This document provides the Energy Commission with basic information about the Applicant and its subcontractors. Each Applicant must complete, sign and include this attachment in its Full Application.

The CEC **may** have waived the requirement for a signature on application materials for this solicitation for electronic submissions. If a notice, regarding CEC’s waiver of the signature requirement appears here: <https://www.energy.ca.gov/funding-opportunities/solicitations>, the waiver applies to this solicitation. In the event of a conflict between the notice and any language in this solicitation regarding signatures, the notice will govern.

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| **Applicant’s Legal Name** | **Federal ID Number** |
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| **Proposed Term (YYYY/MM/DD)** | | |
| **Start Date** | **Production Start Date** | **End Date** |
| /    / | /    / | /    / |

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| **Funding** | | | |
| **Amount of Funds Requested** | $ | | |
| **Cash Match Funding** | $ | **In-Kind Match Funding** | **$** |
| **Total Project Match Secured** | $ | | |
| **Total Project Cost** | $ | | |

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| **Title of Project** |
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| **Project Location** | **Disadvantaged Community** |
|  | Yes  No  **CalEnviroScreen 3.0 Percentile Range**:      % |
| **Does applicant or project partner currently own the project site?**  Yes No  **(Please add additional row(s) or sheet(s) if necessary)** | |
| **Is applicant or project partner currently leasing the project site?**  Yes No | |

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| **Project Description (brief paragraph, see instructions in Application Manual)** |
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| **California Environmental Quality Act (CEQA) Compliance** |
| 1. **Provide the name and contact information for the Lead Agency responsible for certifying your CEQA compliance:** 2. **Has your Lead Agency made a CEQA determination for your proposed project?**   Yes, a determination has been made and:  It is a “Project” ” as defined under CEQA (PRC 21065 and 14 CCR 15378). Skip to question 3.  It is NOT a “Project”. Explain why proposed project is not considered a “Project” and complete the following:  **Proposed project will not cause direct physical change in the environment or a reasonably foreseeable**  **indirect physical change in the environment because:**  No, a determination has not been made. Provide an explanation of when the Lead Agency determination is expected.   1. **If proposed project is considered a “Project” under CEQA, has environmental review been completed?**   Yes (if so, provide documentation in this application)  No   **If yes, what is the determination or indication of the expected compliance pathway given for your project by the Lead Agency? (e.g., Categorical exemption, Negative Declaration, Mitigated Neg Dec)**   1. **If not complete, provide the expected compliance pathway and date by which your Lead Agency expects the review to be completed.** |

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| **Permitting Approval** |
| **Identify the status of the following permits, whether they will be a modification of an existing permit, and the date when they are anticipated to be or have been approved.**   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  | Approved | Under Permit Agency Review | Preliminary Discussion | Not Started | Not Applicable | Modification of Existing Permit? | Expected Approval Date | | CEQA EIR |  |  |  |  |  |  |  | | CEQA Mitigated Negative Dec. |  |  |  |  |  |  |  | | CEQA Negative Declaration |  |  |  |  |  |  |  | | Fire Marshall |  |  |  |  |  |  |  | | Conditional Use Permit |  |  |  |  |  |  |  | | Building |  |  |  |  |  |  |  | | Air |  |  |  |  |  |  |  | | Water |  |  |  |  |  |  |  | | Waste |  |  |  |  |  |  |  | | Authority to Construct |  |  |  |  |  |  |  | | Other 1: |  |  |  |  |  |  |  | | Other 2: |  |  |  |  |  |  |  | | Other 3: |  |  |  |  |  |  |  | |

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| **Applicant’s Project Manager** (serves as point of contact for all communications) | | |
| Name: |  | |
| Address: |  | |
| City, State, Zip: |  | |
| Phone/ Fax: |  | |
| E-Mail: |  | |
| Website: |  | |
| **CEC Project Experience** (please list all current and past projects funded by the California Energy Commission that the Applicant team is or has been involved in; if project is active, please list estimated completion date) (Please add additional row(s) or sheet(s) if necessary) | | |
| Agreement # | Project Title: | Completion Date: |
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| **Applicant Is** | | | |
| Private Company *(including non-profits)* | | | |
| CA State Agency *(including UC and CSU)* | | | |
| Government Entity *(i.e. city, county, federal government, air/water/school district, joint power authorities, university from another state)*  Other (specify) | | | |
| **Is Applicant subcontracting any services?**  Yes No  **(Please add additional row(s) or sheet(s) if necessary)** | | | |
| Subcontractor 1 | Insert Subcontractor Legal Name | Major Sub:  Yes  No | |
| Contact Name:  Address: |  | Contractor Type: | Choose an item. |
| City, State, Zip: |  | | |
| Phone/ Fax: |  | | |
| E-Mail: |  | | |
| Website: |  | | |
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| Subcontractor 2 | Insert Subcontractor Legal Name | Major Sub:  Yes  No | |
| Contact Name:  Address: |  | Contractor Type: | Choose an item. |
| City, State, Zip: |  | | |
| Phone/ Fax: |  | | |
| E-Mail: |  | | |
| Website: |  | | |
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| Subcontractor 3 | Insert Subcontractor Legal Name | Major Sub:  Yes  No | |
| Contact Name  Address: |  | Contractor Type: | Choose an item. |
| City, State, Zip: |  | | |
| Phone/ Fax: |  | | |
| E-Mail: |  | | |
| Website: |  | | |
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| Subcontractor 4 | Insert Subcontractor Legal Name | Major Sub:  Yes  No | |
| Contact Name: Address: |  | Contractor Type: | Choose an item. |
| City, State, Zip: |  | | |
| Phone/ Fax: |  | | |
| E-Mail: |  | | |
| Website: |  | | |
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| Subcontractor 5 | Insert Subcontractor Legal Name | Major Sub:  Yes  No | |
| Contact Name: Address: |  | Contractor Type: | Choose an item. |
| City, State, Zip: |  | | |
| Phone/ Fax: |  | | |
| E-Mail: |  | | |
| Website: |  | | |

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| **Applicant’s Feedstock Supplier** | |
| **Does Applicant have a feedstock supply agreement(s) secured?**   Yes No  **(Provide further information below if not confidential; Please add additional row(s) or sheet(s) if necessary)** | |
| Feedstock Supplier 1 | Insert Feedstock Supplier's Legal Name, if not confidential |
| Contact Name:  Address: |  |
| City, State, Zip: |  |
| Phone/ Fax: |  |
| E-Mail: |  |
| Website: |  |
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| Feedstock Supplier 2 | Insert Feedstock Supplier's Legal Name, if not confidential |
| Contact Name:  Address: |  |
| City, State, Zip: |  |
| Phone/ Fax: |  |
| E-Mail: |  |
| Website: |  |

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| **Applicant’s Fuel Off-Taker** | |
| **Does Applicant have a hydrogen fuel off-take agreement(s) secured?**   Yes No  **(Provide further information below if not confidential; Please add additional row(s) or sheet(s) if necessary)** | |
| Fuel Off-Taker 1 | Insert Fuel Off-Taker's Legal Name, if not confidential |
| Contact Name:  Address: |  |
| City, State, Zip: |  |
| Phone/ Fax: |  |
| E-Mail: |  |
| Website: |  |
|  | |
| Fuel Off-Taker 2 | Insert Fuel Off-Taker's Legal Name, if not confidential |
| Contact Name:  Address: |  |
| City, State, Zip: |  |
| Phone/ Fax: |  |
| E-Mail: |  |
| Website: |  |

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| **Applicant’s Other Project Partners** | | | |
| **Does Applicant have other key project partners that add to the project’s viability?**   Yes No  **(Please add additional row(s) or sheet(s) if necessary)** | | | |
| Other Project Partner 1 | Insert Other Project Partner's Legal Name | | |
| Contact Name:  Address: |  | Partner Type: |  |
| City, State, Zip: |  | | |
| Phone/ Fax: |  | | |
| E-Mail: |  | | |
| Website: |  | | |
|  | | | |
| Other Project Partner 2 | Insert Other Project Partner's Legal Name | | |
| Contact Name:  Address: |  | Partner Type: |  |
| City, State, Zip: |  | | |
| Phone/ Fax: |  | | |
| E-Mail: |  | | |
| Website: |  | | |
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| Other Project Partner 3 | Insert Other Project Partner's Legal Name | | |
| Contact Name:  Address: |  | Partner Type: |  |
| City, State, Zip: |  | | |
| Phone/ Fax: |  | | |
| E-Mail: |  | | |
| Website: |  | | |

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| **Hydrogen Production Technology** | | | | |
| **Renewable hydrogen production method/technology (e.g., SMR, electrolysis, etc.):** | | | | |
| **Proposed project’s renewable hydrogen production capacity (in kilograms per day):** | | | | |
| **Proposed project’s anticipated operational date:** | | | | |
| **Years of operational experience for proposed hydrogen production technology:** | | | | |
| **Are there any reference installations of the proposed production technology provider?**  Yes No  **If yes, provide a list of reference locations below. Prioritize by projects in California, followed by in USA.**  **(Please add additional row(s) or sheet(s) if necessary)** | | | | |
|  | **Location**  **(City, State, Country)** | **Hydrogen Production Capacity (kg/day)** | **Current Hydrogen Production (kg/day)** | **Years Operational** |
| **Reference 1** |  |  |  | - |
| **Reference 2** |  |  |  | - |
| **Reference 3** |  |  |  | - |
| **Reference 4** |  |  |  | - |
| **Reference 5** |  |  |  | - |

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| **Feedstocks and Products** | | | | | |
| **List the primary feedstock(s) and annual quantities that will be processed (e.g., dairy biogas, solar electricity, etc.).**    Feedstock 1:       Quantity:  Feedstock 2:       Quantity:  Feedstock 3:       Quantity:  Feedstock 4:       Quantity: | | | | | |
| **List any value added co-products and annual quantities that will be produced per amount of feedstock.**  Co-product 1:       Quantity:  Co-product 2:       Quantity:  Co-product 3:       Quantity:  Co-product 4:       Quantity: | | | | | |
| **Will electricity co-generation occur?**  Yes  No | | | | | |
| **Estimated annual electricity generated (or rated capacity):** | | | | | |
| **Other project co-benefits:** | | | | | |
| **Carbon Intensity (Provide carbon intensity of the project’s resulting hydrogen fuel in grams of CO2-equivalent per megajoule (gCO2e/MJ)). Carbon intensities must be calculated using a method that conforms to the California Air Resources Board’s Low Carbon Fuel Standard (LCFS). Provide assumptions and calculations to substantiate claimed carbon intensities below.** | | | | | |
|  | **Hydrogen Source** | **Process Energy** | **End Use Vehicle Class (e.g., LDV, MDV, HDV)** | **LCFS Fuel Pathway Code,**  **if available** | **Carbon Intensity (gCO2e/MJ)** |
| **Fuel Pathway 1** |  |  |  |  |  |
| **Fuel Pathway 2** |  |  |  |  |  |
| **Explanation:** | | | | | |

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| **Certifications:**  I hereby authorize the California Energy Commission to make any inquiries necessary to verify the information I have presented in my Application.  I hereby certify that this application does not contain any confidential or proprietary information other than information submitted in accordance with Section VII.D of the solicitation manual.  I hereby certify to the best of my knowledge and belief that I have read, understand, and do hereby accept the terms and conditions contained within the solicitation, including the provisions of the Agreement Terms and Conditions and, further, I am willing to enter into an agreement with the Energy Commission to conduct the proposed project according to the terms and conditions without negotiation.  I hereby certify to the best of my knowledge that the information contained in this Application is correct and **complete**. | | | |
| Signature of Authorized Representative |  | Date: |  |