EVCS REBATE APPLICATION

(Please fill out an application for each proposed EVCS)					
I. APPLICANT INFORMATION:					
1	Applicant Name:				
2	Applicant Address:				
3	a. City:	b. State:	c. Zip:		
4	a. Employer/Taxpayer ID:				
5	a. Contact Name:	act Name: b. Contact Title:			
6	a. Contact Email: b. Contact Phone:				
7	Applicant Type: 🔲 Government, 🗌 Business, or 🗌 Nonprofit Organization				
II. Project Summary:					
1	Project Name:				
2	Brief Project Description:				
3	Project Address:				
4	a. City:	b. County:			
5	EVSC Type: Level 2 or Level 3 DCFC				
6	Minimum kW available from EVCS:				
7	List Nearby Public Amenities (e.g. restrooms, convenience stores, restaurants, businesses, tourist				
	destinations) and Distances from EVCS:				
8	For this site attach the following:				
	Local map or aerial photo annotated to show charging site and locations and distances of amenities				
	For Highway Corridor Site, map showing charging site and route/distance to the highway				
	Documentation from the electric utility serving the project location such as a letter of service notice,				
	indicating power supply availability for the proposed project.				
	☐ If applicant is not the site owner, signed letter from site owner approving application and opportunity to remain operational for a minimum of three years.				
		for the charging equipr	nent data		
III. CHARGING EQUIPMENT BIDS/QUOTES - Provide a summary of bid/quote for the charging equipment, data network plans, and warranty/maintenance plans in the table below. Attach copies of the bids/quotes to the application.					
		-			
1	List Charging Equipment, Data Plan, and Warranty/Maintenance Information and Costs:	Bid Amount:			
			. P		
IV. CHARGING EQUIPMENT INSTALLATION BIDS/QUOTES - Provide a summary of bid/quote from a licensed electrical contractor for installation of the charging equipment. Attach copies of the bids/quotes to the application.					
closifical contractor for installation of the onarging equipment. Attach copies of the bids/quotes to the application.					
1	Installation Costs:	Bid Amount:			

EVCS REBATE APPLICATION				
(Please fill out an application for each proposed EVCS) V. SIGNS AND BOLLARDS BIDS/QUOTES - Provide a summary of bids/quotes unless they are included in the work by the electrical contractor above. Attach copies of the bids/quotes to the application.				
1	Signs and bollards:	Bid Amount:		
VI. ELECTRIC SERVICE UPGRADES BIDS/QUOTES - Provide a list of electric service upgrades required to service the installed charger with estimated costs. Attach estimates to the application.				
1	List required updates:	Estimated Amounts:		
VII. BUDGET SUMMARY				
1	Budget Category	Bid Amount		
2	Charging Equipment, Network Plan and Warranty/Maintenance Plan	\$		
3	Charging Equipment Installation	\$		
4	Signs and Bollards (if not included with equipment installation)	\$		
5	Electric Utility Service Upgrades	\$		
6	Total Project Costs	\$		
7	7 Please describe the source(s) and amounts of funds providing the applicant match and any public/private partnerships:			
8	Please describe the proposed fee/rate structure for users of the EVCS and method of payment:			
9	The maximum rebate amount will be up to 80% of the Total Project Costs from Section VII, Line 6 above. What would the minimum rebate % of the Total Project Costs from Section VII, Line 6 above you would accept to do the project?	Minimum % Rebate You Would Accept		
VIII. APPLICANT CERTIFICATION AND SIGNATURE				
I certify that to the best of my knowledge the information contained in this application and in the supplemental material is correct and complete. I certify that the funding requested satisfies the eligibility requirements for this Program as represented in the Program Description and related materials. I certify that I understand that the funding under this Program is subject to restrictions and other conditions listed in the Program Description. I authorize DANR to make any necessary inquiries to verify the information that I have presented. I acknowledge that the information in this application is not confidential and may be released as required by the Program.				
Printed Name and Title of Responsible Party:				
Signature:		Date:		

Applications are to be submitted by email to <u>barb.regynski@state.sd.us</u> or by mail to:

VW Rebate Programs SD DANR – AQ Program 523 E Capitol Pierre, SD 57501