

Commercial Charging Station Incentive Program Agreement

CUSTOMER INFORMATION

Name Listed on PWP Account:	PWP Account Number:	Company/Customer Name:
Service Address:	Phone Number:	Email Address:

CHARGING STATION INFORMATION

Charging Station Brand and Model:	Number of Charging Stations Installed:	Installation Date:
Description of Site (check all that apply):		
Commercial	Workplace	MUD
School	Income-Qualified	Fleet
DAC	Publicly Accessible	Other

CONTRACTOR INFORMATION

Company Name:	Company Address:	License Number:
Company Representative:	Representative Phone Number:	Representative Email Address:

REBATE SUPPORTING DOCUMENTS

Incentive Amount Requested:

Fill out Program Agreement and attach all of the following required documents:

- Completed and signed Commercial Charging Station Incentive Program Agreement
- Site Plan and Single Line Diagram
- All charging station equipment and installation invoices
- Copy of the final and signed City's Building & Safety permit job card

The Commercial Charging Station Incentive Program Agreement and all supporting documents must be submitted within 180 days from completion of the charger installation (Inspection Sign-off Date).

Email documents to: ElectricTransportation@cityofpasadena.net or mail documents to address below:

Pasadena Water and Power
Attn: Commercial Charging Station Incentive Program
150 S. Los Robles Ave. Suite 200
Pasadena, CA 91101

ENVIRONMENTAL ATTRIBUTES AND BENEFITS: In consideration of Customer's receipt of the Rebate, Customer hereby assigns, transfers, and conveys to PWP, without limitation, any and all environmental attributes and/or benefits associated with or attributable to the EV charging station, energy usage, and/or energy usage data, including, but not limited to, the associated California Low Carbon Fuel Standard Credits ("LCFS") or successor credits.

CUSTOMER SIGNATURE

I certify that I am authorized to sign the Commercial Charging Station Incentive Program Agreement on behalf of the Customer listed above. I certify that the information on this Agreement is true and correct. I understand and agree to the Commercial Charging Station incentive Program Terms and Conditions. I will allow PWP, at its discretion, to conduct an on-site inspection to verify the above information.

Customer Signature	Print Name
Date	Title

COMMERCIAL CHARGING STATIONS DETAIL FORM

Customer: _____

Customer Address: _____

PWP Account #: _____

Facility Owner's Federal Employer Identification #: _____

No. of Stations	Station Type	Station Brand	Station Model	Station Serial Numbers	Chargers per Station	Charger End-Users	Station GPS (xx.xxxxxx, -xx.xxxxxx)	Rebate Amount

INSTRUCTIONS FOR COMPLETING TABLE

- Federal Employer Identification #:** Enter the the facility owner's FEIN, typically listed on a W-9
- No. of Stations:** Enter the number of charging stations of the same type, model, end-user, etc.
- Station Type:** Specify DCFC, Level 2, Level 1
- Station Brand:** Specify brand of charger (ChargePoint, Tesla, etc.)
- Station Model:** Enter complete model number
- Station Serial Numbers:** Enter serial number for each station (use separate row for each station)
- Chargers per Station:** Enter the number of charging ports per station (i.e. dual port = 2)
- Charger End-Users:** Enter "Public", "Fleet", "Workplace", "MUD", "DAC", or "Other"
- Station GPS (xx.xxxxxx, -xx.xxxxxx):** Enter GPS coordinates for each station in 6-digit decimal format
- Rebate Amount:** Enter the expected rebate amount for all stations of the same type