



NYS Consolidated Funding Application

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Application Number 999 Questionnaire

Instructions

- * - denotes an answer is required.
- Click the section bar below to go directly to a specific section.
- The application can be viewed as one form or separate pages: [Turn ON Section Pages](#)

Sections

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Required Questions Left: 102 / 190

Applicant Information

* 1. Legal Name of Applicant

Q_72_546_CP_common

2. If you are a DBA, what is your DBA name?

Q_72_550_CP_common

*** 3. Applicant Street Address**

Q_72_551_CP_common

*** 4. Applicant City**

Q_72_552_CP_common

*** 5. Applicant State**

Q_72_553_CP_common

*** 6. Applicant Zip Code. (please use Zip+4 if known)**

Q_72_554_CP_common

*** 7. Applicant Telephone Number, (please include area code)**

Q_72_651_CP_common

*** 8. Applicant Email Address**

Q_72_555_CP_common

*** 9. Type of Applicant (select all that apply)**

- Federal
- State
- County

- City
- Town
- Village
- Tribal
- School District
- County or Town Improvement District
- District Corporation
- For-Profit
- Not-For-Profit
- Individual
- Business Corporation
- IDA
- LDC
- LLC
- LLP
- Public Authority
- Public Benefit Corp
- Sole-Proprietorship. HDFC
- BID
- LP

Q_72_549_CP_common

10. If you are a business, have you been certified as an Minority or Women-owned Business Enterprise (MWBE)?

- Yes
- No
- N/A

Q_72_969_CP_common

*** 11. Contact Last Name**

Q_72_1049_CP_common

12. Contact First Name

Q_72_547_CP_common

13. Contact Title

Q_72_1050_CP_common

14. Additional Project Contact Last Name

Q_72_970_CP_common

15. Additional Project Contact First Name

Q_72_1052_CP_common

16. Additional Contact Title

Q_72_1051_CP_common

Project Location

*** 17. Select your region. If your project spans multiple regions, select all regions that apply.**

- Capital District
- Central New York
- Finger Lakes
- Long Island
- Mid-Hudson
- Mohawk Valley
- New York City
- North Country
- Southern Tier
- Western New York

[View Help](#) Q_72_548_CP_common

18. Project Street Address: if the project does not have a definite street address, please skip to "Project without a Street Address" below.

Q_72_928_CP_common

19. Project City

Q_72_565_CP_common

20. Project Zip Code. (please use Zip+4 if known)

Q_72_1034_CP_common

21. Project Without a Street Address: please enter a description of the project location. Include project starting/ending street addresses, cities & zip codes if applicable.

Q_72_971_CP_common

*** 22. Project county or counties.**

Q_72_972_CP_common

23. Project Latitude

[View Help](#) Q_72_572_CP_common

24. Project Longitude

[View Help](#) Q_72_573_CP_common

*** 25. NYS Assembly District(s) where the project is located. (please enter a number between 1 and 150 that represents your Assembly District)**

[View Help](#) Q_72_184_CP_common

*** 26. NY Senate District(s) where the project is located. (please enter a number between 1 and 62 that represents your Senate District)**

[View Help](#) Q_72_190_CP_common

Project Description

* **27. Project Description.** Concisely describe the project, indicating the location, what will be planned, designed, and/or constructed, the issues/opportunities to be addressed, and expected outcomes and deliverables. Additional details will be collected later in the application process.



Q_72_575_CP_common

* **28. Statement of Need**



[View Help](#) Q_72_976_CP_common

* **29. Current State of Project Development (i.e. planning, preliminary engineering, final design, etc)**

Q_72_929_CP_common

* **30. Status of Permits**

- Complete
- Incomplete
- Pending
- N/A

Q_72_580_CP_common

* **31. Estimated Project Timeline: including project start/completion dates, estimates for design, permitting and construction.**



Q_72_975_CP_common

* **32.**

Explain what makes your project a regional economic priority - for example creates jobs, economic investment, sustainability and community revitalization, etc.

Q_72_930_CP_common

*** 33. Status of State and/or Federal Environmental Review.**

- Complete
- Incomplete
- Pending
- N/A

Q_72_973_CP_common

ReCharge New York Power Program: General Information and Background

*** 34. Provide a brief description and/or history of applicant's business both generally and at the FACILITY*:**

[View Help](#) Q_77_734_A_NYPA

*** 35. Describe the ownership of the applicant's business:**

Q_77_1075_A_NYPA

*** 36. Identify the applicant's parent and subsidiary companies (if none, please respond with N/A):**

Q_77_1076_A_NYPA

*** 37. Describe the product(s) produced and/or service(s) provided at the FACILITY:**

Q_77_735_A_NYPA

- * 38. Using the North American Industry Classification System, please provide the six digit NAICS code that applies to the FACILITY:

[View Help](#) Q_77_736_A_NYPA

- * 39. What is the applicant's Federal Tax ID#?

Q_77_740_A_NYPA

- * 40. Is the applicant exempt from sales tax?

Yes No

Q_77_739_A_NYPA

Not-For-Profit (if your company is For-Profit select "No")

- * 41. Does your Not-For-Profit facility provide critical services or substantial benefits to the local community?

Yes No

[View Help](#) Q_77_737_A_NYPA

- 42. If you selected yes from the question above, please describe:

Q_77_738_A_NYPA

Existing Electric Service

- * 43. How many years has the FACILITY been in operation?

Q_77_741_A_NYPA

- * 44. Is the FACILITY:

- Owned by the Applicant
 Leased in whole
 Leased in part

Q_77_742_A_NYPA

- * 45. Which choice best describes the FACILITY's operational pattern?

- 1 Shift by 5 Days
 1 Shift by 6 Days
 1 Shift by 7 Days
 2 Shifts by 5 Days
 2 Shifts by 6 Days
 2 Shifts by 7 Days
 3 Shifts by 5 Days
 3 Shifts by 6 Days
 3 Shifts by 7 Days

Q_77_743_A_NYPA

- * 46. Which choice best describes the FACILITY's electricity usage pattern?

- Seasonal – Summer Peaking
 Seasonal – Winter Peaking
 Non Seasonal Usage

Q_77_744_A_NYPA

- * 47. What is the typical metered demand (kW) at the FACILITY? (Please view the help link for information on how to respond for a facility with multiple electric accounts, enter the values only, no commas or units)

[View Help](#) Q_77_745_A_NYPA

- * 48. What is the typical monthly energy consumption (kWh) at the FACILITY? (Please view the help link for information on how to respond for a facility with multiple electric accounts, enter the values only, no commas or units)

[View Help](#) Q_77_746_A_NYPA

* 49. **Select the utility providing current delivery service at the FACILITY:**

- Central Hudson Gas and Electric Corporation
- Con Edison Company of New York
- Long Island Power Authority
- National Grid
- New York State Electric and Gas
- Orange and Rockland Utilities Inc.
- Rochester Gas and Electric
- Municipal Electric District/Rural Electric Cooperative/Other

Q_77_747_A_NYPA

50. **Does the applicant own the transformer at the FACILITY?**

- Yes No

Q_77_753_A_NYPA

* 51. **Does this FACILITY use an Energy Service Company (ESCO) for its electricity supply?**

- Yes No

Q_77_756_A_NYPA

* 52. **Does the FACILITY currently receive NYPA Expansion Power, Replacement Power, or Preservation Power?**

- Yes No

Q_77_758_A_NYPA

53. **Describe any non-NYPA electricity-related utility discounts, rebates or incentives the applicant receives for the FACILITY:**

Q_77_808_A_NYPA

Electricity Delivery Information

* 54.

If the FACILITY is located in Con Edison Company of New York service territory, provide the FACILITY's current delivery voltage level:

- Conventional (Low Tension)
- Conventional (High Tension)
- Time Of Day (Low Tension)
- Time Of Day (High Tension)
- Virtual Time Of Day (Low Tension)
- Virtual Time Of Day (High Tension)
- The FACILITY is not a Con Edison Company of New York customer

[View Help](#) Q_77_754_A_NYPA

*** 55. If the FACILITY is located in Con Edison Company of New York service territory, provide the FACILITY's billing service class:**

- SC9 Rate I
- SC9 Rate II
- SC9 Rate III
- The FACILITY is not a Con Edison Company of New York customer

[View Help](#) Q_77_755_A_NYPA

*** 56. If the FACILITY is located in Orange and Rockland service territory, provide the FACILITY's current delivery voltage level:**

- Primary (Metered)
- Secondary (Metered)
- Unmetered
- Substation
- Transmission
- Secondary TOU
- Primary TOU
- Primary
- The FACILITY is not an Orange and Rockland customer

[View Help](#) Q_77_1089_A_NYPA

*** 57. If the FACILITY is located in Orange and Rockland service territory, provide the FACILITY's billing service class:**

- SC2
- SC3
- SC9
- SC20
- SC21

- SC22
 The FACILITY is not an Orange and Rockland customer

[View Help](#) Q_77_1090_A_NYPA

* **58. If the FACILITY is located in National Grid service territory, provide the FACILITY's current delivery voltage level:**

- Secondary
 Primary
 Subtransmission
 Transmission
 The FACILITY is not a National Grid customer

[View Help](#) Q_77_1091_A_NYPA

* **59. If the FACILITY is located in National Grid service territory, provide the FACILITY's billing service class:**

- SC2D
 SC3
 SC3A
 The FACILITY is not a National Grid customer

[View Help](#) Q_77_1092_A_NYPA

* **60. If the FACILITY is located in New York State Electric and Gas service territory, provide the FACILITY's current delivery voltage level:**

- HLF Primary
 HLF Secondary
 HLF Subtransmission
 HLF Transmission
 Primary
 Secondary
 Subtransmission
 Transmission
 The FACILITY is not a New York State Electric and Gas customer

[View Help](#) Q_77_1093_A_NYPA

* **61. If the FACILITY is located in New York State Electric and Gas service territory, provide the FACILITY's billing service class:**

- SC3
 SC7-1
 SC7-2
 SC7-3

- SC7-4
 The FACILITY is not a New York State Electric and Gas customer

[View Help](#) Q_77_1094_A_NYPA

- * **62.** If the FACILITY is located in Rochester Gas and Electric service territory, provide the FACILITY's current delivery voltage level:

- Secondary
 Substation
 Primary
 Subtransmission (Industrial)
 Subtransmission (Commercial)
 Transmission
 General Service
 The FACILITY is not a Rochester Gas and Electric customer

[View Help](#) Q_77_1095_A_NYPA

- * **63.** If the FACILITY is located in Rochester Gas and Electric service territory, provide the FACILITY's billing service class:

- SC8
 SC3
 SC7
 The FACILITY is not a Rochester Gas and Electric customer

[View Help](#) Q_77_1096_A_NYPA

- * **64.** If the FACILITY is located in Central Hudson service territory, provide the FACILITY's current delivery voltage level:

- Non-Demand Metered
 Primary-Demand Metered
 Secondary-Demand Metered
 Primary Substation
 Transmission
 The FACILITY is not a Central Hudson customer

[View Help](#) Q_77_1097_A_NYPA

- * **65.** If the FACILITY is located in Central Hudson service territory, provide the FACILITY's billing service class:

- SC2
 SC3
 SC13
 The FACILITY is not a Central Hudson customer

[View Help](#) Q_77_1098_A_NYPA

* **66.** If the FACILITY is located in Long Island Power Authority service territory, provide the FACILITY's current delivery voltage level:

- Secondary
- Primary
- Transmission
- The FACILITY is not a Long Island Power Authority customer

[View Help](#) Q_77_1099_A_NYPA

* **67.** If the FACILITY is located in Long Island Power Authority service territory, provide the FACILITY's billing service class:

- SC2 MRP
- The FACILITY is not a Long Island Power Authority customer

[View Help](#) Q_77_1100_A_NYPA

Historic Electric Billing Information (if the FACILITY has multiple accounts please provide kW and kWh data in aggregate)

* **68.** Please provide the FACILITY's electric service account number. If the FACILITY has more than one account provide all accounts below (separated by commas):

_____ 
 Q_77_748_A_NYPA

* **69.** Please enter August 2010 metered demand in kW:

[View Help](#) Q_77_775_A_NYPA

* **70.** Please enter August 2010 total energy consumption in kWh:

[View Help](#) Q_77_776_A_NYPA

* **71.** September 2010 Demand in kW:

[View Help](#) Q_77_777_A_NYPA

* **72. September 2010 Energy in kWh:**

[View Help](#) Q_77_778_A_NYPA

* **73. October 2010 Demand in kW:**

[View Help](#) Q_77_779_A_NYPA

* **74. October 2010 Energy in kWh:**

[View Help](#) Q_77_780_A_NYPA

* **75. November 2010 Demand in kW:**

[View Help](#) Q_77_781_A_NYPA

* **76. November 2010 Energy in kWh:**

[View Help](#) Q_77_782_A_NYPA

* **77. December 2010 Demand in kW:**

[View Help](#) Q_77_783_A_NYPA

* **78. December 2010 Energy in kWh:**

[View Help](#) Q_77_784_A_NYPA

* **79. January 2011 Demand in kW:**

[View Help](#) Q_77_785_A_NYPA

* **80. January 2011 Energy in kWh:**

[View Help](#) Q_77_787_A_NYPA

* **81. February 2011 Demand in kW:**

[View Help](#) Q_77_788_A_NYPA

* **82. February 2011 Energy in kWh:**

[View Help](#) Q_77_789_A_NYPA

* **83. March 2011 Demand in kW:**

[View Help](#) Q_77_790_A_NYPA

* **84. March 2011 Energy in kWh:**

[View Help](#) Q_77_791_A_NYPA

* **85. April 2011 Demand in kW:**

[View Help](#) Q_77_792_A_NYPA

* **86. April 2011 Energy in kWh:**

[View Help](#) Q_77_793_A_NYPA

* **87. May 2011 Demand in kW:**

[View Help](#) Q_77_794_A_NYPA

* **88. May 2011 Energy in kWh:**

[View Help](#) Q_77_795_A_NYPA

- * 89. June 2011 Demand in kW:

[View Help](#) Q_77_796_A_NYPA

- * 90. June 2011 Energy in kWh:

[View Help](#) Q_77_797_A_NYPA

- * 91. July 2011 Demand in kW:

[View Help](#) Q_77_798_A_NYPA

- * 92. July 2011 Energy in kWh:

[View Help](#) Q_77_799_A_NYPA

Energy Efficiency Measures

- * 93. Has the FACILITY undergone an energy audit and/or a detailed feasibility study within the past 5 years?

Yes No

[Q_77_809_A_NYPA](#)

94. If yes, please indicate type and year in which the audit/ feasibility study was performed.

[Q_77_810_A_NYPA](#)

95. If yes to previous question, will the applicant agree to provide NYPA with copies of any such audit/ feasibility study if requested?

Yes No

Q_77_1082_A_NYPA

*** 96. Has the FACILITY had any measures implemented to reduce energy consumption (electricity, gas, oil, etc.) within the last 3 years?**

Yes No

Q_77_811_A_NYPA

97. If yes, select the measures that were implemented:

- Building Envelope
- Lighting
- Motors
- Boilers and Fired Systems
- Steam and Condensate Systems
- Cooling Systems
- HVAC Systems
- Energy Management Control Systems
- Other

Q_77_812_A_NYPA

98. If Other, please describe:

Q_77_815_A_NYPA

99. If any measures above have been implemented at the FACILITY, please provide a brief description.

Q_77_1083_A_NYPA

*** 100. Does the applicant plan to implement any measures to reduce energy consumption (electricity, gas, oil, etc.) within the next 3 years at the FACILITY?**

Yes No

Q_77_813_A_NYPA

101. If yes, select the measures the FACILITY plans to implement:

- Building Envelope
- Lighting
- Motors
- Boilers and Fired Systems
- Steam and Condensate Systems
- Cooling Systems
- HVAC Systems
- Energy Management Control Systems
- Other

Q_77_814_A_NYPA

102. If Other, please describe:

Q_77_816_A_NYPA

103. If the applicant plans to implement any measures above at the FACILITY within the next 3 years, please provide a brief description.

Q_77_1084_A_NYPA

*** 104. If the FACILITY were to receive a ReCharge New York power allocation, will the applicant agree to undertake an ASHRAE Level II energy audit at the FACILITY in which the allocation is consumed, at least once during the term of the allocation, at the Applicant's own expense?**

- Yes No

[View Help](#) Q_77_818_A_NYPA

*** 105. If the FACILITY were to receive a ReCharge New York power allocation, will the applicant agree to make the FACILITY available at reasonable times for energy audits and assessments if required by NYPA?**

- Yes No

Q_77_819_A_NYPA

*** 106. If the FACILITY were to receive a ReCharge New York power allocation, is the applicant willing to implement audit-identified energy efficiency measures during the term of the allocation?**

Yes No

Q_77_1085_A_NYPA

- * **107.** If the FACILITY were to receive a ReCharge New York power allocation, will the applicant agree to provide information requested by NYPA or its designee in surveys, questionnaires and other information requests relating to energy efficiency and energy-related projects, programs and services?

Yes No

Q_77_820_A_NYPA

- * **108.** Is the applicant familiar with Demand Response?

Yes No

Q_77_821_A_NYPA

- * **109.** If the FACILITY were to receive a ReCharge New York power allocation, would the applicant be interested in learning more about NYPA's demand response programs?

Yes No

Q_77_822_A_NYPA

ReCharge New York Allocation Request

- * **110.** How much ReCharge New York power (in kW) is the applicant requesting for the FACILITY?

Q_77_823_A_NYPA

- * **111.** How would a ReCharge New York allocation affect the applicant's competitive position generally and regarding the applicant's operations at the FACILITY?

Q_77_824_A_NYPA

- * **112.** Describe the impact a ReCharge New York power allocation could have on existing employment at the FACILITY:

Q_77_825_A_NYPA

*** 113. How many major competitors in the line of business conducted at this FACILITY are located in New York State?**

- None
- 1 - 3
- 4 - 6
- 7 or more

Q_77_826_A_NYPA

114. List the name and city of the FACILITY's major NYS competitor(s), if noted above:

Q_77_827_A_NYPA

*** 115. List any other major domestic or foreign competitors (not in New York State):**

Q_77_828_A_NYPA

*** 116. List names and locations of major suppliers to the FACILITY:**

Q_77_829_A_NYPA

*** 117. List names and locations of major customers of the FACILITY:**

Q_77_830_A_NYPA

*** 118. What percentage of the FACILITY's purchases of goods and services are made within New York State?**

[View Help](#) Q_77_831_A_NYPA

* 119. What percentage of the FACILITY's output is sold to customers within New York State?

[View Help](#) Q_77_832_A_NYPA

* 120. What is the cost of electricity as a percentage of the cost of production at the FACILITY?

[View Help](#) Q_77_833_A_NYPA

* 121. Is the FACILITY currently at risk of closing or curtailing operations, relocating out of state, or losing a significant number of jobs, due to the current cost of electricity to the applicant?

Yes No

Q_77_834_A_NYPA

122. If yes, please describe why the operations or employment levels are at risk.

Q_77_835_A_NYPA

123. Will a ReCharge New York power allocation mitigate any of the risks identified in the previous question?

Yes No

Q_77_1086_A_NYPA

124. If yes, please describe how any such risk will be mitigated.

Q_77_1087_A_NYPA

Employment and Payroll

* **125. What is the FACILITY's current employment?**

[View Help](#) Q_77_836_A_NYPA

* **126. What is the average annual wage for the employees listed above?**

Q_77_837_A_NYPA

* **127. What are the average annual employee benefits in dollars?**

Q_77_838_A_NYPA

* **128. What is the total payroll including benefits (in dollars) at the facility?**

[View Help](#) Q_77_839_A_NYPA

129. List benefits other than social security, unemployment insurance and workers compensation, taxes included in benefits calculation above:

Q_77_840_A_NYPA

* **130. Of the total current employment listed above, how many jobs would the applicant be willing to commit to retain at the FACILITY as a condition to receiving a ReCharge New York power allocation?**

Q_77_841_A_NYPA

* **131. Describe the number of new permanent full time (at least 35 hours per week) jobs the applicant would be willing to commit to create at the FACILITY as a condition to receiving a ReCharge New York power allocation, if any:**

[View Help](#) Q_77_842_A_NYPA

* **132. What would the average annual wage be for the new employees listed above?**

Q_77_843_A_NYPA

* **133.** What would the average annual benefits in dollars be for the new employees listed above?

Q_77_845_A_NYPA

* **134.** What would the total payroll including benefits (in dollars) be for the new employees listed above?

[View Help](#) Q_77_847_A_NYPA

Capital Investment

* **135.** Please provide the total capitalization of the FACILITY in dollars:

[View Help](#) Q_77_849_A_NYPA

* **136.** What is the total 2012 capital budget amount in dollars?

Q_77_850_A_NYPA

* **137.** Please describe the capital investments included in the amount above:

Q_77_851_A_NYPA

* **138.** What amount of the total 2012 capital budget pertains to “bricks and mortar” investment?

[View Help](#) Q_77_852_A_NYPA

* **139.** What is the total 5 year capital investment amount in dollars?

Q_77_853_A_NYPA

* 140. Please describe the capital investments included in the amount above:

Q_77_854_A_NYPA

* 141. What amount of the total 5 year capital investment pertains to “bricks and mortar” investment?

[View Help](#) Q_77_855_A_NYPA

Future Facility Expansion

* 142. Does the applicant have an expansion project planned for the FACILITY (if yes complete the following questions)?

Yes No

Q_77_856_A_NYPA

143. Please describe the FACILITY expansion project:

Q_77_857_A_NYPA

144. Please describe the business reason(s) for expansion:

Q_77_858_A_NYPA

145. What is the new electric load (kW) expected to register on the meter as a result of this expansion project, if any?

[View Help](#) Q_77_859_A_NYPA

146. What is the additional monthly energy usage (kWh) expected as a result of this expansion project?

[View Help](#) Q_77_860_A_NYPA

147. What is the anticipated project start date (Month, Year)?

Q_77_861_A_NYPA

148. What is the anticipated project completion date (Month, Year)?

Q_77_862_A_NYPA

149. Please describe the phases of the expansion project, if any:

Q_77_863_A_NYPA

150. Please describe any major machinery & equipment, systems or components of the expansion project:

Q_77_864_A_NYPA

151. What is the total project cost estimate for this facility expansion?

Q_77_865_A_NYPA

152. Of this Total Project Cost Estimate, how much, if any, was included in the responses to the Capital Investment Section?

Q_77_866_A_NYPA

153. How much of the Total Project Cost Estimate is related to “bricks and mortar” investment?

[View Help](#) Q_77_867_A_NYPA

154. Is there any net reduction in total load (kW) expected due to the removal of machinery or equipment as part of this expansion project?

Yes No

Q_77_868_A_NYPA

155. If you answered yes to the question above, please explain:

Q_77_869_A_NYPA

156. In addition to the New Employment jobs listed in the Employment Section, please provide the total number of new Expansion Jobs created as a result of this expansion project, if any:

Q_77_870_A_NYPA

157. What would the average annual wage be for the new expansion employees listed above?

Q_77_871_A_NYPA

158. What would the average annual benefits in dollars be for the new expansion employees listed above?

Q_77_872_A_NYPA

159. What would the total payroll including benefits (in dollars) be for the new expansion employees listed above?

[View Help](#) Q_77_873_A_NYPA

160. Of the total Expansion Jobs created as a result of the project listed above, how many jobs would your company be willing to commit to creating at the FACILITY in return for a ReCharge New York allocation?

Q_77_874_A_NYPA

Other Information

161. Please identify all financial or other support the applicant receives, will receive, or has requested, if any, from the State of New York or State agency or entity regarding the FACILITY.

Q_77_875_A_NYPA

162. Any additional information you may wish to include (suggestions include, but are not limited to, long term investment plans, capital investment history and company's growth potential):

Q_77_876_A_NYPA

163. List any questions contained in this application for which the applicant considers its responses to be confidential (list question number(s) separated by commas):

[View Help](#) Q_77_877_A_NYPA

164. Describe the basis for confidential treatment of the information identified in response to the previous question:

Q_77_1088_A_NYPA

General Certifications

*** 165. By entering your name in the box below, you certify and agree that you are authorized on behalf of the applicant and its governing body to commit the applicant to comply with the requirements of Article 15-A of the New York State Executive Law: Participation By Minority Group Members and Women With Respect To State Contracts by providing**

opportunities for MBE/WBE participation. You further certify that the applicant will maintain such records and take such actions necessary to demonstrate such compliance throughout the completion of the project.

Q_72_1037_CERT_common

- * **166.** By entering your name in the box below, you certify that you are authorized on behalf of the applicant and its governing body to submit this application. You further certify that all of the information contained in this Application and in all statements, data and supporting documents which have been made or furnished for the purpose of receiving Assistance for the project described in this application, are true, correct and complete to the best of your knowledge and belief. You acknowledge that offering a written instrument knowing that the written instrument contains a false statement or false information, with the intent to defraud the State or any political subdivision, public authority or public benefit corporation of the State, with the knowledge or belief that it will be filed with or recorded by the State or any political subdivision, public authority or public benefit corporation of the State, constitutes a crime under New York State Law.

Q_72_1038_CERT_common

Recharge New York Power Program Certifications (for applicants requesting a ReCharge New York power allocation only, the following certification is the last question to be answered. The "Funding Sources", "Expenditure Activities", and "Budget Categories" sections below are not applicable)

- * **167.** I certify that (a) I am authorized to act on behalf of the applicant for a Recharge New York power allocation, and (b) all information provided in this application, including any attachments, is true, accurate and correct to the best of my knowledge and the knowledge of the applicant. On behalf of the applicant, I further understand and acknowledge that: (a) the applicant may be required to provide additional information upon request by the Economic Development Power Allocation Board and NYPA before any decision is made on this application; (b) Recharge New York power program allocations are subject to review and approval by the Economic Development Power Allocation Board and the New York Power Authority Board of Trustees; and (c) and notwithstanding an award of an allocation of Recharge New York power, such allocation will be subject to the terms and conditions agreeable to NYPA and set forth in a separate written contract between the applicant and NYPA governing the provision and sale of the power that is the subject of the allocation.

Yes No

Q_77_1077_CERT_NYPA

Funding Sources (Enter dollar amounts below)*** 168. Total Project Cost**

0.00

Q_72_657_B_common

*** 169. Amount being requested through CFA**

0.00

Q_72_658_B_common

*** 170. Amount provided directly by applicant toward project**

0.00

Q_72_659_B_common

*** 171. State sources committed to project**

0.00

[View Help](#) Q_72_660_B_common*** 172. Federal sources committed to project**

0.00

Q_72_662_B_common

*** 173. Local (municipal) sources committed to project, if different than applicant.**

0.00

Q_72_664_B_common

*** 174. Private sources committed to project**

0.00

[View Help](#) Q_72_665_B_common*** 175. Not-for-Profit/foundation funding committed to project**

0.00

Q_72_668_B_common

Expenditure Activities (Enter dollar amounts below)*** 176. Planning**

0.00

Q_72_670_B_common

*** 177. Design**

0.00

Q_72_672_B_common

*** 178. Construction/Renovation**

0.00

Q_72_674_B_common

*** 179. Property Acquisition**

0.00

Q_72_676_B_common

*** 180. Training**

0.00

Q_72_677_B_common

*** 181. Marketing, Outreach, Advertising**

0.00

Q_72_679_B_common

Budget Categories (Enter dollar amounts below)

*** 182. Salaries and Wages**

0.00

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*** 183. Supplies/Materials**

0.00

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*** 184. Equipment and Machinery**

0.00

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*** 185. Travel**

0.00

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*** 186. Contractual Services**

0.00

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*** 187. Other**

0.00

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*** 188. Furniture and Fixtures**

0.00

Q_72_719_B_common

*** 189. Rent**

0.00

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*** 190. Utilities**

0.00

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