

Pierce County C-PACER Program

Attachment 1: Project Application Checklist

APPLICATION INFORMATION	APPLICANT-PROVIDED INFORMATION (Completed by Applicant)	ACCEPTED DOCUMENTATION (Provided by Applicant)	VERIFIED / NOTES (Completed by Program Administrator)
PROPERTY ADDRESS		DEED or TITLE INSURANCE REPORT or ASSESSOR / TREASURER OFFICIAL RECORD The address must be within Pierce County.	
PROPERTY OWNER:	Legal name(s) of Owner(s) (LIST ALL): Name of contact person: Phone number: Email address:	DEED TITLE INSURANCE REPORT All names must match exactly what is on the Title Insurance Report. If the name(s) is different: Certified copy of personal/corporate name change; Certified copy of merger/sale document reflecting name change; Certified copy of Power of Attorney	
QUALIFYING PROPERTY	Is this Property: ___ commercial ___ agricultural ___ industrial ___ multi-family of 5+ units	ASSESSOR / TREASURER OFFICIAL RECORDS APPRAISAL ZONING REPORT GROUND LEASE (if applicable)	
QUALIFYING OWNER	Is property owned by a ___ limited liability company ___ general or limited partnership ___ corporation ___ individual/Sole proprietorship ___ trust	If property is held by a limited liability company, general or limited partnership or a corporation, the applicant should include a copy of the certificate of formation, organization, incorporation or similar document and a good standing certificate/certificate of existence from the state or organization and, if not organized in Washington, a certificate of registration to conduct business in Washington as a foreign entity. If a trust, a copy of the trust agreement or a trustees' certificate. If an individual, a copy of a valid driver's license.	

		If the application is to be signed by a party other than the applicant, then, in addition to the foregoing, a power of attorney or corporate resolution authorizing said party.	
CAPITAL PROVIDER	<p>Legal Name:</p> <p>Name of contact person:</p> <p>Phone number:</p> <p>Email address:</p> <p>Evidence of qualifications: <input type="checkbox"/> Registered capital provider in more than 2 states <input type="checkbox"/> Federal or state-chartered bank or credit union <input type="checkbox"/> I am a Washington-based capital provider and submitting additional information, attached.</p>	<p>If a federal or state-chartered bank, or credit union, the certificate of organization or similar document.</p> <p>If not an entity in #1, evidence of registration as a capital provider in two states.</p> <p>If a private company, whose principal place of business is located in the state of Washington, wishes to be a capital provider, and the person or company is not an entity in #1 or #2 above, documentation that: the entity is qualified to do business in the State of Washington, maintains any necessary licenses or permits necessary to conduct its business in the State of Washington, and one of the following: A copy of the most recent (within the last year) audited financial statement; OR Copy of the most recent (within the last year) Federal or Washington state financial institution regulatory filing. NOTE: if audit is unqualified or the entity is not in good standing with any regulatory filing, application may be denied.</p>	
QUALIFYING IMPROVEMENT CERTIFICATION	<p>The improvements sought are for: <input type="checkbox"/> existing building <input type="checkbox"/> new construction</p> <p>The improvement(s) sought are, per the definitions in the Program Guidebook (check all that apply): <input type="checkbox"/> Energy or fossil fuel demand reduction improvement <input type="checkbox"/> Renewable energy improvement <input type="checkbox"/> Water conservation improvement <input type="checkbox"/> Water quality improvement <input type="checkbox"/> Resiliency improvement</p>	Attach description of improvements and certifications for improvements sought, including documentation of the appropriate license/qualifications required by the Guidebook.	

	<p>If Resiliency, specify type:</p> <p>___ seismic retrofits</p> <p>___ flood mitigation</p> <p>___ stormwater management</p> <p>___ fire suppression</p> <p>___ wildfire resistance</p> <p>___ wind resistance</p> <p>___ energy storage</p> <p>___ energy microgrids</p> <p>___</p> <p>other_____</p>		
SIGNIFICANT PUBLIC BENEFIT CERTIFICATION (Existing Building)	<p>The Qualified Improvement, or the resulting performance of the system or structure as a whole if the Qualified Improvement cannot be independently evaluated, satisfies one of the following:</p> <ol style="list-style-type: none"> 1. Meets or exceeds most stringent code requirements for one of the following: <ul style="list-style-type: none"> ___ energy efficiency ___ water efficiency ___ safe drinking water, or ___ building resiliency 2. ___ Meets or exceeds energy performance standards in Chapter 194-50 WAC 3. ___ Reduces energy demand or greenhouse gas emissions by 20% or more 4. ___ Replaces fossil-fuel burning system with electric option 	<p>Attach description of significant public benefit and method of evaluation conducted by the appropriate license/qualifications required by the Guidebook.</p>	
SIGNIFICANT PUBLIC BENEFIT CERTIFICATION	<p>The Qualified Improvement, or the resulting performance of the system or structure as a whole if the Qualified</p>	<p>Attach description of significant public benefit and method of evaluation conducted by the appropriate license/qualifications required by the Guidebook.</p>	

(New Construction)	Improvement cannot be independently evaluated, satisfies one of the following: 1. Exceeds most stringent code requirements for one of the following: ___energy efficiency ___water efficiency ___safe drinking water, or ___building resiliency 2. ___ Reduces energy demand or greenhouse gas emissions by 30% or more		
LIENHOLDER CONSENT	CONSENT(s) ___attached ___delivered at close	Applicant should submit the Lienholder Consent Form (must be substantially the same as the Model form) The form must be signed and notarized in appropriate places Cross-check list of Lienholders from Title Report with Written Consents provided by Capital Provider.	
APPLICATION FEE	___ \$500 application fee sent to Pierce County	Applicant must send application fee to Pierce County at the time of application to be considered for the C-PACER program. See <u>Error! Reference source not found.</u> instructions (pg. 16).	

IF CONSENT WILL BE EXECUTED AT CLOSING, CONDITIONAL APPROVAL IS GIVEN.
IF CONSENTS ARE DELIVERED AT CLOSING, APPLICANT MUST HOLD COUNTY-EXECUTED CLOSING DOCUMENTS IN ESCROW UNTIL CONSENTS ARE OBTAINED. AT DISCRETION OF THE COUNTY, THIS APPLICATION MAY BE AMENDED AND RETURNED WITH COPIES OF CONSENTS ATTACHED.

**BY SIGNATURE BELOW, THE APPLICANTS (THE PROPERTY OWNER AND CAPITAL PROVIDER) AFFIRM THAT THE INFORMATION AND DOCUMENTATION ARE TRUE AND CORRECT TO THE BEST OF THEIR ABILITY AND THAT THE APPLICANTS HAVE READ THE DISCLOSURES AND DISCLAIMERS ATTACHED TO THIS APPLICATION AND UNDERSTAND THE RISKS OF PARTICIPATING IN THE C-PACER PROGRAM; FURTHER, THAT THE APPLICANTS AFFIRM THAT NEITHER THE COUNTY, ITS GOVERNING BODY, EXECUTIVES, NOR EMPLOYEES ARE PERSONALLY LIABLE AS A RESULT OF EXERCISING ANY RIGHTS OR RESPONSIBILITIES GRANTED UNDER THIS PROGRAM.
APPLICATION FORM SIGNED AND DATED**

ON BEHALF OF PROPERTY OWNER: _____

NAME & TITLE: _____

ON BEHALF OF CAPITAL PROVIDER: _____

NAME AND TITLE: _____

TO BE COMPLETED BY AUTHORIZED COUNTY OFFICIAL

APPLICATION: _____ APPROVED
 _____ CONDITIONALLY APPROVED
 _____ DENIED

ON BEHALF OF COUNTY: _____

NAME AND TITLE: _____

DISCLOSURES & DISCLAIMERS