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 Pre-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** |  |
| **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.**

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|  | 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 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| 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 NameAddress: |       | 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: |       |
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| 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: |       |
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| Other Project Partner 2 | Insert Other Project Partner's Legal Name |
| Contact Name:Address: |        | Partner Type:  |  |
| City, State, Zip: |       |
| Phone/ Fax: |       |
| E-Mail: |       |
| Website: |       |
|  |
| 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.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: |       |