements. |
|  | **Project Proposal:** Ensure that your proposal conforms to the FOA requirements. |
|  | **Feasibility Study:** Ensure that this document conforms to the FOA requirements. |
|  | **Preliminary Engineering and Designs:** Ensure that this document conforms to the FOA requirements. |
|  | **Pro Forma Financial Model:** Ensure that this document conforms to the FOA requirements. |
|  | **Greenhouse Gas Reduction Report:** Ensure that this document conforms to the FOA requirements. |
|  | **Implementation Barriers Report:** Ensure that this document conforms to the FOA requirements. |
|  | **Complete, current, and accurate IRS Form W9 for the Applicant organization** |
|  | **Maryland SDAT Certificate(s) of Good Standing OR PDF(s) of the SDAT Business Entity Search entry/entries indicating Good Standing status.** This is required for the Applicant organization and for any non-governmental project developer, site owner, or projected DER system owner known at the time of application to the Resilient Maryland program. |

**Section 3: Applicant Organization**

Complete all information regarding the Applicant organization below. **All information is required,** unless otherwise noted.

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| --- | --- |
| **Organization Name** |  |
| **Type of Organization  (Limit description to 1-5 words)** |  |

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| **Applicant Organization Street Address (As listed on IRS Form W9)** | |  | | | | |
| **City** |  | **State** | |  | **Zip Code** |  |
| **Federal Tax ID Number / Employer Identification Number** | | |  | | | |

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| **Authorized Representative\* (First and Last Name)** | |  | | |
| **Title** | |  | | |
| **Phone Number** |  | | **Email Address** |  |

***\*Individual with signatory authority to enter the Applicant organization into a Grant Agreement with MEA, if selected for an award. The Grant Agreement will list this individual (name and title) as the signatory on behalf of the Grantee.***

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| **Application Contact\* (First and Last Name)** | |  | | |
| **Title** | |  | | |
| **Phone Number** |  | | **Email Address** |  |

***\*Individual whom MEA may contact regarding questions or concerns about the material in the Application package.***

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| **Legal Counsel\* (First and Last Name)** | |  | | |
| **Title** | |  | | |
| **Phone Number** |  | | **Email Address** |  |

***\*Legal counsel representing the Applicant organization who is responsible for legal review of the Grant Agreement, if awarded.***

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| **Project Contact\* (First and Last Name)** | |  | | |
| **Title** | |  | | |
| **Phone Number** |  | | **Email Address** |  |

***\*Individual who will serve as Applicant’s point of contact for MEA throughout the duration of the Project, if selected for an award. Must be a representative of the Applicant organization.***

**Section 3-A: Developer/Contractor Information**

Complete all information regarding the project developer/contractor below, **if known at the time of application to the RMCD Program**. Otherwise, indicate below that this is not currently known and skip this section.

The project developer/contractor **IS NOT** CURRENTLY KNOWN (skip the section below).

The project developer/contractor **IS** CURRENTLY KNOWN (fill out the section below).

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| **Developer/Contractor Organization Name** |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Street Address** | |  | | | | | |
| **City** |  | | **State** | |  | **Zip Code** |  |
| **Federal Tax ID Number / Employer Identification Number** | | | |  | | | |

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| **Developer/ Contractor Contact (First and Last Name)** | |  | | |
| **Title** | |  | | |
| **Phone Number** |  | | **Email Address** |  |

Section 4: Project Information

Complete all information regarding the project below. **All information is required,** unless otherwise noted.

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| **What technologies will be installed to comprise this microgrid? Select all that apply.** | |
| Solar Photovoltaics (PV)  Wind Turbines  Battery Energy Storage  Thermal Energy Storage  Electrolysis (Hydrogen Energy Storage)  Electric Vehicle (EV) Charging  Emergency Backup Diesel Generation | CHP – Reciprocating Engine  CHP – Turbine/Microturbine  Fuel Cell  Anaerobic Digestion  Heat Recovery Steam Generator (HRSG)  Absorption Chiller  Other (Specify Below) |
| ***If other, please explain:*** | |

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| **How many buildings and/or facilities will the microgrid serve? Please specify by category (e.g. “Buildings,” “Pumping Stations,” Streetlights,” etc.)** |  |

|  |  |  |  |
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| **Local Electric Utility** | Baltimore Gas & Electric (BGE)  PEPCO  Potomac-Edison  SMECO  Delmarva Power & Light (DPL)  Choptank Electric Cooperative  Other **(Please specify):** | **Local Gas/Other Fuel Utility** | **Not Applicable**  Baltimore Gas & Electric (BGE)  WGL  Chesapeake Utilities  Sandpiper Energy  Columbia Gas  Other **(Please specify):** |

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| **Please describe the community, campus, or geographic boundaries where the microgrid will be located. A map or satellite photo from Google Earth, GIS, or similar 3D representation indicating the scope and boundaries of the microgrid will be helpful in evaluating the proposal. If available, please provide the street address(es) of facilities. Please limit your description to 250 or fewer words (excluding addresses).** |
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**Estimated Capital Cost**

Please provide the estimated, or quoted if applicable, total capital cost for equipment, installation, interconnection, and commissioning of the microgrid for which the Applicant Organization seeks funds under the RMCD Program.

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| **Estimated Total Capital Cost** | **$** |

**Grant Request Amount**

Please provide the total amount of capital development funds the Applicant Organization is requesting from the FY22 RMCD Program. Please note that the **maximum amount** that MEA anticipates awarding for any single project is $1,000,000. **Please also note** that MEA reserves the right to determine the final grant amount for any Grantee after review of all proposals received and consistent with funding availability at that time.

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| **MEA RMCD Grant Request Amount** | **$** |

**Section 5: Applicant Contribution**

The Applicant must contribute and/or leverage at least **fifty percent (50%)** of the total cost of the project. This may be done in the form of cost-match, contributed labor, loans, bonds, third-party funds, equity investments, etc. or a combination thereof. Applicants are encouraged to secure as much leveraged capital as possible toward the project.

**Please indicate the type and amount of contribution below.**

|  |  |  |
| --- | --- | --- |
| **Type of Contribution (If a combination of both, check both boxes)** | Cost-match  Value of Donated Labor | |
| **Amount of Contribution (Minimum is 50% of total project cost\*)** | Cost-match Amount | **$** |
| Value of Donated Labor | **$** |

*\*To calculate minimum contribution, multiply the Estimated Total Capital Cost from Section 4 by 0.5. Example: Total cost of $1,200,000 x 0.5 = $600,000 minimum Applicant contribution.*

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**Each Applicant is STRONGLY ENCOURAGED** **to participate in available incentive programs offered by the local utility.** Generally, all five (5) major EmPOWER MD utilities (BGE, PEPCO, Potomac Edison, SMECO, and Delmarva Power & Light (DPL)), as well as Washington Gas, offer incentives for energy efficient technologies and combined heat and power (CHP) systems. **The Applicant should contact a representative with the local utility to identify the specific incentives that are available. If no program is available to the Applicant, please explain.**

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| **By checking this box, I affirm that the Applicant organization will consult with its local utility companies to obtain information on incentives available for technologies in its microgrid.** |

Section 6: Electronic Communication

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 7: Applicant Certification and Signature**

**Instructions:** The Authorized Representative for the Applicant organization (hereafter “Applicant”) should carefully read the attestations and acknowledgements below before signing this Application form. If the Applicant has contracted with a project developer/contractor at the time of submitting the Application package, the Authorized Representative for the project developer/contractor should also carefully read the attestations and acknowledgements before signing the Application Form.

**Attestations and Acknowledgements**

**By signing this Application, I certify under penalty of perjury that the information provided on this Application form and in each of its attachments (hereafter “Application Package”) is complete, accurate, and true. I further certify that I am authorized to submit this Application Package on behalf of the Applicant, and agree to the terms and conditions stated 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 FY22 Resilient Maryland Capital Development Pilot Program Funding Opportunity Announcement (FOA).
2. I understand and acknowledge that MEA accepts Application Packages and awards Grants on a competitive basis, and that Application packages are due to MEA **no later than 5:00 P.M. EDT, Tuesday, April 19, 2022.**
3. I affirm that the project for which the grant funds have been requested will be located on (a) facility (facilities) within the State of Maryland, and it will serve (a) facility (facilities) located within the State of Maryland.
4. I understand and acknowledge that the use of any funds awarded under this Grant Program for projects benefitting facilities and/or offtakers not located within the State of Maryland **is strictly prohibited.**
5. I understand and acknowledge that submission of this Application Package does not guarantee that a Grant will be awarded for the project.
6. I understand and acknowledge that Grant funds cannot be used to offset costs that are incurred by the Applicant organization or any project developer/contractor prior to the execution of a Grant Agreement between the Applicant and the Maryland Energy Administration.
7. I understand and acknowledge that, if selected for an award, the project must not have an adverse effect on the historical significance of the property, as determined by the Maryland Historic Trust (MHT). The MEA Historical Preservation Specialist will review each application, and a more detailed review may be required by MHT. If an adverse effect is identified, the microgrid must be modified so that the effect is mitigated or it cannot be awarded funds from the RMCD Program.
8. I understand and acknowledge that the Maryland Energy Administration reserves the right to determine the final award amount for each grant.
9. I understand and acknowledge that the Maryland Energy Administration or its representative(s) may use photos and video of the Applicant facility (or the facility under analysis, subject to written agreement with the Maryland Energy Administration by the facility owner), and data presented in my final reports for marketing, publicity, and advertising purposes. The Maryland Energy Administration 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 selected for a Grant award, an Applicant must provide the Maryland Energy Administration with a complete, current, and accurate IRS Form W9. All Applicant information on the IRS Form W9 must match the information provided on this Application form.
11. Under penalties of perjury, I, the Authorized Representative for the Applicant, certify that: the Federal Tax Identification Number/Employer Identification Number on this form is the correct Tax Identification Number/Employer Identification Number (or I am waiting for a number to be issued to me); I am not subject to backup withholding because:
12. the Applicant is exempt from backup withholding, or
13. 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
14. 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).
15. 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, Applicants should contact a qualified tax professional.
16. I understand and acknowledge that if a Grant award is provided to the Applicant for this project, MEA Representatives must have reasonable access the relevant facility 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 is owned by a third party, a written agreement between the applicant and the facility owner is required.
17. I understand and acknowledge that the FY22 Resilient Maryland program terms and conditions are subject to change at the discretion of MEA.
18. I understand and acknowledge that if MEA awards 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 progress reports and requests for reimbursement (including supporting documentation).
19. I understand and acknowledge that FY22 Resilient Maryland Capital Development Pilot Program funding is limited as outlined in the Resilient Maryland Capital Development Pilot Program FOA.

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| **AUTHORIZED APPLICANT SIGNATURE (REQUIRED)** | |
| **Authorized Signature:** |  |
| **Name (First and Last):** |  |
| **Title:** |  |
| **Applicant Organization Name:** |  |
| **Date:** |  |
| **AUTHORIZED DEVELOPER/CONTRACTOR SIGNATURE (IF CURRENTLY KNOWN, OTHERWISE SKIP)** | |
| **Authorized Signature:** |  |
| **Name (First and Last):** |  |
| **Title:** |  |
| **Developer/Contractor Organization Name:** |  |
| **Date:** |  |

**SUBMIT THIS APPLICATION VIA EMAIL TO:**

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

**APPLICATIONS ARE DUE BY 5:00 P.M. EDT, TUESDAY, APRIL 19, 2022.**

**APPLICATIONS SUBMITTED AFTER THIS DEADLINE WILL NOT BE ACCEPTED.**

Any questions or concerns regarding Program requirements, Application instructions, or general Resilient Maryland questions should be directed to **Brandon Bowser, Energy Resilience Program Manager,** at [BrandonW.Bowser@Maryland.gov](mailto:BrandonW.Bowser@Maryland.gov) or via phone at (443) 306-0304.

1. <https://energy.maryland.gov/Pages/all-incentives.aspx> [↑](#footnote-ref-1)