

Interest Form

Please fill out the following form and include it in your application submission. Try your best to not leave any sections blank.

Applicant Details		
Project Name		
Applicant Organization Name		
Applicant Organization Address		
Municipal Project Manager (name, title, phone, and email)		
Designated Point of Contact (name, title, phone, and email of the person who will serve as the main point of contact with the State and Technical Consultant)		
Additional Contact(s) for the purpose of this Request for Applications (name, title, phone, and email)		
Proposed Buildings (Add rows as necessary)		
What is the estimated size of the site loads? (e.g. < 100 kW, between 100 and 500 kW, greater than 500 kW)		
Critical Facilities		
Building Name	Ownership (Public or Private)	Location
Non-Critical Buildings		
Building Name	Ownership (Public or Private)	Location

Are there existing resources (e.g. solar, batteries, CHP) within the proposed microgrid? Add rows as necessary.		
Resource Type	Capacity	Location, Installation Year
Team		
Who is your local electric utility?		
Have you engaged in discussion with your utility regarding a potential microgrid project?		
List below all other project stakeholders, including, but not limited to property owners, microgrid operators, community officials, business organizations.		