


<h1>ICF</h1>	Solar On Multifamily Affordable Housing Incentive Claim Form		
	Form Version	ICF-V3-2021	
	Application Number	[XXX-SOMAH-XXXXX]	
	Preparation Date	[Current Date]	

PROJECT SITE INFORMATION	
Site Address	[Project Site Address]
City, State, Zip Code	[Project Site City, State, Zip Code]

HOST CUSTOMER	
Name of Customer of Record	[Name of Customer of Record]
Contact Name	[Host Customer Name]
Company	[Host Customer Company]
Mailing Address	[Host Customer Address]
City, State, Zip Code	[Host Customer City, State, Zip Code]
Phone Number	[Host Customer Phone Number]
Email	[Host Customer Email]

SYSTEM OWNER	
Contact Name	[System Owner Name]
Company	[System Owner Name]
Mailing Address	[System Owner Address]
City, State, Zip Code	[System Owner City, State, Zip Code]
Phone Number	[System Owner Phone Number]
Email	[System Owner Email]

SOLAR CONTRACTOR	
Contact Name	[Solar Contractor Name]
Company	[Solar Contractor Company]
Mailing Address	[Solar Contractor Address]
City, State Zip Code	[Solar Contractor City, State, Zip Code]
Phone Number	[Solar Contractor Phone Number]
Email	[Solar Contractor Email]
CSLB License Number	[Solar Contractor CSLB License Number]

EQUIPMENT & SYSTEM INFORMATION		
System Purchase Type	[Host Customer Owned/PPA/Solar Lease]	
PV System Specification	[PV System Equipment, Tilt, Azimuth, Shading]	
CEC-AC System Rating	0 kW CEC-AC	
CSI-AC System Rating	0 kW CSI-AC	
Property kWh Offset		
	Tenant Area	Common Area
Estimated Annual Offset	0 kWh	0 kWh
Maximum Incentivized Offset	0 kWh	0 kWh
Unincentivized Offset	0 kWh	0 kWh

Associated Costs					
Photovoltaic Modules	Inverter(s)	Carport(s)	PMRS	Permitting Fees	Balance of System
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total Project Cost:					\$0.00

PERFORMANCE MONITORING AND REPORTING SERVICE
 [Contracted Performance Monitoring and Reporting Service (PMRS) Company]

PROJECT INCENTIVE CALCULATION		
	Tenant Area	Common Area
Incentive Level	\$0.00	\$0.00
Load Allocation	0%	0%
Incentive Calculation Details *System Design Factor ** The total incentive amount cannot exceed the total project cost, minus incentives from other programs		[Incentive Calculation Details] = \$0.00
Total Approved Incentive Amount		\$0.00
Progress Payment Amount		\$0.00
Final Incentive Payment Amount		\$0.00
Method of Payment		[Electronic payment or check]

PAYEE	
Contact Name	[Payee Name]
Company	[Payee Company]
Mailing Address	[Payee Address]
City, State, Zip Code	[Payee City, State, Zip Code]
Phone Number	[Payee Phone Number]
Email	[Payee Email]

SIGNATURES			
Host Customer	System Owner	Contractor	Payee
[Host Customer Name] [Host Customer Company]	[System Owner Name] [System Owner Company]	[Contractor Name] [Contractor Company Name]	[Payee Name] [Payee Company]
_____ Signature	_____ Signature	_____ Signature	_____ Signature
_____ Date	_____ Date	_____ Date	_____ Date