

# MARYLAND

## COMMUNITY SOLAR ENERGY GENERATING SYSTEM PILOT PROGRAM APPLICATION



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An Exelon Company

Send applications via Email to:

[CommunitySolar@pepco.com](mailto:CommunitySolar@pepco.com)

(866) 634-6977 - Phone

**INSTRUCTIONS for completing and submitting an application to  
participate in Maryland's Community Solar Energy Generating System  
Pilot Program**

1. Applications to enter the Pilot Program will not be accepted until the CSEGS has been provided a Conditional Authorization to Install from Pepco. A Conditional Authorization to Install is an Authorization to Install conditioned on the CSEGS facility being accepted into the CSEGS Pilot Program.
2. Pepco will not accept Pilot Program Applications before 12 noon on October 26, 2018.
3. Pilot Program Applications will only be accepted electronically through email to CommunitySolar@pepco.com.
4. A Subscriber Organizations should request delivery receipt from their email system if they want confirmation that their email was received.
5. Subscriber Organizations must indicate their intention to participate in the CSEGS Pilot Program in one of the following categories:
  - a. Low and Moderate Income;
  - b. Small, Brownfield, Other; or
  - c. Open.
6. Applicants must include or attach the following with their application:
  - a. Proof of all applicable permits must be attached to your pilot application.
  - b. Proof of site control must be attached to your pilot application. Pepco will accept a memorandum of lease or a memorandum of an option to purchase or lease as proof of site control.
  - c. Proof of brownfield status, if applicable, must be attached to the pilot application.
7. Instructions for providing subscriber information will be provided when a project is accepted into the Pilot Program.

# MARYLAND

## COMMUNITY SOLAR ENERGY GENERATING SYSTEM (CSEGS) PILOT PROGRAM APPLICATION

**Application Submittal Date:** \_\_\_\_\_

**Application Type:**  Original,  Revision

### **SECTION I: SUBSCRIBER ORGANIZATION INFORMATION**

Legal Name: \_\_\_\_\_

MD PSC Subscriber Organization ID #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

**Type of Organization** (Federal Tax Classification – check all that apply):

- Individual/Sole Proprietor,  C Corporation,  S Corporation,  Partnership,  Trust/estate,  
 Limited Liability Company,  Other (please specify) \_\_\_\_\_

MD Business License # (if applicable): \_\_\_\_\_

Type of Subscriber Organization Authorization

- Type A. Proposed Owner and/or Operator of a CSEGS  
 Type B. Proposed Collective Group of Subscribers of a single CSEGS  
 Type C. Proposed Non-Profit Owner and/or Operator of a CSEGS

### **Primary Contact Information:**

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Mailing Address (If other than above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

E-Mail Address (Required): \_\_\_\_\_

**Alternate Contact Information:**

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Mailing Address (If other than above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

E-Mail Address (Required): \_\_\_\_\_

**SECTION II: COMMUNITY SOLAR ENERGY GENERATING SYSTEM INFORMATION**

Facility Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Local Government Jurisdiction (City, County, Town, Etc.):

\_\_\_\_\_

Pilot Program Category - (Must select one)

Open  LMI  Small/Brownfield/Other

Maximum Facility Output Rating: \_\_\_\_\_ kW AC

Estimated Gross Annual Energy Production: \_\_\_\_\_ kWh

Projected In-Service Date: \_\_\_\_\_

Estimated Number of Subscribers for the CSEGS: \_\_\_\_\_

**GENERATOR FACILITY OWNER (if different than Subscriber Organization)**

Legal Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

**Type of Organization** (Federal Tax Classification – check all that apply):

Individual/Sole Proprietor,  C Corporation,  S Corporation,  Partnership,  Trust/estate,  
 Limited liability company,  Other (please specify) \_\_\_\_\_

MD Business License # (if applicable): \_\_\_\_\_

**Contact Information:**

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Mailing Address (If other than above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

E-Mail Address (Required): \_\_\_\_\_

**PROPERTY OWNER (if different than Generating Facility Owner)**

Legal Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

**Type of Organization** (Federal Tax Classification – check all that apply):

- Individual/Sole Proprietor,  C Corporation,  S Corporation,  Partnership,  Trust/estate,
- Limited liability company,  Other (please specify) \_\_\_\_\_

MD Business License # (if applicable): \_\_\_\_\_

**Contact Information:**

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Mailing Address (If other than above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

E-Mail Address (Required): \_\_\_\_\_

**REQUIRED ATTACHMENTS**

Attachment A: Proof of application for all applicable permits consisting of a receipt confirming the filing fee from a local jurisdiction demonstrating application for at least one of the following permits: (please circle which of the applicable permits listed below is being provided)

- a. Site Plan Review Application;
- b. Zoning Conditional Use Application;
- c. Zoning Variance Application;
- d. Zoning Certificate of Use Application;
- e. Special Exception Application;
- f. Board of Appeals Hearing Application; or
- g. Building Permit Application.
- h. Other (must provide written description of evidence being provided)

If one of the preceding is not available due to preliminary action required by the jurisdiction, the Subscriber Organization may provide a receipt confirming completion of

the preliminary action in lieu of one of the permits listed above. If a subscriber organization is unable to provide confirmation of the required permit application within 120 days of application, the Company may rescind the award of project capacity.

Attachment B: Proof of site control must include one of the following: (please circle with of the following if being provided)

- a. Evidence of property ownership;
- b. An executed lease agreement;
- c. A signed option to purchase; or
- d. A signed option to lease.

Attachment C: Evidence to brownfield status (if applicable) to include one of the following: (please circle which of the following is being provided)

- a. Inclusion of the site on a list of contaminated or polluted sites maintained by a Federal or State agency;
- b. Inclusion of the site on the MDE Land Restoration Program List, Voluntary Cleanup Program Notice of Application List, or Closed Landfills List;
- c. A letter of certification from the MDE indicating that a closed landfill or contaminated/polluted site is under its regulation;
- d. A copy of a state-issued surface mining permit or license;
- e. A USGS map indicating that the site has been mined;
- f. A letter of certification from a geotechnical consulting firm certifying that surface mining operations were performed at the site.

**SECTION III: SUBSCRIBER INFORMATION**

Information on a CSEGS's subscribers is not required along with this Pilot Program application. Instructions for providing subscriber information will be provided to the Subscriber Organization when the CSEGS is accepted into the Pilot Program. Subscriber information will be provided in the form of a CSEGS Subscriber Information Spreadsheet which is provided on the Pepco's website at [www.pepco.com/community-commitment/renewable-energy/green-power-connection/md/maryland-community-nem/](http://www.pepco.com/community-commitment/renewable-energy/green-power-connection/md/maryland-community-nem/).

**SECTION IV: SUBSCRIBER ORGANIZATION AUTHORIZED SIGNATURE**

I hereby certify for the Subscriber Organization that:

- 1) I have read and understand the Pepco's Community Solar Schedule "CS" ("CS Tariff") and Pepco's Community Net Metering Rider "CNM"; and
- 2) I hereby agree to comply with the CS Tariff; and
- 3) I affirm that the Subscriber Organization has the legal right to sell all electricity exported by the Community Solar Energy Generating System listed in this application to Pepco.
- 4) I agree to comply with all of Maryland's Community Solar Energy Generating System Pilot Program requirements.
- 5) To the best of my knowledge, all of the information provided in this application is complete and true.
- 6) I consent to permit the Maryland Public Service Commission and Pepco to exchange information regarding this application, and the customers/subscribers to which this application applies.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_



Attachment A  
Proof of Application for all Applicable Permits

Attachment B  
Proof of Site Control

Attachment C  
Evidence to Brownfield Status (if applicable)