

Commercial EV Charger Incentive Program: Approval Form

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VPU CUSTOMER INFORMATION										
Name Listed on VPU Account:	VPU Account Number:		Company/Customer Name:							
VPU Service Address:	Phone Number:		Email Address:							
EV CHARCER(S) INFORMATION	1									
EV CHARGER(S) INFORMATION EV Charger Brand & Model:	# of EV Chargers Inst	alled:	Installation Date:							
Description of Site (check all that apply):	Commercial	Workplace	MUD Fleet							
S Industrial Solar In	come-Qualified	Publicly Accessib	ole Other							
CONTRACTOR/VENDOR INFORMATION										
Company Name:	Company Address:		License Number:							
Company Representative:	Representative Phon	e Number:	Representative Email Address:							
REBATE SUPPORTING DOCUM	ENT CHECKLIST									
Incentive Amount Requested										
Fill out the Approval Form/Detail Form below, and attach all of the following required documents:										
			-							
,	Completed and Signed, Commercial EV Charger Incentive Program Approval Form									
Site Plan and Single Line Diagram All EV Charger equipment spec sheet and installation invoices										
	-									
Copy of the City's Building p	•									
The Commercial EV Charger Incentive Program Forms and all supporting documents must be submitted within 180 days from completion of the charger installation (Inspection Sign-off Date).										
Email documents to: CustomerPro	grams@CityOfVer	non.org or mail do	ocuments to address below:							
Vernon Public Utilities Attn: Commercial EV Charger Incentive Program 4305 S. Santa Fe Ave. Vernon, CA 90058										
Program agree to assign all of their rights, title	s, and interests under the vider for the EV charging	e LCFS Program (pursug stations rebated unde	der the Program, customers participating in the lant to California Assembly Bill 32), or any similar r the Program. Participating customers authorize narging stations.							
CUSTOMER SIGNATURE										
I certify that I am authorized to sign the Commercial EV Charger 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 EV Charger Incentive Program Terms and Conditions . I will allow VPU, at its discretion, to conduct an on-site inspection to verify the above information.										
Customer Signature		Print Name								
Date		Title								

COMMERCIAL EV CHARGER DETAIL FORM

Customer:		
Customer Address:		
VPU Account #:		
Facility Owner's Federal E	Employer Identification #:	

No. of Chargers	Charger Type	Charger Brand	Charger Model	Charger Serial Numbers	Ports per Charger	Charger End- Users	Charger 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 Chargers**: Enter the number of EV chargers of the same type, model, end-user, etc.

EV Charger Type: Specify DCFC, Level 2, Level 1

EV Charger Brand: Specify brand of charger (ChargePoint, Tesla, etc.)

EV Charger Model: Enter complete model number

EV Charger Serial Numbers: Enter serial number for each Charger (separate row for each charger)

Ports per EV Charger: Enter the number of charging ports per EV Charger (i.e. dual port = 2)

EV Charger End-Users: Enter "Public", "Fleet", "Workplace", "MUD", "DAC", or "Other"

EV Charger GPS (xx.xxxxxx, -xx.xxxxxx): Enter GPS coordinates for each EV charger in 6-digit

decimal format

Rebate Amount: Enter the expected rebate amount for all EV Chargers of the same type