December 22, 2017

Project Number: 318-17-0500991740

Project: Express Pending

<u>Customer Reference:</u> City of Commerce (Multi-Site)

Trade Professional Information: EcoGreen Solutions Corey Brophy 27611 La Paz Rd. Suite A2 Laguna Niguel CA, 92677

Customer Information: Commerce, City of Robert Lipton 2535 Commerce Way Commerce CA, 90040

RE: **EXPRESS SOLUTIONS – Installation Report & Previous Participation** Notification - SA # 3-000-0105-14 (Multi-Site)

Dear: Corey Brophy & Robert Lipton

Thank you for submitting an application for the Express Solution(s) you plan to install. We have completed an initial review of the planned solutions and determined the following solutions within the technology for which you are applying may not be eligible because of previous participation:

Site Address	Year	Technology	Solution Description	Quantity
n/a		n/a	n/a	n/a

Please note: Your projects contains Express solutions that will expire in 2018, and also includes Customized solutions and On-Bill Financing. This letter authorizes you to proceed with the installation of the Express solutions only. The approval to install your Customized solutions will be sent to you at a later date. Your On-Bill financing application will reflect the loan approval for the Express solutions only and will be processed after Express Installation Report (IR) and rebate approval. Separately, the financing for the Customized solutions will also be processed after Customized Installation Report (IR) approval and incentive approval.

If you wish to proceed with the project, complete and sign the enclosed Express Solutions Installation Report (IR) after you have installed all eligible solutions. Then, to resume the application process, submit the following documents within 60 days of measure installation or the final invoice date, whichever is later:

- Your signed Express Solutions Installation Report (IR)
- Itemized proof of purchase, including invoice(s), with purchase and installation dates.
- Specification sheet(s) for the installed solution(s)/measure(s)
- SCE Product Location Form
- TradePro Participant Agreement (if applicable)
- Permit Closure for HVAC measures (if applicable)
- CA 590
- W9

If you submitted your Express Application and SCE received it before December 2, 2017, you must submit the Installation Report no later than March 2, 2018. All 2017 Express Applications for which the IR is not received by March 2, 2018 will be cancelled.

Upon receipt of these documents, we will confirm your eligibility. You may be contacted if information is missing or incomplete. After successful review, SCE will provide the appropriate incentive to you or your designated payee.

If you have any questions, please contact your SCE Account Representative. You may also call us at (866) 635-6015 Monday through Friday, from 8:00 a.m. to 5:00 p.m., or send an e-mail to **BusinessIncentives@sce.com**. Please have your project number available for reference when you call, or include it in your e-mail.

Sincerely,

Business Incentives Team Southern California Edison



Energy Management Solutions Incentives

Express Installation Report

INSTRUCTIONS: After your Proposed Express Solutions project is installed and operational, enter the project installation date in the field provided. Review the information from your original Incentive Application below under Sections 1-4. If nothing has changed, complete and sign Section 9 on this Installation Report (IR) Form and submit it to SCE at one of the addresses below. If any information has changed on your application since you sent it to SCE, indicate the change on Section 5-8 of this form, sign Section 9 and return both pages to SCE.

Business Incentives

E-mail: I	Businessl	Incentives	@sce.com
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	P.O.	h <mark>ern California Edi</mark> Box 800 mead, CA 91770-08			ux: (626) 633-324 uestions: (626) 6			
SA#*: 3-	17-0500991740 000-010514 (Multi		<u> </u>	olutions complete ompleted Installatio		Site Form (w	ww.sceonline	eapp.com) with this
Installation D		/FO:::-!A!	-C\	(Date all Install	ations were comple	ete and opei	rating prope	iny)
		(From Original Applic	ation)					
Commerce, C	ity of Company/Busi	ness Name			Robert Lipton Contact Name			SPRS
2535 Comme	rce Way, Parks and	Recreation Director			Commerce		CA State	90040 Zip
323-887-4450			<u>Facilitie</u>	esSupervisor@	oci.commerce.ca	CALL CALL CO.	Ottalo	F.W.
Section 2 - Cu	Contact Phone Number Istomer's Trade Pro	ofessional (From Origii	nal Applic	cation)	Contact E-Mai	i Address		
	EcoGreen					Corey Brop	hy	
	Customer's Trade Profes 27611 La Paz				Laguna Niguel	Contact Name	CA	92677
	Customer's Trade Profes 949-364-6800	sional Mailing Address			city bmissions@ecop		State	Zip
	ustomer's Trade Professional Pho	e Number		<u>3u</u>	Customer's Trade Profession		tions.net	
Section 3 - Ex	press Solutions (F	rom Original Application)				Number of	Units Incent	tive \$
Solution Code	Solution	Description	С	Description of Replation (e.g., lighting type,		Installe	ed Perl	
			Pleas	se View Multi-Sol	lution Worksheet			
Note: If your project	consists of more than 5 so	olutions please refer to the atta	chment.		YOUR ESTIMA	ATED INCE	NTIVE TO	TAL: \$0.00
Section 4 - Pa	yment Information	(From Original Application	on)					
	of Payment:	Incentive Che	eck To t	hird Party				
Payee	Information: EcoGreen S		ir or r dymont					
	Payee-Customer/B			Atte	ntion To (name on check)			Title
27611 La Paz	Rd. Suite A2 Company/Business I	Aailing Address		LL	aguna Niguel		CA State	92677 Zip
949-364-6800					kurt.w@ecogree	en-solution	ns.net	
C. Tax Identi	Contact Phone Number ification Type:	Federal Tax ID/Emplo	Contact E-Mail	11974	80-0196823	3 0	Corporation	
		Federal Tax ID/Employer ID Number	_		Identification Number		_ ·	Tax Status
D. Utility Bil	I Credit:	Exempt Reason						
3 -		ervice Account Number		2 -		Customer Account	t Number	
		(Use this box to upda	te Custo		if different from al			
Contact Name				Title				
Company/Business Mailin	g Address			City		Sta	ate	Zip

Contact Phone Number	Contact E-Mail Address

Page 2 Re. March 2017

UPN#	318-17-0500991740	
SA#	000-010514 (Multiple Sites)	

Section 6 - Cu	stomer's Trade Professional (U	Ise this box to upda	le Trade Profess Contact Name	sional information	if different from	page 1)	
Customer's Trade Professi	on Maling Admess		City		Slate	Zip	
Condition of the or 10 cook	one musing resolve				Old E		
Customer's Trade Professi	on# Phone Number	Customer's Tra	de Professional E-Mail Addre	\$8			
					2 //		
10	press Solutions* (Use this box t						
	rgy Management Solutions Guide on ility Requirements. Then calculate			es, Solution Descrip	Diions, Incentive Ar	mounts and I	rogram
Solution Code	Solution Description	De	scription of Replace		# of Units Installed	Incentive \$ Per Unit	Incentive Total \$
		, v	s.g., ngnung type, wa	itage, etc./	A X	В	= C
ALF					WOLLD TOTAL		
	more than 5 Express Solutions cor Site/Solution Worksheet at www.so		Express Solution p	age	YOUR ESTIMATE INCENT	D REVISED IVE TOTAL:	
,	ment Information (Use this bo	.,	t Information if o	lifferent from pag			
	nent (Please check one)	x to apaate i ayinei	e mormation n	interests from pag		entification	Гуре
	stomer (Complete B & C)					e check one)
	edit to Customer (Complete D) I Party (Complete B, C & E)				Federa	Tax ID / Employ	er ID Number (EIN)
B. Payee Inform	ation						
Payee-Customer/Business	Name	Contact Name		Title	□ Social S	Security Number	
Company/Business Mailing	Address	City		State Zip	Tax S	tatus (Pleas	e check one)
					□ Corpora		
Contact Phone Number		Contact E-Mail Address			_	ual/Sole Proprieto	r/General Part.
D 11/27 D21 O	Att (Disease semalate Abia seeding if you		a hill and it to the accept		☐ Tax-Ex	empt, Non-profit	
Service Account Nu	edit (Please complete this section if you pr		a Dill Credit to the cust Account Number	omer or record)		Exempt Re	ason
3 -		2 -					
E. Payment Rele	ase Authorization (Please comp	lete this section if an	Trade Profession	nal is to receive the	e check)		
	I am authorizing this payment of norm SCE. I also understand that mackage.						
Customer Name (please pr		Signature		Title		Date	
I, the Customer o operating and be	allation and Operation Statemer Trade Professional above, certify ing maintained to perform in confor ting requirements for this installation	that (i) the Express Somity with their design i	ntent, and (ii) that	a licensed contract	or was used, when	e applicable,	and all
Name (Please print)		Signature		Title		Date	
To be complet	ed only if you are requesting	g an HVAC Rebate:					
	it (if required). If a permit and/or p er and/or permit closure document	-			cement, I have pro	vided the	
	ertification. If a Contractor or Trad y the contractor.	le Professional was us	ed for any HVAC i	nstallation/replacen	nent, this section m	nust be	
	ng this box, I certify I am a licensed n above is correct.	contractor and have f	ollowed applicable	permitting requiren	nents and, if requir	ed, that the l	HVAC permit
Signature of Contractor		Name (please print)			Date		

Energy Management Solutions Incentive Application for Business Customers Multiple Project Site/Solution Worksheet

Project Site(s) Information

Web Confirmation: W#045328

Fax: 626-833-3243 | E-mail: BusinessIncentives@sce.com | Questions? 800-736-4777 | Augmentations companies | Augmentations | A

Use this spreadsheet when installing solutions at more than one project site or more than four solutions at all project sites.
1. Complete this Project Site Information page first. Start by checking the box(es) below to indicate all project approach(es) included in the application; then, complete those pages.
2. If you have more than 20 project sites, use the drop down on the right ("Number of Rows") to add more rows.
3. Refer to the Solutions Directory (www.sce.com/nrclems/download/solutionsdirectory.pdf) for the Building Type Code and your electric bill for your service account number.

	Express installed	☑ Express Pending	Customized	Auto-E	Auto-DR Express Technology Incentives	ntives	Auto	your service account number. □ Auto-DR Customized □ Technology incentives		Number of Rows 20
	Company Name:	Commerce, City of						Utility Use Only (Project #)		
Project					Proj	Project Site(s)				
Site Number	Project Name	SCE Service Account Number	Service Account Address	Zip Code	Building Type Code	Year Built	Total Sq Ft/Facility	Site Contact Name	Site Contact Phone Number	Site Contact E-Mail Address
Ex	Store #1234	3-000-000-00	111 Main St	91001	33	1950	10,000	Victor Johnson	626-555-0901	vlohnsonfittl.com
1	City of Commerce - Bristow Park Library	3-000010514	1466 S McDonnell Ave	90040	0	1999	12,949	Kurt Weaver	9493646800	submissions @ecoareen-solutions.ne
2	City of Commerce - Teen Center	3-000010517	5107 Astor Ave.	90040	٥	1999	6,872	Kurt Weaver	9493646800	solutions.net
က	Oity of Commerce - Senior Citizen Center	3-012993195	2555 Commerce Way	90040	٥	1999	10,138	Kurt Weaver	9493646800	submissions/wecogreen- solutions.net
4	City of Commerce - Transportation Department	3-012479751	5551 Jillson Street	90040	٥	1999	20,171	Kurt Weaver	9493646800	submissions@ecorreer-solutions net
ro	City of Commerce - Camp Commerce	3-003692979	465 Highway-173	92352	٥	1999	9.515	Kurt Weaver	9493646800	submissions decoraen-solutions net
80	City of Commerce - Batres Community Center - Site 1	3-000010515	4725 Astor Ave.	90040	٥	1999	3,569	Kurl Weaver	9493646800	submissions@ecouraen-solutions net
7	City of Commerce - Batres Community Center - Site 2	3-000010608	4725 Astor Ave.	90040	٥	1999	5,000	Kurt Weaver	9493646800	submissions@ecoareer-solutions.net
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Web Confirmation: W#045328

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EDISON

Multiple Project Site/Solution Worksheet

Express Solutions

NEW Your project may be eligible for a Comprehensive Project Bonus. See cover sheet for eligibility requirements.

Use this spreadsheet when installing solutions at more than one project site or more than four Express Solutions at all project sites.

1. If your project includes Express Solutions, fill out and submit this form with your completed application.

2. If you have more than 20 sites to list, use the drop down menu to the right to add more rows.

3. Use a separate line item for each solution located in a different location at the project site (e.g., warehouse, parking lot, room#). To avoid processing delays and ensure all eligible incentives are provided,

- please provide exact and detailed equipment location and description information.

 4. To obtain a Description of Existing Equipment refer to either your project proposal or contractor invoice. Refer to the Solutions Directory (www.sce.com/inc/ems/download/solutionsdirectory.pdf) for Solutions Codes, Solution Descriptions, Incentive Amounts, and Program and Equipment Eligibility Requirements. Read and answer the eligibility requirements before proceeding with your equipment purchase. Then calculate your incentive total.

 5. For installed projects, submit the following: 1) Invoice receipt(s) and 2) Specification sheet(s) for each installed solution(s) from vendor.
- Number of Rows

	Company Name:	Commer	Commerce City of						Utility Use Only	Only			
			of our or						(Project #)	(#)			
					Express Solutions Only	rtions Only							
	Existing Equipment Location and Description	ocation	and Description			New Equipr	New Equipment Incentive Calculations	3 Calculatio	รมเ				
Project Site Number (From	Exact and Detailed Location of Existing Equipment	Q,	Description of <u>Existing.</u> Equipment	Solution	Solution Description	Exact and Detailed Location of New Solution	Has the Solution Already Been	Date of Actual or Proposed Installation	Unit of Measure (e.g., lamp, fixture,	Number of Units Installed	ntive \$	5	Estimated Project Costs
Page 1)							Histailed	Date	sq.rr, np, erc.,	4	B ×	ပ ။	
ă	Office roof, NE corner of building	1	Air handler unit #4	AC-97352	Variable-frequency drives for HVAC fans	Office roof, NE comer of building	Yes	8/21/2013	4	+	\$80.00	\$80.00	\$200.00
-	Pole-mounted Basketball Lights	23	Non LED Lighting	LT-19782	441 to 517 Watt Exterior LED fixture 24 to 40 ft. with IAMS	Pole-mounted Basketball Lights	Ŷ.	2/4/2018	Fixture	23	\$300.00	\$6,600,00	\$62.271.00
-	Pole-mounted Parking Lot Floods	5	Non LED Lighting	LT-18913	114 to 123 Watt Exterior LED Fixture 15 to <24 ft with IAMS	Pole-mounted Parking Lot Floods	No	2/4/2018	Fixture	ın	\$125.00	\$625.00	\$4,468.75
-	Pole-mounted Playground Floods (3 per pole)	6	Non LED Lighting	LT-18913	114 to 123 Watt Extenior LED Fixture 15 to <24 ft. with IAMS	Pole-mounted Playground Floods (3 per pole)	o _N	2/4/2018	Fixture	е	\$125.00	\$375.00	\$2,681.25
-	Floods mounted law on Field Lights	2	Non LED Lighting	LT-18913	114 to 123 Watt Exterior LEB Fixture 15 to <24 ft. with IAMS	Floods mounted low on Field Lights	No	2/4/2018	Fixture	2	\$125.00	\$250.00	\$1,787.50
-	Light on walkway to Basketball court	9	Non LED Lighting	LT-18913	114 to 123 Watt Exterior LED Fixture 15 to <24 ft. with IAMS	Light on walkway to Basketball court	N _o	2/4/2018	Fixture	φ	\$125.00	\$750.00	\$5,362.50
-	Floods on Wall-ball Court	4	Non LED Lighting	LT-18919	328 to 440 Watt Exterior LED Focure 15 to <24 ft, with IAMS	Floods on Wall-ball Court	o _N	2/4/2018	Fixture	4	\$300.00	\$1,200.00	\$3,575.00
-	Ball Field Lights	46	Non LED Lighting	LT-56160	326 to 440 Watt Exterior LED fixture 24 to 40 ft. with IAMS	Ball Field Lights	ND	2/4/2018	Fixture	46	\$300.00	\$13,800.00	\$95,151.00
4	2-ARM POLES	4	Non LED Lighting	LT-18914	124 to 161 Watt Exterior LED Fixture 15 to <24 ft. with IAMS	2-ARM POLES	No	2/4/2018	Fixture	4	\$125.00	\$500.00	\$4,025.00
4	1-ARM POLES	12	Non LED Lighting	LT-18914	124 to 161 Watt Exterior LED Fixture 15 to <24 ft, with IAMS	1-ARM POLES	No	2/4/2018	Fixture	12	\$125.00	\$1,500.00	\$12,075.00
4	WALL: MOUNTED SQUARE AREA LIGHTS	14	Non LED Lighting	LT-18914	124 to 151 Watt Exterior LED Fixture 15 to <24 ft. with IAMS	WALL: MOUNTED SQUARE AREA LIGHTS	Ŷ	2/4/2018	Fixture	14	\$125.00	\$1,750.00	\$14,087.50
4	SQUARE DOWNLIGHT	33	Non LED Lighting	LT-18911	68 to 90 Watt Exterior LED Fixture 15 to <24 ft. with IAMS	SQUARE DOWNLIGHT	Š	2/4/2018	Fixture	33	\$75.00	\$2,475,00	\$27,596,25
4	LEVEL FACING THE PARKING	8	Non LED Lighting	LT-18911		LEVEL FACING THE PARKING	o _N	2/4/2018	Fixture	ю	\$75.00	\$225.00	\$2,508.75
ις	POLE- MOUNTED FLOODS	3	Non LED Lighting	LT-18911	68 to 90 Waff Exterior LED Fixture 15 to <24 ft. with IAMS	POLE- MOUNTED FLOODS	Š	4/6/2018	Fixture	е	\$75.00	\$225.00	\$3,206,55
9	Pole-mounted floods (low facing field)	3	Non LED Lighting	LT-18918	255 to 325 Watt Exterior LED Fixture 15 to <24 ft. with IAMS	Pole-mounted floods (low facing field)	S.	3/7/2018	Fixture	ю	\$300,00	\$900.00	\$7.269.90
9	Pole-mounted floods	4	Non LED Lighting	LT-18918	255 to 325 Waft Exterior LED Fixture 15 to <24 ft with IAMS	Pole-mounted floods	- SV	3/7/2018	Fixture	4	\$300.00	\$1.200.00	\$9.693.20
9	Pole-assembled Floods on Basketball courts	14	Non LED Lighting	LT-30938	255 to 325 Walt Exterior LED fixture 24 to 40 ft. with IAMS	Pole-assembled Floods on Basketball courts	Q.	3/7/2018	Fixture	41	\$300.00	\$4.200.00	\$33.926.20
7	(mounted low on field lights facing play ground)	8	Non LED Lighting	LT-18918	255 to 325 Watt Exterior LED Fixture 15 to <24 ft. with IAMS	(mounted low on field lights facing play ground)	No	3/7/2018	Fixture	ю	\$300.00	\$900.00	\$7,269.90

2/1/2011 Page 1

Web Confirmation: W#045328

EDISON

Multiple Project Site/Solution Worksheet

Express Solutions

NEW Your project may be eligible for a Comprehensive Project Bonus. See cover sheet for eligibility requirements.

Use this spreadsheet when installing solutions at more than one project site or more than four Express Solutions at all project sites.

- If your project includes Express Solutions, fill out and submit this form with your completed application.
 If you have more than 20 sites to list, use the drop down menu to the right to add more rows.
 Use a separate line item for each solution located in a different location at the project site (e.g., warehouse, parking lot, room#). To avoid processing delays and ensure all eligible incentives are provided,
- please provide exact and detailed equipment location and description information.

 4. To obtain a Description of Existing Equipment refer to either to either proposal or contractor invoice. Refer to the Solutions Directory (www.sce.com/inc/ems/download/solutionsdirectory.pdf) for Solutions Codes, Solution Descriptions, incentive Amounts, and Program and Equipment Eligibility Requirements. Read and answer the eligibility requirements before proceeding with your equipment purchase. Then calculate your incentive total.

 5. For installed projects, submit the following: 1) Invoice receipt(s) and 2) Specification sheet(s) for each installed solution(s) from vendor.

		_	_	_	_	
P				Estimated Project Costs		\$298,955,25
Rows 20				Incentive Total	C	\$37,475.00
Number of Rows				Number of Incentive \$ 19. Units Per Unit	A X B =	
	e Only :t #)			Numbe Units Install	A	TOTAL
	Utility Use Only (Project #)		suc	Unit of easure (e.	sq.ft., hp, etc.)	
			e Calculation	Actual or Merchael	Date	
			New Equipment Incentive Calculations	Has the Solution Already Been	Installed	
idor.		utions Only	New Equip	Exact and Detailed Location of New Solution		
5. For installed projects, submit the following: 1) Invoice receipt(s) and 2) Specification sheet(s) for each installed solution(s) from vendor.		Express Solutions Only		Solution Description		
ification sheet(Solution		
1) Invoice receipt(s) and 2) Spec	Commerce, City of		and Description	Description of <u>Existing.</u> Equipment		
lowing: 1	commerc		cation	Oft,		
talled projects, submit the fol	Company Name:		Existing Equipment Location and Description	Exact and Detailed Location of Existing Equipment		11522017
5. For ins				Project Site Number (From	Page 1)	Rovinsed

Customized Solutions Installation Report Instructions

	Project #	-
	Mail to: Business Incentives Southern California Edis	
	P.O. Box 800	
	Rosemead, CA 91770-08	800
1. →	INDICATE PAYMENT INFORMATION Please confirm address for the incentive payment	nt.
	Company:	
	Attention: (Name to be printed on check, use only if re	equired)
	Address:	
	City: State:	Zip:
	Print Name:	_Title:
	Authorizing Signature:	_Date:
2. →	UTILITY BILL CREDIT OPTION You have the option to credit the incentive to you	ır service account.
	Incentive can only be applied to the service a	account/utility bill of host customer.
3. →	W9 & CA590 FORMS Please sign and return the W9 & CA590.	
QUESTIONS?	Please call (800) 736-4777 or e-mail BusinessInd	centives@sce.com



(Rev. December 2011) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	Name (as shown on your income tax return)						
age 2.	Business name/disregarded entity name, if different from above						
Print or type See Specific Instructions on page	Check appropriate box for federal tax classification: Individual/sole proprietor C Corporation S Corporation Partnership	Trust/estate					
Print or type	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partne	rship) ▶				LJE	xempt payee
<u> </u>	☐ Other (see instructions) ►						
pecific	Address (number, street, and apt. or suite no.)	Requester	's name	and a	ddress (opt	ional)	
See S	City, state, and ZIP code						
	List account number(s) here (optional)						
Par							
	your TIN in the appropriate box. The TIN provided must match the name given on the "Name		Social s	ecurity	number		
	oid backup withholding. For individuals, this is your social security number (SSN). However, fo ent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other		1				
	antialien, sole proprietor, or disregarded entity, see the Part Histrictions on page 3. For other is, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>			-	1 1	-	
	n page 3.						
Note.	If the account is in more than one name, see the chart on page 4 for guidelines on whose		mploye	er ident	ification n	umber	
numb	er to enter.					- 1	
				_			
Par	t II Certification				*******		
Under	penalties of perjury, I certify that:						
1. Th	e number shown on this form is my correct taxpayer identification number (or I am waiting for	a number	to be i	issued	to me), a	nd	
Se	m not subject to backup withholding because: (a) I am exempt from backup withholding, or (trivice (IRS) that I am subject to backup withholding as a result of a failure to report all interest longer subject to backup withholding, and						

- 3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Signature of Here Date > U.S. person ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- · A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- · An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- . The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
 - 2. The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- 4. The type and amount of income that qualifies for the exemption from tax.
- Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your

Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester,
- 2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
 - 3. The IRS tells the requester that you furnished an incorrect TIN,
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see Special rules for partnerships on page 1.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

Partnership, C Corporation, or S Corporation. Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA) name" on the "Business name/disregarded entity name" line.

Disregarded entity. Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the "Name" line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the "Business name/disregarded entity name" line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter "P" for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line.

Form W-9 (Rev. 12-2011)

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/ disregarded entity name" line.

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

- 1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
 - 2. The United States or any of its agencies or instrumentalities,
- 3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
- 4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
- 5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

- 6. A corporation.
- 7. A foreign central bank of issue,
- 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States
- 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
 - 10. A real estate investment trust,
- 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
 - 12. A common trust fund operated by a bank under section 584(a),
 - 13. A financial institution,
- 14. A middleman known in the investment community as a nominee or custodian, or
- 15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 1	Generally, exempt payees 1 through 7 ²

¹See Form 1099-MISC, Miscellaneous Income, and its instructions.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see How to get a TIN below

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see Limited Liability Company (LLC) on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov, You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see Exempt Payee on page 3.

Signature requirements. Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

- Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.
 You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- **3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

²However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.

- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
Individual Two or more individuals (joint account)	The individual The actual owner of the account or, if combined funds, the first individual on the account '
Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
The usual revocable savings trust (grantor is also trustee)	The grantor-trustee '
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
Sole proprietorship or disregarded entity owned by an individual	The owner ³
6, Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
 Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B)) 	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- · Protect your SSN,
- . Ensure your employer is protecting your SSN, and
- · Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mirnic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identify theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: *spam@uce.gov* or contact them at *www.ftc.gov/idtheft* or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 1.

^{*}Note. Grantor also must provide a Form W-9 to trustee of trust.

YEAR

CALIFORNIA FORM

2011

For Privacy Notice, get form FTB 1131.

Withholding Exemption Certificate

(This form can only be used to certify exemption from nonresident withholding under California Revenue and Taxation Code (R&TC) Section 18662. Do not use this form for exemption from wage withholding.)

590

	e this form with your withholding agent. (Please type or print) hholding agent's name			
Pay	ree's name	Payee's □ SOS f		N or ITIN corp. no.
Add	dress (number and street, PO Box, or PMB no.)			Apt. no./ Ste. no.
City		State	ZIP Code	
Re	ad the following carefully and check the box that applies to the payee.			
Lo	ertify that for the reasons checked below, the payee named on this form is exempt from the Califor quirement on payment(s) made to the entity or individual.	nia inco	me tax withh	olding
	Individuals — Certification of Residency: I am a resident of California and I reside at the address shown above. If I become a nonres notify the withholding agent. See instructions for General Information D, Who is a Resident,			
	Corporations: The above-named corporation has a permanent place of business in California at the address through the California Secretary of State (SOS) to do business in California. The corporation and withhold on payments of California source income to nonresidents when required. If this a permanent place of business in California or ceases to do any of the above, I will promptly See instructions for General Information F, What is a Permanent Place of Business, for the business.	n will file s corpor y notify t	a California ation ceases he withholdi	tax return to have ng agent.
	Partnerships or limited liability companies (LLC): The above-named partnership or LLC has a permanent place of business in California at the registered with the California SOS, and is subject to the laws of California. The partnership return and will withhold on foreign and domestic nonresident partners or members when reLLC ceases to do any of the above, I will promptly inform the withholding agent. For withhol partnership (LLP) is treated like any other partnership.	or LLC v quired. I	vill file a Cali f the partners	fornia tax ship or
	Tax-Exempt Entities: The above-named entity is exempt from tax under California Revenue and Taxation Code (for (insert letter) or Internal Revenue Code Section 501(c) (insert number). The tax-exempt of California source income to nonresidents when required. If this entity ceases to be exemply withholding agent. Individuals cannot be tax-exempt entities.	npt entit	y will withhol	d on payments
	Insurance Companies, Individual Retirement Arrangements (IRAs), or Qualified Pension/Fine above-named entity is an insurance company, IRA, or a federally qualified pension or p			:
	California Trusts: At least one trustee and one noncontingent beneficiary of the above-named trust is a California fiduciary tax return and will withhold on foreign and domestic nonresident benefic becomes a nonresident at any time, I will promptly notify the withholding agent.			
	Estates — Certification of Residency of Deceased Person: I am the executor of the above-named person's estate. The decedent was a California resid will file a California fiduciary tax return and will withhold on foreign and domestic nonresider			
	Nonmilitary Spouse of a Military Servicemember: I am a nonmilitary spouse of a military servicemember and I meet the Military Spouse Resirequirements. See instructions for General Information E, MSRRA.	dency R	elief Act (MS	RRA)
CE	RTIFICATE: Please complete and sign below.			
	der penalties of perjury, I hereby certify that the information provided in this document is, to the be rect. If conditions change, I will promptly notify the withholding agent.	st of my	knowledge,	true and
Pay	ree's name and title (type or print) Daytime telephone r	10		
Pay	vee's signature ▶	Date		

Instructions for Form 590

Withholding Exemption Certificate

References in these instructions are to the California Revenue and Taxation Code (R&TC).

What's New

Backup Withholding — Beginning on or after January 1, 2010, with certain limited exceptions, payers that are required to withhold and remit backup withholding to the Internal Revenue Service (IRS) are also required to withhold and remit to the Franchise Tax Board (FTB). The California backup withholding rate is 7% of the payment. For California purposes, dividends, interests, and any financial institutions release of loan funds made in the normal course of business are exempt from backup withholding. For additional information on California backup withholding, go to ftb.ea.gov and search for backup withholding.

If a payee has backup withholding, the payee must contact the FTB to provide a valid Taxpayer Identification Number (TIN) before filing a tax return. The following are acceptable TINs: social security number (SSN); individual taxpayer identification number (ITIN); federal employer identification number (FEIN); California corporation number (CA Corp No.); or Secretary of State (SOS) file number. Failure to provide a valid TIN will result in the denial of the backup withholding credit. For more information go to ftb.ca.gov and search for backup withholding.

General Information

For purposes of California income tax, references to a spouse, husband, or wife also refer to a Registered Domestic Partner (RDP) unless otherwise specified. For more information on RDPs, get FTB Pub. 737, Tax Information for Registered Domestic Partners.

Private Mail Box (PMB) – Include the PMB in the address field. Write "PMB" first, then the box number. Example: 111 Main Street PMB 123.

Foreign Address – Enter the information in the following order: City, Country, Province/ Region, and Postal Code. Follow the country's practice for entering the postal code. **Do not** abbreviate the country's name.

A Purpose

Use Form 590, Withholding Exemption Certificate, to certify an exemption from nonresident withholding. California residents or entities should complete and present Form 590 to the withholding agent. The withholding agent is then relieved of the withholding requirements if the agent relies in good faith on a completed and signed Form 590 unless told by the FTB that the form should not be relied upon.

The following are excluded from withholding and completing this form:

 The United States and any of its agencies or instrumentalities

- A state, a possession of the United States, the District of Columbia, or any of its political subdivisions or instrumentalities
- A foreign government or any of its political subdivisions, agencies, or instrumentalities

Important – This form cannot be used for exemption from wage and real estate withholding.

- If you are an employee, any wage withholding questions should be directed to the FTB General Information number, 800.852.5711. Employers should call 888.745.3886 or go to www.edd.ca.gov.
- Sellers of California real estate use Form 593-C, Real Estate Withholding Certificate, to claim an exemption from real estate withholding.

B Requirement

R&TC Section 18662 requires withholding of income or franchise tax on payments of California source income made to nonresidents of California.

Withholding is required on the following, but is not limited to:

- Payments to nonresidents for services rendered in California.
- Distributions of California source income made to domestic nonresident S corporation shareholders, partners and members and allocations of California source income made to foreign partners and members.
- Payments to nonresidents for rents if the payments are made in the course of the withholding agent's business.
- Payments to nonresidents for royalties with activities in California.
- Distributions of California source income to nonresident beneficiaries from an estate or trust
- Prizes and winnings received by nonresidents for contests in California.

However, withholding is optional if the total payments of California source income are \$1,500 or less during the calendar year.

For more information on withholding get FTB Pub. 1017, Resident and Nonresident Withholding Guidelines. To get a withholding publication See General Information H, Publications, Forms, and Additional Information.

C Who Certifies this Form

Form 590 is certified by the payee. An incomplete certificate is invalid and the withholding agent should not accept it. If the withholding agent receives an incomplete certificate, the withholding agent is required to withhold tax on payments made to the payee

until a valid certificate is received. In lieu of a completed certificate on the preprinted form, the withholding agent may accept as a substitute certificate a letter from the payee explaining why the payee is not subject to withholding. The letter must contain all the information required on the certificate in similar language, including the under penalty of perjury statement and the payee's taxpayer identification number. The withholding agent must retain a copy of the certificate or substitute for at least four years after the last payment to which the certificate applies, and provide it upon request to the Franchise Tax Board.

For example, if an entertainer (or the entertainer's business entity) is paid for a performance, the entertainer's information must be provided. **Do not** submit the entertainer's agent or promoter information.

The grantor of a grantor trust shall be treated as the payee for withholding purposes. Therefore, if the payee is a grantor trust and one or more of the grantors is a nonresident, withholding is required. If all of the grantors on the trust are residents, no withholding is required. Resident grantors can check the box on Form 590 labeled "Individuals — Certification of Residency."

D Who is a Resident

A California resident is any individual who is in California for other than a temporary or transitory purpose or any individual domiciled in California who is absent for a temporary or transitory purpose.

An individual domiciled in California who is absent from California for an uninterrupted period of at least 546 consecutive days under an employment-related contract is considered outside California for other than a temporary or transitory purpose.

An individual is still considered outside California for other than a temporary or transitory purpose if return visits to California do not total more than 45 days during any taxable year covered by an employment contract.

This provision does not apply if an individual has income from stocks, bonds, notes, or other intangible personal property in excess of \$200,000 in any taxable year in which the employment-related contract is in effect,

A spouse/RDP absent from California for an uninterrupted period of at least 546 days to accompany a spouse/RDP under an employment-related contract is considered outside of California for other than a temporary or transitory purpose.

Generally, an individual who comes to California for a purpose which will extend over a long or indefinite period will be considered a resident. However, an individual who comes to perform a particular contract of short duration will be considered a nonresident.

For assistance in determining resident status. get FTB Pub. 1031, Guidelines for Determining Resident Status, and FTB Pub. 1032. Tax Information for Military Personnel, or call the FTB at 800.852.5711 or 916.845.6500.

Military Spouse Residency Relief Act (MSRRA)

Generally, for tax purposes you are considered to maintain your existing residence or domicile. If a military servicemember and nonmilitary spouse have the same state of domicile, the MSRRA provides:

- · A spouse shall not be deemed to have lost a residence or domicile in any state solely by reason of being absent to be with the servicemember serving in compliance with military orders.
- A spouse shall not be deemed to have acquired a residence or domicile in any other state solely by reason of being there to be with the servicemember serving in compliance with military orders.

Domicile is defined as the one place:

- · Where you maintain a true, fixed, and permanent home
- To which you intend to return whenever you are absent

A military servicemember's nonmilitary spouse is considered a nonresident for tax purposes if the servicemember and spouse have the same domicile outside of California and the spouse is in California solely to be with the servicemember who is serving in compliance with Permanent Change of Station orders (Note: California may require nonmilitary spouses of military servicemembers to provide proof that they meet the criteria for California personal income tax exemption as set forth in the MSRRA).

Income of a military servicemember's nonmilitary spouse for services performed in California is not California source income subject to state tax if the spouse is in California to be with the servicemember serving in compliance with military orders, and the servicemember and spouse have the same domicile in a state other than California.

For additional information or assistance in determining whether the applicant meets the MSRRA requirements, get FTB Pub. 1032.

What is a Permanent Place of Business

A corporation has a permanent place of business in California if it is organized and existing under the laws of California or if it is a foreign corporation qualified to transact intrastate business by the SOS. A corporation that has not qualified to transact intrastate business (e.g., a corporation engaged exclusively in interstate commerce) will be considered as having a permanent place of business in California only if it maintains a permanent office in California that is permanently staffed by its employees.

Withholding Agent

Keep Form 590 for your records. Do not send this form to the FTB unless it has been specifically requested.

For more information, contact Withholding Services and Compliance, see General Information H.

The payee must notify the withholding agent if any of the following situations occur:

- The individual payee becomes a nonresident.
- The corporation ceases to have a permanent place of business in California or ceases to be qualified to do business in California.
- The partnership ceases to have a permanent place of business in California.
- The LLC ceases to have a permanent place of business in California.
- The tax-exempt entity loses its tax-exempt

The withholding agent must then withhold and report the withholding using Form 592, Resident and Nonresident Withholding Statement, and remit the withholding using Form 592-V, Payment Voucher for Resident and Nonresident Withholding, Form 592-B. Resident and Nonresident Withholding Tax Statement, is retained by the withholding agent and a copy is given to the payee.

H Publications, Forms, and **Additional Information**

You can download, view, and print California tax forms and publications at ftb.ca.gov.

To have publications or forms mailed to you or to get additional nonresident withholding information, contact the Withholding Services and Compliance.

WITHHOLDING SERVICES AND COMPLIANCE MS F182 FRANCHISE TAX BOARD PO BOX 942867 SACRAMENTO CA 94267-0651

Telephone: 888.792.4900 916.845.4900 Fax: 916.845.9512

For all other questions unrelated to withholding or to access the TTY/TDD numbers, see the information below.

Internet and Telephone Assistance

Website:

ftb.ca.gov 800,852,5711 from within the United States Telephone:

916.845,6500 from outside the

United States

TTY/TDD: 800.822.6268 for persons with

hearing or speech impairments

Asistencia Por Internet v Teléfono

Sitio web: ftb.ca.gov 800.852.5711 dentro de los Teléfono:

Estados Unidos 916.845.6500 fuera de los Estados

800.822,6268 personas con TTY/TDD:

discapacidades auditivas

v del habla



SEND TO: Southern California Edison, Business Incentives – OBF Program P.O. Box 800, Rosemead, CA 91770-0800 E-mail: BusinessIncentives@sce.com | Fax: 626-633-3243 Questions? (866) 635-6015

12/21/2017

Customer Information:

Robert Lipton City Of Commerce 2535 Commerce Way Commerce, CA 90040 **Trade Professional Information:**

Corey Brophy Ecogreen Solutions 27611 La Paz Rd Ste A2 Laguna Niguel, CA 92677-3999

RE: NOTICE OF ON-BILL FINANCING (OBF) APPLICATION APPROVAL AND PARTIAL FUNDING RESERVATION PROJECT NUMBER: 318-17-0500991740SA#: (MULTI-SITE)

Dear Robert Lipton and Corey Brophy::

Your On-Bill Financing Application has been reviewed and approved, and funding for your On-Bill Financing (OBF) Loan has been reserved for the Express portion of your project. You will receive a revised Loan Reservation when Customized portion of your project is approved.

An OBF Loan Reservation for the Express project has been established in the amount of \$259,480.25 and is subject to the following terms and conditions.

Terms and Conditions of Loan Reservation:

- The reserved amount has been calculated based on the results of the review and approval of your Energy Efficiency
 Project Application, and according to the provisions and methodology of the OBF Loan Term Calculation [LTC].
 Since the loan reservation amount is based on an approved project proposal, it is an <u>estimate</u> of what the actual
 loan amount may be.
 - 1a. An OBF Loan Term Calculation [LTC] is attached.
- The actual loan amount will be calculated based on the results of the review and approval of your Energy Efficiency Project Installation Report, and according to the provisions and methodology of the OBF Loan Term Calculation [LTC]. Therefore, the actual amount of the OBF Loan may differ from the reserved amount presented above.
 - 2a. The actual amount of the OBF loan may be less than the reserved amount presented above.
 - 2b. The actual amount of the OBF loan shall not exceed the reserved amount presented above.
- 3. The expiration of the loan reservation shall be consistent with that of the project incentive.

Next Steps:

- You submit the completed Installation Report [IR] to SCE, and SCE will review it.
- SCE will calculate the actual final loan amount, based on the results of the IR approval, and the LTC provisions.
- SCE will issue 2 copies of the OBF Loan Agreement to you.
- · You will sign, and have notarized, the Agreements and return to SCE.
- SCE will counter-sign the Agreements.
- SCE will provide you with 1 copy of the fully-executed Loan Agreement and will process the loan proceeds.

If you have any questions, please contact your SCE Account Representative. You may also call us at (866) 635-6015 Monday through Friday, from 8:00 a.m. to 5:00 p.m., or send an e-mail to **Businessincentives@sce.com**. Please have your Project Number available for reference when you call, or include it in your e-mail.

Sincerely.

Delia Williams

Program Manager - On Bill Financing Southern California Edison Company.

Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning SCE is the Federal Trade Commission, Equal Credit Opportunity, Washington DC 20580.

On-Bill Financing Program - Final Loan Term Calculation (LTC1a)

 Completion Date/Time:
 12/21/2017 2:52 PM

 Project Number:
 See Schedule A

 Service Account to be Billed:
 3-000-0105-14

 Customer Number:
 1-0-000-1057

 Customer Account Number:
 See Schedule A

 Loan ID:
 0-000-0093-27

 Bundle ID:
 BDL0394

 OBF Application Receipt Date:
 9/7/2017

Market Segment:
Business Name:
Reference Name:
Address:
City, CA Zip:
Government and Institutions
COMMERCE, CITY OF
OBF CITY OF COMMERCE -MULTISITE
1466 S MCDONNELL AVE
COMMERCE, CA 90040

*** LTC1a ***

FINAL TERMS CALCULATED BASED ON FINAL REVIEW AND VERIFICATION OF THE PROJECT INSTALLATION REPORT

LTC1a Reserved Amount is \$259,480.25 First month payment is \$1,790.75 75 subsequent monthly payments \$3,435.86

PROJECT ECONOMIC SUMMARY		EXPLANATION
AVERAGE ELECTRIC BILLING RATE – past 12 months (Cents/kWh)	\$ 0.20181	Based on Billing History (All sites included)
ENERGY EFFICIENCY PROJECT SAVINGS		
B.1. Estimated Combined Annual Kilowatt Hour Savings (kWh)	204,302.5	From Approved Installation Report
B.2. Estimated Combined Annual Dollar(\$) Savings B.3. Estimated Combined Monthly Dollar(\$) Savings	\$ 41,230.28 \$ 3,435.86	Estimated Annual kWh Savings x Average Rate = \$ savings (B.1 x A) Estimated Monthly \$ Savings (B.2 / 12)
COSTS		
C.1. Actual Total Combined Project Cost	\$ 296,955.25	From Approved Installation Report
C.2. Excess Project Cost	\$ -	Based on 20% Basic Lighting Cap Rule
C.3. Actual Total Rebate/Incentive	\$ 37,475.00	From Approved Installation Report
C.4. Other C.5. Actual Potential Loan Amount (Gross Amount)	\$ 259,480.25	(C.1) - (C.2) - (C.3) - (C.4)
C.6. LTC1 Reserved Amount	\$ 259 480.25	From LTC1 calculation following Approved Project Application
C.7. LTC2 Reserved Amount		• •
LOAN		
D.1. Gross Amount for Potential Financing	\$ 259,480.25	Lesser of (C.5) or (E.1.2) or (E.2.3) or other rules apply
D.2. Monthly Loan Repayment Amount	\$ 3,435.86	(B.3)
D.3. Actual loan term (Months)	70	Time required to repay loan in months (subject to exception analysis below)
D.4. Actual loan term (Years)	6.3	Time required to repay loan in years: (D.3)/12
LOAN LIMIT TESTS		
E.1. Market Segment Amount of Loan Test (Min/Max Loan Amount)		
E.1.1. Market Segment Minimum Loan Amount	\$ 5,000	Minimum Loan Amount per Service Account or Bundle
E.1.3. Within Market Segment Limit?	Υ	Is D.1 within loan amount limits Y/N?
E.2. Customer Loan Limit Test (Previous Loans for this Customer Account)	: 2:	
E.2.2. Previous Loans Reserved for this Customer	\$ 258,343	Total of previous OBF loans + reservations
Number	200,010	
E.2.4. Within 10% of Total Budget?	Y	
E.3. Length of Loan Test		
E.3.1. Loan Length Limit (months)	120	CIA = 60 months, Multifamily = 120 months, G&I = 120 months
E.3.2. Within Loan Length Limit?	Y	Is D.3 within limit Y/N?
E.4. Expected Useful Life (EUL)* Loan Length Limit Test	:	
E.4.1. Applicable Measure EUL (months)	120	EUL in months of measure with greatest kWh contribution
E.4.2. Within EUL Loan Length Limit?	Y	Is D.3 within limit Y/N?
E.5. EXCEPTION ANALYSIS (If any E.1 thru E.4. yields a "No")		Exception Analysis Loan Minimum Requirement Test
		Does the loan amount from Exception Analysis meet the \$5K loan minimum requirement? YES
E.5.1. First Payment Amount	\$ 1,790.75	
E.5.2. Subsequent Monthly Loan Repayment Amount	\$ 3,435.86	Based on minimum loan requirement of \$5K and supplement
E.5.3. Subsequent Monthly Payments	75	Exception Analysis, this amount qualifies for an OBF loan.
E.5.4. Net Amount for Financing	\$ 259,480.25	
*Expected Useful Life (EUL): Each measure is expected to perform satisfactorily for a period of time. An EUL for eac energy efficiency measure is assigned by the California Energy Commission (CEC).	ch	

SCHEDULE A LTC1a

Multiple Sites

Customer Name: COMMERCE, CITY OF OBF CITY OF COMMERCE - Customer Account to be Billed:

2-00-437-0755

Customer Reference: MULTISITE

Service Account to be Billed:

3-000-0105-14

Amount Financed:

\$259,480.25

Loan ID: 0-000-0093-27 Bundle ID: BDL0394

Months to Pay:

76

\$1,790.75

1st Month Payment:

\$3,435.86 per month for 75

Remaining Monthly Payments: months

Site #	Project Number	Customer Account	Site Service Account Number	Site Loan Amount
1	318-17-0500991740	2-00-437-0755	3-012-4797-51	\$53,842.50
2	318-17-0500991740	2-00-437-0755	3-003-6929-79	\$2,981.55
3	318-17-0500991740	2-00-437-0755	3-000-0106-08	\$6,369.90
4	318-17-0500991740	2-00-437-0755	3-000-0105-15	\$44,589.30
5	318-17-0500991740	2-00-437-0755	3-000-0105-14	\$151,697.00

Uncapped Amount Financed: \$259,480.25

Jay Hervey 12/21/2017

^{*} Prepared by:



SEND TO: Southern California Edison, Business Incentives

P.O. Box 800, Rosemead, CA 91770-0800

E-mail: BusinessIncentives@sce.com | Fax: 626-633-3243

December 21, 2017

Project Number: 318-17-0500992135

Project: Customized Solutions Approach
Customer Ref.: Aquatic Center & Rosewood

<u>Trade Professional Information:</u> <u>Customer Information:</u>

Corey Brophy Robert Lipton
EcoGreen Solutions City of Commerce
27611 La Paz Rd. A2 2535 Commerce Way
Laguna Niguel, CA 92677 Commerce, CA 90040

RE: NOTICE OF CUSTOMIZED SOLUTIONS CONTRACT AND INCENTIVE APPROVAL

SA # 3-000-0105-13

Dear Corey Brophy & Robert Lipton,

Thank you for submitting your Energy Management Solutions Incentive Application ("Application") for the Customized Solutions Program ("Program"). Your Application for incentives for the Project(s) described in your application has been reviewed and approved. Funds reserved are based on SCE approved savings estimate set forth below; however, the actual incentive payments will be made based on verified and actual savings' amounts:

SCEFTUN Approved Sav	iga apit bi	confly Ed	insite - /			
SOLUTIONS DESCRIPTION	Code	kWh	kW	Therms	\$ Ince	entive Amount
Interior LED fixture replacement (utilizing approved luminaries)	LT-17492	5,704.5	1.40	0.00	\$	666.36
Exterior LED Fixture mounted less than 15 ft. above finished grade	LT-19132	35,768.4	0.00	0.00	\$	2,861.47
Exterior Screw-in LED Lamps	LT-45872	3,493.2	0.00	0.00	\$	279.46
Total Approved Savings/Incentive Estimates		44,966.1	1.40	0.00	\$	3,807.29
Project Cost Adjustment					\$	0.00
Total Estimated Incentive					\$	3,807.29
10% Measurement and Verification A	dder (if applical	ole)				

If you do not concur with the energy savings and incentive amounts shown above, you have 30 days from the date of this letter to notify SCE, so that we can attempt to resolve your concern(s). If you do not notify us of any concerns within 30 days of this letter, the savings/incentive estimates set forth above will be deemed correct. If you agree with the estimates, you may proceed to purchase and install the above solution code(s) at any time. This Project Approval incorporates by reference the Application, including the Applicant Agreement regarding Program Terms and Conditions (Rev. April 2017)

After your project is <u>completely installed</u>, operational, and meets all requirements of the Program, which is described in detail in the Customized Statewide Procedures Manual for Business and at www.sce.com/customized_solutions:

- Complete, sign and submit the enclosed Customized Solutions Installation Report.
- Submit final invoices and/or documentation to support project cost, clearly detailing all costs associated with the project (equipment, labor, tax, etc.).
- Submit complete engineering calculations to demonstrate energy savings and documentation, if applicable (including archival diskette, CD, etc.).
- Submit schematic drawings and/or manufacturer specification sheets, if applicable.
- · Operating Report, if measurement and verification is required.
- Submit Pump Curve (if applicable)
- Submit Permit Closure for HVAC measures (if applicable)

NOTE:

As a reminder, the deadline for the project to be completely installed and operational is one year from the date of this Project Approval letter. Please submit the completed Installation Report within 30 days after installation and prior to the one year deadline.

Upon SCE review and approval of your completed Installation Report and supporting cost documentation, you will be notified in writing. Thereafter, SCE will process the incentive check or SCE utility bill credit, as applicable. If SCE is unable to approve your incentives based on the information provided, SCE may require you to submit other documents related to the Project, Project site, solutions, energy savings, or any other documents it requires, in its sole discretion, to make a decision on your Application.

If you have any questions, please contact your SCE Account Representative. You may also call us at (626) 635-6015 Monday through Friday, from 8:00 a.m. to 5:00 p.m., or send an e-mail to BusinessIncentives@sce.com. Please have your project number available for reference when you call and include it in any e-mail correspondence.

Business Incentives Team Southern California Edison

WT2#/UPN/Service Contract ID	318-17-0500992135
Review Completion Date	11/20/17
Technical Review Engineer	Doron Fishman
Consulting Firm	PL Energy

		1
	Status	Approved as submitted
Approval	Additional Comments	The approved lighting hours are 1130 hours per year. These are the prescribed hours for a DEER Building
		Type "Assembly". The reviewer approves of these hours. Applicant has verified all influence
		requirements in the files in CRM labeled, "M&V plan" and "Project Summary"
	Submitted	LT-17492
ما من من من امن امن امن امن امن امن امن	Description	Interior LED fixture replacement (utilizing approved luminaries)
Solution Code	Approved	LT-17492
	Description	Interior LED fixture replacement (utilizing approved luminaries)
	Submitted	12.00
EUL	Approved	12.00
The second second second second	Source	Iltg-Com-LEDfix-50000hr
	Submitted	N/A
RUL	Approved	N/A
	Source	N/A
	Submitted	ROB
Install Type	Approved	ROB
	Assessment	Approved as submitted
	Submitted	T8 Fixtures

10	Annual	TO Citation
	Approved	io rixtures
Project Messure Technology	Submitted	LED fixtures
	Approved	LED fixtures
	Approved	Easy Lighting Calculator V3.0
		Equipment quantities were corrected per inspection
		findings
	Changes made	
		The reviewer removed 32 troffer fixtures based on
		page 9 of the 2017 Solutions Directory:
		"Interior LED troffers and troffer retrofit kits are not
		eligible for incentives."
Calculation Methodolom		See photos in the inspection tab.
		Updated calculations are found in the following
		attachments:
		"318-17-0500992135_QUOTES_dual baseline quote
	Additional Comments	501059 - city of commerce - aquatic center &
		rosewood park - r1 7.19.2017-ple.xlsx"
		"318-17-0500992135_CALCULATIONS_elc_v3 - city of
		commerce - aquatic center & rosewood park - r1
		7.19.2017-ple.xlsm"
		"318-17-0500992135_QUOTES_quote 501059 - city of
		commerce - aquatic center & rosewood park - r3 -
		8.28.17-ple.xls"
	1st Period kWh Savings	5,704.50
Special Application	1st Period kW Savings	1.400000
	2nd Period kWh Savings	
	2nd Period kW Savings	
Project Therms Indirect	1st Period	(24.3)
	2nd Period	
	Approved 1st Baseline	\$ 61,675,33

	Approved 2nd Baseline	
Project Cost Basis	Cost Documentation [GMC]	Cost Estimate Reference
	Cost Documentation [IMC]	Cost Estimate Reference
	Early Retirement Cost [ERC]	٠,
le Oneita Ganaration Bracan	protion Brocont at this customor cital	There is no onsite generation at the facility that may
	t at this customer site:	impact the proposed measure savings.
Cotis sample of this customer cites	this cristomar cits	No load shifting strategies are in place that impact the
	י נווון במזכחוובן אוכן	demand reduction savings.
Cuetomer eite enrolled in Demond Beensner Carre	Cameranord canonach buch	The customer site is not enrolled in any SCE Demand
	alla Nespolise Flogiallis:	Response Programs.
Does Equipment Operate 2-5PM During DEER Peak Periods?	During DEER Peak Periods?	Yes
Is the Submitted M&V Plan Approved ?	/ Plan Approved ?	Not Required

WT2#/UPN/Service Contract ID	318-17-0500992135
Review Completion Date	11/20/17
Technical Review Engineer	Doron Fishman
Consulting Firm	PL Energy

		2
	Status	Approved as submitted
		The exterior fixtures in this application are mounted 3,
		8, 10, 12 or 14 feet above grade. Operating hours of
		4100 are the maximum allowed by DEER. These
		exterior fixtures are operating 365 days per year
Approval		during darkness periods, or 11.23 hours per day. They
	Additional Comments	are switched on by a photocell. The reviewer
		approves of these hours. The reviewer approves of
		these hours. Applicant has verified all influence
		requirements in the files in CRM labeled, "M&V plan"
		and "Project Summary".
	Submitted	LT-19132
	Description	
Solution Code	Approved	LT-19132
	Description	
	Submitted	12.00
EUL	Approved	12.00
	Source	
	Submitted	N/A
RUL	Approved	N/A
	Source	N/A
	Submitted	ROB
Install Type	Approved	ROB
	Assessment	Approved as submitted
Draiget Recaling Technology	Submitted	CFL, T8 and MH fixtures

נוחוברי המסכווום וברוווחות 2	Approved	CFL, T8 and MH fixtures
	Submitted	LED fixtures
Project Measure Technology	Approved	LED fixtures
	Approved	Easy Lighting Calculator V3.0
	Changes made	
Calculation Methodology	Additional Comments	
	1st Period kWh Savings	35,768.40
	1st Period kW Savings	
rioject savings	2nd Period kWh Savings	
	2nd Period kW Savings	
Project Therms Indirect	1st Period	
	2nd Period	
	Approved 1st Baseline	\$ 23.505.13

	Approved 2nd Baseline	÷
Project Cost Basis	Cost Documentation [GMC]	Cost Estimate Reference
	Cost Documentation [IMC]	Cost Estimate Reference
Contraction of the Contraction o	Early Retirement Cost [ERC]	· ·
le Oncita Gonoration Dracont at this mortane.	Cotin roundtain sidt to tue	There is no onsite generation at the facility that may
	מני מן חווז במזרסווופן זורפ:	impact the proposed measure savings.
losd Shifting amployed	Cotic remoters of the boundame	No load shifting strategies are in place that impact the
	פר נוווס במסוחפו סורפ:	demand reduction savings.
Customar eita anzollad in Damand Daspara Draman	Company O conomo Ducem	The customer site is not enrolled in any SCE Demand
	maila nesponse ri ogiams:	Response Programs.
Does Equipment Operate 2-5PN	erate 2-5PM During DEER Peak Periods?	No
Is the Submitted M&V Plan Approved ?	الله الله الله الله الله الله الله الله	Not Required

WT2#/UPN/Service Contract ID	318-17-0500992135
Review Completion Date	11/20/17
Technical Review Engineer	Doron Fishman
Consulting Firm	PL Energy

		m
	Status	Approved as submitted
		The exterior fixtures in this application are mounted 3,
		8, 10, 12 or 14 feet above grade. Operating hours of
		4100 are the maximum allowed by DEER. These
		exterior fixtures are operating 365 days per year
Approval	Additional Constitution	during darkness periods, or 11.23 hours per day. They
	Additional Comments	are switched on by a photocell. The reviewer
		approves of these hours. The reviewer approves of
		these hours. Applicant has verified all influence
		requirements in the files in CRM labeled, "M&V plan"
		and "Project Summary".
	Submitted	LT-45872
	Description	Exterior Screw-in LED Lamps
	Approved	LT-45872
	Description	Exterior Screw-in LED Lamps
	Submitted	12.00
EUL	Approved	12.00
	Source	Oltg-LED
	Submitted	N/A
RUL	Approved	N/A
	Source	N/A
	Submitted	ROB
Install Type	Approved	ROB
The second second	Assessment	Approved as submitted
Droiget Receline Technology	Submitted	CFL fixtures

נוספרר המשפחוום וברוווסוספא	Approved	CFL fixtures
	Submitted	IED fixtures
Project Measure Technology	Sabillited	ברם וועותובי
	Approved	LED fixtures
	Approved	Easy Lighting Calculator V3.0
	Changes made	
Calculation Methodology		Operating hours of 4100 are the maximum allowed by DEER. These exterior fixtures are operating 365 days per year during darkness periods, or 11.23 hours per day. They are switched on by a photocell. The reviewer approves of these hours. Applicant has verified all influence requirements in the files in CRM labeled, "M&V plan" and "Project Summary".
	Additional Comments	
	1st Period kWh Savings	3,493.20
	1st Period kW Savings	
rioject savings	2nd Period kWh Savings	
	2nd Period kW Savings	
Project Therms Indirect	1st Period	
	2nd Period	
	Approved 1st Baseline	\$ 4.492.87

	Approved 2nd Baseline	- \$
Project Cost Basis	Cost Documentation [GMC]	Cost Estimate Reference
	Cost Documentation [IMC]	Cost Estimate Reference
	Early Retirement Cost [ERC]	
Constantion December 44 the Constantion Designation of	Cotion actions of the to	There is no onsite generation at the facility that may
	it at this customer site:	impact the proposed measure savings.
c beyon an an annual of a	this suctomore city	No load shifting strategies are in place that impact the
Logo Simulig employed at this customer site:		demand reduction savings.
Cueronor eito consolio di in Domona December	Commenced commenced back	The customer site is not enrolled in any SCE Demand
Custoffier site etill offed III Dell	Idila nesponse Plograms:	Response Programs.
Does Equipment Operate 2-5PM During DEER Peak Periods?	During DEER Peak Periods?	No
Is the Submitted M&V Plan Approved ?	/ Plan Approved ?	Not Required



Energy Management Solutions Incentives Application for Business Customers

Customized Installation Report

3-000-0105-13 318-17-0500992135 Aquatic Center & Rosewood UPN#: SA# Customer Ref.:

City of Commerce **Customer Name: Trade Professional:** EcoGreen Solutions

INSTRUCTIONS:

After your project is installed and operational, input the project installation commencement and completion dates in the fields provided in Section 3. Review the information from your Application Approval Letter. If nothing has changed, and the information in Customized Solutions and Energy Savings is correct, complete and sign Section 8 on page 2 of this Installation Report (IR) Form. If any information differs from Section 1 of this page or your Application Approval Letter, use Section 4 on page 2 of this IR Form to indicate the change. Then, mark the appropriate check box in section 8 on page 2 of this IR Form. If any Payment Information differs from Section 2 on page 1 of this IR Form, complete Section 5 on page 2. Review Sections 6 and 7 on page 2 of this IR Form and complete if applicable. Sign and return both pages to SCE at one of the addresses below.

Business Incentives Southern California Edison

P.O. Box 800

Rosemead, CA 91770-0800

E-mail: BusinessIncentives@sce.com

Fax: (626) 633-3243

Questions: Contact your Account Manager

or call (626) 635-6015

Section 1 - Customized Solutions, Energy Savings & On-Peak Demand Reduction Estimate: NOTE: If submitting more than 5 Solutions complete and attach the Customized Solution page from the Multiple Site/Solution Worksheet at www.sceonlineapp.com

Line#	Solution Code	Baseline Usage	Ð	Installe Usage		Approve Savings		Incenti Rate		Project Cost	Incent	ive Amount
		9591.6	kWh	3887.1	l kWh	5704.5	kWh	\$ 0.	08			
1	LT-17492	2.36	kW	0.96	ı kW '	1.40	kW	\$ 150.	00 \$	71,776.52	\$	666.36
			Thm	24.31	Thm	0.00	Thm	\$ 1.	50			
		47531.3	kWh	11762.9	kWh	35768.4	kWh	\$ 0.	08			
2	LT-19132		kW		kW	0.00	kW	\$ -	\$	51,194.41	\$	2,861.47
			Thm		Thm	0.00	Thm	\$ 1.	50			
		4993.8	kWh	1500.6	kWh	3493.2	kWh	\$ 0.	08			

kW kW n kW 150 5.599.50 \$ 3 LT-45872 \$ 279.46 Thm Thm Thm \$ 1.50 kWh kWh kWh kW kW kW Thm Thm Thm kWh kWh kWh kW kW kW 5

Thm

Total Approved Energy Savings (kWh):

44966.10

Total Approved On-Peak Reduction (kW):

Thm

1.40

Total Project Cost (\$):

\$128,570.43

Calculated Savings Incentive: * Includes Project Cost Adjustment (If Applicable)

\$3,807.29

NOTE: For projects requiring M&V, attach any required baseline or post-installation measurements and analysis, as specified in your approved M&V plan.

Thm

Section 2 - Payment Information: (As indicated on the Application)

A. Form of Payment:	Check to Trade Pro	
B. Payee Information:	(Check to Customer, Check to TradePro or Check to Third Party)	
	EcoGreen Solutions Inc	

red to be printed on the check? 27611 La Paz Road Suite A2 Laguna Niguel 92677 City

949-364-6800 submissions@ecogreen-solution.net

Contact E-Mail Address C. Tax Identification Type: CORPORATION Federal Tax ID 6823 Federal Tax ID/Employer ID Number (EIN) Social Security Number (SSN

Exempt Reason

ount Numbe

Section 3 - Installation Dates:

3-

Complete both dates:

D. Utility Bill Credit:

Installation Commencement Date: Installation Completion Date:

> Page 1 Rev. April 2017

Secti	on 4 - Customized S	olutions, Energy :	Savings & On-Pe	ak Demand Red	uction: ((If different tha	n page 1)
NOTE: If	submitting more than 5 Solutions co			lultiple Site/Solution Workshe		lineapp.com	
Line	Solution Code	Baseline Usage	Installed Usage	Savings	Incentive Rate	Project Cost	Incentive Amount
-	0000	kWh	kWh	kWh	Tuto	0001	
1		kW	kW	kW			
		Thm	Thm	Thm			
		kWh	kWh	kWh			
2		kW	kW	kW			
		Thm	Thm	Thm			
		kWh	kWh	kWh	1		E-maga-
3		kW	kW	kW			- Constant
		Thm	Thm	Thm			
		kWh	kWh	kWh			
4		kW	kW	kW			
		Thm	Thm	Thm			
		kWh	kWh	kWh	Ì		
5		kW	kW	kW			
		Thm	Thm .	Thm	ŧ.		
Total	Energy Savings (kWh):			Total On-Peak Reducti	on (kW):		
	Total Project Cost (\$):			Calculated Savings In	centive:		
NOTE: F	or projects requiring M&V, attach any	v required baseline or post-inst	allation measurements and a	-		lan.	
	on 5 - Payment Infor						
	of Payment:	(000 time b	si to apadio i ayiiion	i mormador ir amere	m nom pag	.,	
		eck to Customer, Check to TradePro or C	heck to Third Party)				
Payee-Ci	stomer/ Business Name		Attention to (only if	required to be printed on the check)		Title	
Company	/Business Mailing Address		City			State	Zip Code
Contact	hone Number	Combant E	Mail Address				
	entification Type:	Gujitati E-	Wall Address				
	Fede	eral Tax ID/Employer ID Number (EIN) So	ocial Security Number (SSN)	Identification Number		Т	ax Status
	Exempt Reas	on					
D. Utility	Bill Credit: 3-	Service Account Nu	mher	2-	0	ustomer Account Number	
Section	on 6 - To be complete			commissioning (
	e following supporting documer						
	Verification data as evidence of in						
	Updated savings calculations, wh	ere applicable.					
	Copies of invoices for implementa		•			_	
	RCx Training Completion Form, in			endees, and measure persis	tence strategie	!S.	
	Cx Program Guidelines for mon on 7 - To be complete			VAC Rehate:		-	
	Permit (if required). If a permit and				ided the nermi	t number and/or oc	rmit docure
	entation. (If no permit is required		•	Agency		thambor and bright	
2. Contrac	tor Certification. If a Contractor or	Trade Professional was used	d for any HVAC installation/	replacement, this section mu	ist be complete	ed by the contracto	r.
□Вус	hecking this box, I certify I am a lice	ensed contractor and have for	llowed applicable permitting	g requirements and, if requir	ed, that the HV	'AC permit informa	ion above is correct.
	Signature of Contractor			lame (please print)			Date
	on 8 - Installation/Op	eration Statemen	t and Signature:				
Спеск ар	propriate boxes: No changes to the proposed solutions are approved savings calculations are		he Project Application Revi	ew and Approval, and the Co	ustomer or Trad	de Professional ve	ifies that the Application
	Due to changes to the proposed resection, and Sections 4 on page 2	2, to calculate the revised ins	talled energy usage, energy	savings, peak demand red	uction, and ince	entives. Attach the	appropriate calculation
	backup: the output from the Estim omer or Trade Professional below d to perform in conformity with thei	, certify that (i) the Energy Eff	iciency Solutions have beer	n completely installed, function	onally tested ar	nd proven capable	of operating and being
	The installation date of operation of	•					
	Signature		Name (please print)		Tř	tle	Date

Page 2



Commerce, City of

Aquatic Center & Rosewood Park 2535 Commerce Way Commerce, CA, 90040 3-000-0105-13

Customer Contact: Title of Contact:

Customer Phone: EcoGreen Sales Rep:

0.13 KWh Approx Building Size 60,916 SF Energy Rate



		1		EXISTING				Suggested R	Suggested Replacements & Savings	vings		
Existing Bulb	Watts/Fix	Fixture		Operating Hours-Day / Yr	Location	Replacement Bulb	Watts/Fix	# of Fixtures	Watts/bulbs Saved	Usage	KWh	Annual Savings
F841LL	219 w	г	11 7	/ 4100	POOL PUMP ROOM	LED 8' Linear Fixture	32 W	г	187 w	85.4%	191	\$97.
F42ILL	29 W	6	11 7	/ 4100	POOL PUMP ROOM	LED 4' Linear Fixture	16.23 w	6	384.93 w	72.5%	1,578	\$201
F41ILL-A	32 W		11 7	/ 4100	WOMEN'S ROOM (Vapor proof)	LED 4' Linear Fixture	16.23 w	Ц	15.77 w	49.3%	99	SS.
FZZILL	» o	9 6		4100	WOMEN'S ROOM LOCKER AREA	Skip	Skip w		Skip w			
FZIIIL	30	9		4100	WOMEN'S ROOM LOCKER AREA	Skip	Skip w	Skip	Skip w			
TUZZ	3 3	9 0		4100	WOMEN'S ROOM CHANGING AREA	Skip	Skip w	1	Skip w			
E41111-A	3 0	-	1 1	4100	WOMEN'S ROOM CHANGING AREA	SKIP	Skip w	Skip	Skip w	1	ļ	
F4181-A	32 m		1 =	4100	WOMEN'S BOOM TO LET STALLS (VADOR) BROOK	LED 41 House Electric	16.23 W	1	W 95.50L	47.5%	424	554.
E4181-A			1 =	4100		LED 4 Linear Fixture	16.23 W	1	94.52 W	49.3%	3888	549.4
F4111-A	32 %	, u	1 :	4100		date date	a dixe	1	w days			
E4181.4	32 23	,	1 :	7,00		LED 4 LINEAR FIXURE	16.23 W	1	94.62 W	49.3%	388	\$49.4
E4101-A	32 W	1,	1 :	4100	WOMEN'S NOOM SHOWER AREA (VAPOR PROOF)	LED 4. Linear Fixture	16.23 W		31.54 w	49.3%	129	\$16.
E4111-A	30 m	1	1 5	4100	WOMEN'S ROOM STIBBLY CLOSET WARDS BROOK	LED 4 LINEAR FIXTURE	16.23 W		31.54 W	49.3%	129	\$16.4
F4111-A	32 W	1	1 :	4100	MOMEN'S ROOM SUPPLY CLOSE! (VAPOR-PROOF)	LEU 4' Linear Fixture	16.23 w		15.77 w	49.3%	8	85.
54111.A	32 25	1/2	1 5	4100	WOINEN'S NOOM STORED DESK (VAPOR PROOF)	LCD 4 Linear HXCure	16.23 W	2	31.54 w	49.3%	129	\$16.
CE 13526/2	3 2			4100		LCD 4 Linear Flixture	16.23 W	1	110.39 W	49.3%	453	\$57.
CTLISEZO/Z	A			4700		SKIP	Skip w	Skip	Skip w			
F411LFA	32 W	4	1	4100		LED 4' Linear Flxture	16.23 w	4	15.77 w	49.3%	88	\$8.
FZZILL	3		\ = 	4100	MEN'S ROOM LOCKER AREA	Skip	Skip w	╛	Skip w			
LABEL	3 0		1	7	MIEN S NOUM LOCKER AREA	SKIP	Skip w	skip	Skip w			
FZZILL	* 0	9	, , = :	4100	MEN'S ROOM CHANGING AREA	Skip	Skip w	1	Skip w			
FAILE EATH A	20 6	-	1 :	4100	MEN'S ROOM CHANGING AREA	SKIP	Skip w	1	Skip w			
CA1111-A	30 m		1	7,00	MENS NOON TALLWAY	LED 4 Linear Fixune	16.23 W	1	110.39 W	49.3%	453	\$57.
A THE CASE A	35 c	•	1 :	7	MEN 3 NOOM TOLIET STALLS (MAYOR- PROOF)	LED 4 Linear Pixture	16.23 W	1	94.62 W	49.3%	388	\$49.4
CATHLA	3 00	9 4	1 :	4100	MEN'S KOOM TOLIET STALLS (VAPOR-PROUP)	SKIP	SKip w	1	Skip w			
F41111-A	20 60	,	1 5	4100	MEN'S BOOM SHOWER AREA (VADOR DEODE)	LED 4 Linear Electric	16.23 W	1	94.b2 W	45.5%	388	\$49.4
F411L-A	32 W	1 ~	1 =	4100	MEN'S BOOM HALL TO BOOL (VAPOR-PROOF)	IED 4 Linear fixture	16.23 W	7	31.54 W	49.5%	129	\$16.
F411L-A	90	0	11 7	/ 4100	MEN'S ROOM SUPPLY CLOSET (VAPOR-PRODE)	Skin	Skin w	ľ	Skin w	20.07	777	'OTC
F411LL-A	w o	0	11 7	/ 4100	MEN'S ROOM STORAGE DESK (VAPOR-PROOF)	Skip	Skip w		Skip w			
F411LL-A	32 W	7	11 7	/ 4100	MEN'S ROOM STAFF LOCKER (VAPOR-PROOF)	LED 4' Linear Fixture	16.23 W	L	110.39 w	49.3%	453	\$57
CFL13E26/2	w 0	0	11 7	/ 4100	MEN'S ROOM STAFF LOCKER (VAPOR-PROOF)	Skip	Skip w	L	Skip w			
MH400/1	0 W	0	11 7	/ 4100	POOL DECK	Skip	Skip w	Skip	Skip w			
MH1000/1	w 0	٥	11 7	/ 4100	POOL DECK	Skip	Skip w	L	Skip w			
CFL13E26/2	w 0	0	11 7	/ 4100	POOL DECK	Skip	Skip w		Skip w			
F42ILL	29 W	4	11 7	/ 4100	STORAGE ROOM	LED 4' Linear Fixture	16.23 w		171.08 w	72.5%	701	\$88
F43ILL-A	% 0	٥	11 7	/ 4100	COACH'S OFFICE	Skip	Skip w		Skip w			
CFL13E26/2	* 0	٥	11 7	/ 4100	STAFF OFFICE	Skip	Skip w		Skip w			
F43ILL-A	* 0	٥	- 1	/ 4100	STAFF LOUNGE	Skip	Skip w	Skip	Skip w			
F43ILL-A	» o	۰	11 7	/ 4100	ASST. SUPER	Skip	Skip w		Skip w			
F431LL-A	A O	۰,	1	4100	HALL 1	Skip	Skip w		Skip w			
CFL13E20/2	A			4100	HALL 2	Skip	Skip w		Skip w			
Cristal A	300	9	1	4100	HALL3	Skip	Skip w		Skip w			
C) C	3 0	9	1 :	4100	HALL 4	Skip	Skip w	Skip	Skip w			
CEI 40E26/1	3		п.	4100	DEV ADD C CANC. ADM DI MAN MAN MINDEDSIDE DI CANTON CON	Skip	Skip w		Skip w			
CFL13E26/2	30	-	11 7	4100	TO ACC 3 CANA TENT I CANADA CA	Skip	Skip w	d strip	w dix			
HPS35/1	3,0	0	11 7	/ 4100	LOBBY 21 ARE 1 FD'S (HLRAY DOWN IGHTS)	A city	A divo		w quac			
F42II.	M 0	0	11 7	/ 4100	LOBBY LF UPLIGHTS	d disk	Skip w	ļ	w dinc			
F411LL-A	30	0	11 7	/ 4100	ND FLOOR LOBBY-OPEN TO BELOW (WELL-MOUNDED LF UPLIGHT	Skio	Skip w	L	Skin w			
F42ILL	W 65	16	11 7	/ 4100	WEIGHT ROOM	LED 4' Linear Fixture	16.23 w	L	684.32 W	72.5%	2.805	\$357
CFL13E26/2	MΩ	0	11 7	/ 4100	SPIN ROOM	Skip	Skip w	Ů	Skip w			
F42ILL	W 65	16	11 7	/ 4100	CARDIO ROOM	LEO 4' Linear Fixture	16.23 w	L	684.32 w	72.5%	2,805	\$357
CFL13E26/2	* 0	0	11 7	/ 4100	HALL TO POOL SEATING	Skip	Skip w		Skip w			
CFL13E26/2	M O	0	11 7	/ 4100	POOL SEATING	Skip	Skin w	L	***			
Contract of the contract of th							an district	Skip	Skip w			



Commerce, City of

Aquatic Center & Rosewood Park 2535 Commerce Way Commerce, CA, 90040

3-000-0105-13

EcoGreen Sales Rep: Customer Contact:

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Approx Building Size 60,916 SF Energy Rate 0.13 KWh



2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	×	# of	Op Hours 11 7 / 11 7 / 11 7 / 11 7 / 11 7 / 11 7 /	Operating Hours-Day/Yr 7 / 4100 7 / 4100 7 / 4100	Location HALLWAY TOWARDS KIDS AREA	Replacement Bulb	Watts/Fix	# of Fixtures	# of Watts/bulbs Us	Usage Saved 81.8%	KWh Saved	Annual Savings
				4100	HALLWAY TOWARDS KIDS AREA		66.34	TIXIUES 10	12	81.8%	2.983	
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			4100		IFD 4' Linear Eixture	10. 24 var			070.10	7.303	7 0000
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			4100	HALLWAY TOWARDS KIDS AREA	Skin	Skin w	1	Chin ur		mante	\$380.4
	3 3 2 w				HALLWAY TOWARDS KIDS AREA	Skip	Skip w	┖	Skip w			
	32 w 0 0 w 0 0 0 w 0 0 0 0 0 0 0 0 0 0 0			4100	ABOVE TO KITCHEN	Skip	Skip w	Skip	Skip w			
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		11 7 /	4100	MULTI-PURPOSE ROOM (ALCOVE WALL LIGHTS)	LED 4' Linear Fixture	16.23 w	L	189.24 w	49.3%	9//	\$98.9
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		111 7 /	4100	MPR	Skip	Skip w		Skip w			
	M M M M M M M M M M M M M M M M M M M			4100	MPR	Skip	Skip w	Skip	Skip w			
	M M M M M M M M M M M M M M M M M M M		11 7 /	4100	CANS LOOK TO BE LED ALREADY	Skip	Skip w		Skip w			
	M M M M M M M M M M M M M M M M M M M		11 7	4100	KITCHEN	Skip	Skip w		Skip w			
	32 w w 0 0 w w 0 0 0 0 0 0 0 0 0 0 0 0 0		11 7 /	4100	KITCHEN	Skip	Skip w		Skip w			
	33 w w w w w w w w w w w w w w w w w w		11 7 /	4100	KITCHEN	Skip	Skip w	Skip	Skip w			
	M M M M M M M M M M M M M M M M M M M		11 7 /	4100	CENTER SUPERVISOR OFFICE	Skip	Skip w		Skip w			
CFL13E26/2 F42ltL F42ltL F41lt-A	* * * * * * * * * * * * * * * * * * *		11 7 /	4100	GAME ROOM	LED 4' Linear Fixture	16.23 w		157.7 w	49.3%	647	\$82.4
F42ILL F42ILL F41IL-A	3 3 3 3 3 3 0 0 0 0 0		11 7 /	4100	GAME ROOM	Skip	Skip w		Skip w			
F42ILL F43ILL-A	3 3 3 3 3		11 7 /	4100	GAME ROOM	Skip	Skip w		Skip w			
F411L-A	3 3 3 3	\Box	11 7 /	4100	BREAK ROOM	Skip	Skip w		Skip w			
T44111 4	3 3 0	П	11 7 /	4100	BREAK ROOM	Skip	Skip w	L	Skip w			
F##ILL-A	* O		11 7 /	4100	STORAGE ROOM	Skip	Skip w	L	Skip w			
F43ILL-A		П	11 7 /	4100	HALLWAY BY SPORTS OFFICE	Skip	Skip w		Skip w			
CFL13E26/2	ě		11 7 /	4100	HALLWAY BY SPORTS OFFICE	Skip	Skip w	Ц	Skip w			
CFL13E26/2	* 0	T	- 1	4100	HALLWAY BY SPORTS OFFICE	Skip	Skip w		Skip w			
CFL13E26/2	3 0		11 7 /	4100	ALCOVE TO MPR	Skip	Skip w	Skip	Skip w			
F44ILL-A	3 0	T	11 7 /	4100	SNACK BAR	Skip	Skip w		Skip w			
F44iLL-A	* o	T	11 7	4100	SNACK BAR	Skip	Skip w	4	Skip w			
F441L-A	*	Т	, ,	4100	SNACK BAR	Skip	Skip w	1	Skip w			
F441LL-A	*		, ,	4100	OFFICE	Skip	Skip w	Skip	Skip w			
Crisezo/z	3 6	9	1 :	4100	WALK-IN PRIDGE	SKIP	w dixe		Skip w			
542111	3 3	Т	11 7 /	4100	SPORTS CIPEDAROP	dixe	Skip w	Skip	W dix			
CFL13E26/2	30	Т	11 7 /	4100	PRE-SCHOOL ROOM	Skin	Skin w		W Ckin w			
CFL13E26/2	w o	Т	11 7 /	4100	PRE-SCHOOL ROOM	Sklo	Skip w	Skin	Skip w			
CFL13E26/2	w O	Г	11 7 /	4100	PRE-SCHOOL ROOM	Sklo	Skip w		Skip w			
CFL13E26/2	w o		11 7 /	4100	PRE-SCHOOL ROOM	Skip	Skip w		Skip w			
F411LL-A	w o	0	11 7 /	4100	PRE-SCHOOL ROOM	Skip	Skip w	Skip	Skip w			
CFL13E26/2	w 0	0	11 7 /	4100	MEN'S ROOM	Skip	Skip w	L	Skip w			
F41ILL-A	w 0	0	11 7 /	4100	MEN'S ROOM	Skip	Skip w		Skip w			
F41HL-A	w 0	0	11 7 /	4100	TELEPHONE CLOSET	Skip	Skip w		Skip w			
CFL13E26/2	w o	0	11 7 /	4100	STORAGE CLOSET	Skip	Skip w		Skip w			
F42ILL	w o	П	11 7 /	4100	STORAGE CLOSET	Skip	Skip w		Skip w			
CFL13E26/2	M O	7	11 7 /	4100	WOMEN'S ROOM	Skip	Skip w	Skip	Skip w			
	M O	•	11 7 /	4100	WOMEN'S ROOM	Skip	Skip w	Skip	Skip w			
	29 W	7	11 7	4100	MECH/ELEC	LED 4' Unear Fixture	16.23 w		42.77 w	72.5%	175	\$22.3
F42HL	29 W	Т	11 7	4100	JANITOR	LED 4' Linear Fixture	16.23 w		42.77 w	72.5%	175	\$22.3
	30	Т	- 1	4100	ELEVATOR MECH.	Skip	Skip w		Skip w			
CFL13E26/2	M O	Т	11 7	4100	COMMERCE CENTER SUPER	Skip	Skip w	Skip	Skip w			
	% 0	T	11 7 /	4100	ELEVATOR	Skip	Skip w	Ц	Skip w			
	M O	T				Skip	Skip w	۳	w dbiS			
F4ZILL	29 W		11 7	4100	EXTERIOR OF POOL BUILDING	LED 4' Linear Fixture	16.23 w		342.16 w	72.5%	1,403	\$178.8
5	W 25	Т		4700	CATE MITH LADGE DAD BLIDE	LED Area Light	40 w	4	24 W	13.0%	86	\$12.5
	W 0.7	Т	- 1	4100	CALS WITH LARGE PAR BULBS	LED 6" Can Light	TS W	4	32 W	30.8%	131	\$16.7
	W 02	T	- 1	4100	UNDER AWNING BY SNACK BAR	LED A19	10 w	1	304 W	61.5%	1,246	\$158.9
CE113E26/3	M 70	ء ا	7 7	9450	Spring to defined delines	Skip	Skip w		Skip w			
	215 w	1	1	4100	DECO POST-TOP	LED A13	M OT	۲ ۲	W 08	61.5%	328	541.8
	795 w	Т		4100	2.48M PARKING LOT AL 2 ON SIDEMALK BY EIELD	I ED Doors Dies	A 04		1/30 W	01.476	1,1/4	\$914.9
	46 w	T	1	4100	C-ARIM PARKING LOT AL. 2 ON SIDEWALK BY FIELD GAZERO (IGHTS.) DER	LED Ketro Plate	W 08	ın o	1075 W	72.9%	4,407	\$562.0

ENERGY AUDIT

Commerce, City of

Aquatic Center & Rosewood Park Commerce, CA, 90040 2535 Commerce Way

3-000-0105-13

Customer Contact: EcoGreen Sales Rep:

Title of Contact: Customer Phone:

Customer Email:

Approx Building Size

0.13 KWh 60,916 SF **Energy Rate**



In Reference to Quote # 500785

\$11,861.05 \$121.50 \$1,087.08 \$48,319.57 \$237,932.85 \$4,026.63 \$23,016.04 \$36,549.60 \$12,792.30 \$110,336.4 26,279 **Annual Savings** 2,911 Energy Savings Per Year **Total Savings Over 5 Years *Loan Payment 20,416 1,845 Approximate Energy Savings Per Month **Total Savings After 10 Years **Estimated Energy Rebate** Btu Savings Per Month 2,767 3,403 17,014 4,366 877 804 947 905 1,919 1,845 631 378,888 IRS Tax Deduction 179D Available 1,804 1,804 12 5,654 ***Estimated Federal Tax Savings **Bulb Replacement Savings Per Year** Bulb Replacement Savings Per Avg. Est. Life of LED Saved KWh Usage Saved 76.9% 76.3% 76.3% 81.1% 70.4% 76.3% %6.97 76.3% 72.5% 81.1% 92418.86 w 64.5% 30.8% 90.7% 74.6% 78.8% 85.8% 76.3% 74.6% 72.5% 76.6% 74.6% Suggested Replacements & Savings 440 w 910 w 440 w 213.85 w 308 w 196 w 231 w 220 w 468 w w 652 1065 w Skip w 1065 W 213.85 w Skip w Skip w 1379.12 w Skip w Skip w Skip w Watts/bulbs Saved Fixtures ÿo # 396 Skip Skip Skip Skip Skip Skip Skip Skip w Skip w 110 w Skip w Skip w Skip w Skip w 25 W 17.61 w 18 w 30 W 18 W 75 W 16.23 w 75 W 16.23 W Watts/Fix LED 6" Can Downlight w/PLATE LED Flood LED Area Light-T07-WHITE LED Area Light-T07-WHITE Replacement Bulb LED 4' Linear Fixture LED 4' Linear Fixture LED Area Light \$220,222.02 LED Area Light LED 6" Can Light LED 6" Can Light LED 6" Can Light LED Wallpack LED Post Top LED Wallpack LED Post Top LED Flood Skip LED Flood LED Flood LED PAR38 LED Flood 4.56 Skip Skip Skip Skp "Main Field" lights
"Main Field" lights
1-ARM B-BALL LIGHTS
1-ARM B-BALL LIGHTS
1-ARM B-BALL LIGHT
1-ARM PARKING LOT
1-ARM PARKING LOT
1-ARM PARKING LOT Total Project Cost After Rebate ****Payback Period Yrs Average Estimated Life of LED Average Estimated Life of Existing Lighting LL MOUNTED FLOODS - BEHIND GLASS WALL (1 NOT BEHIND GLU RECESSED CANS BY FIELD RECESSED SQUARE CANS BY BACK ENTRANCE
BACK ENTRANCE FLOOD WALL PACKS BY SENIOR CENTER POLE MOUNTED AL * NEAR SENIOR CENTER RECESSED CANS BY COUNCIL ENTRANCE RECESSED CANS BY LIBRARY ENTRANCE CEILING MOUNTED FLOODS - 2 LAMPS SMT AL BY COUNCIL ENTRANCE WOMEN'S ROOM MEN'S ROOM POST TOP AL PARK LIGHTS Location CITY HALL POLE 2 POLE 2 POLE 1 POLE Total 3.66 Payback Period Yrs W/ Rebates & Yearly Bulb Replacement Savings 5.16 Payback Period Yrs - Out of Pocket - No Rebates/Program 4.29 Payback Period Yrs W/Rebates & Federal Tax Savings Potential Write-Off Amount 3.45 Payback Period Yrs Fully Comprehensive^ 4100 4100 4100 4100 4100 4100 4100 565756 Hours-Day / Yr 4100 4100 4100 4100 45.8 Avg Annual Res Powered by Savings Operating EXISTING Interest 64.5% Average Electrical Savings 282 Annual CO2 Savings (MT) 23.3% ROI During Payback Fixture 378,888 Annual KWh Saved Capital 92,419 Watts Saved Watts/Fix 0 w 465 w 295 w 0 w 465 w 295 w 66 w 295 w 295 w 95 w 128 w 59 W 190 w 95 w 128 w 95 w 295 w 95 w **Existing Bulb** HPS400/1 MH1000/1 CFL13E26/2 MH250/1 MH1000/1 HPS400/1 MH250/1 MH1000/1 MH1000/1 HPS400/1 MH250/1 MH150/1 MH70/1 MH100/1 MH70/1 MH250/1 CFQ25/2 MH250/1 MH250/1 MH70/1 MH250/1 MH100/1 MH1000/1 MH70/1 F42ILL F42ILL Totals

ENERGY AUDIT

Commerce, City of Aquatic Center & Rosewood Park

2535 Commerce Way

Commerce, CA, 90040

Customer Email:

Customer Contact: Title of Contact: EcoGreen Sales Rep:

Customer Phone:

Approx Building Size 60,916 SF Energy Rate 0.13 KWh



									The section of the se	1 2 1 2 1 2 1
3-000-0105-13		Customer Email:						In Rel	In Reference to Quote # 500785	500785
		EXISTING			S	uggested Re	Suggested Replacements & Savings	ings		
Existing Bulb	Watts/Fix # of		Location	Replacement Bulb W	Watts/Fix	# of	5	Usage	KWh	Annual Savings
	Fixture	Hours-Day / Yr		Ī	Ť	Fixtures	Saved	Saved	Saved	
Year 1	7,366	0	7,366			NOTE	Attached calculation	ns do not inc	dude depreciation	NOTE: Attached calculations do not include depreciation deduction for project cost.
Year 2	7,366	0	7,366	*Payment is based on a	based on a	4.07	year loan at	%0	int	interest OAC, actual my vary.
Year 3	7,366	0	7,366				** Reflects	s 6% per yea	Ir cost of energy	** Reflects 6% per year cost of energy increase + Bulb Replacement
Year 4	7,366	0	7,366					*** Based o	n IRS 179D Dedi	*** Based on IRS 179D Deduction @ 35% federal tax rate
Year 5	7,366	#NOM!	#NOM!				Payback Period Yrs =	(Total Proje	ct Cost - Rebate)	****Payback Period Yrs = {Total Project Cost - Rebate} / Estimated Savings per Year
Totals	\$36,831.08	#NOM!	#NUM	APayback Perio	d Yrs =(Total Proje	ct Cost - Rebate	- Tax Deduction - Tax Sav	dnes WEstimat	ed Savings Per Year	^parback Period Yrs =(Total Project Cost - Rebate - Tax Deduction - Tax Savines V/Estimated Savines Per Vear + Built Replacement Savines Der Ve



Quote# DATE 501059

1/30/2018



Commerce, City of Aquatic Center & Rosewood Park 2535 Commerce Way Commerce, CA, 90040

27611 La Paz Rd, Suite A2 Laguna Niguel, CA. 92677 info@ecogreen.cc (949) 364 - 6800

> Reservation # Program:

Account Number

Light EPN	INT/EXT	DESCRIPTION		QTY	Unit Price	Amount
EGLN-PH32-8ft-4000-UNV-SMT-D-X-X-X	ŧNT	LED 8' Linear Fixture	32 w	1	\$210.00	\$210.0
EGLN-PH16.23-4ft-4000-UNV-SMT-D-X-X-X	EXT	LED 4' Linear Fixture	16.23 w	8	\$130.00	\$1,040.0
EGLN-PH16.23-4ft-4000-UNV-SMT-D-X-X-X	INT	LED 4' Linear Fixture	16.23 w	154	\$130.00	\$20,020.0
EGAL-SA40-5000-UNV-BZ-X-Type 3-X-PH-X-X	EXT	LED Area Light	40 w	22	\$250.00	\$5,500.0
EGCL-ML18-6"-2700-UNV-WH-REC-REC-PLT-X:X-X-X-X	EXT	LED 6" Can Light	18 w	26	\$115.00	\$2,990.0
EGCL-ML18-6"-2700-UNV-WH-REC-REC-PLT-X:X-X-X-X	EXT	LED 6" Can Downlight w/PLATE	18 w	3	\$115.00	\$345.0
EGLA-TCA1910-2700-120v-X-X-X	EXT	LED A19	10 w	24	\$8.90	\$213.6
EGRP-SA80-5000-UNV-GY-X-X-X-X-X-X	EXT	LED Retro Plate	80 w	5	\$425.00	\$2,125.0
EGAL-SA70-5000-UNV-GY-X-Type 3-X-PH-X-X	EXT	LED Area Light	70 w	3	\$397.00	\$1,191.0
EGAL-SA110-5000-UNV-GY-X-Type 3-X-PH-X-X	EXT	LED Area Light	110 w	2	\$550.00	\$1,100.0
EGFL-SA110-5000-UNV-BZ-X-X-X-PH-X-X	EXT	LED Flood	110 w	6	\$550.00	\$3,300.0
EGFL-SA75-5000-UNV-BZ-X-X-X-PH-X-X	EXT	LED Flood	75 w	5	\$297.00	\$1,485.0
EGWP-CR25-5000-UNV-BZ-X-FL-D-PH-X-X	EXT	LED Wallpack	25 W	13	\$280.00	\$3,640.0
EGFL-ST20-4000-UNV-B2-X-X-X-X-X	EXT	LED Flood	17.61 w	8	\$145.00	\$1,160.0
EGPT-SA30-5000-X-X-X-X	EXT	LED Post Top	30 w	6	\$225.00	\$1,350.0
EGLA-TCP3814-3000-120v-X-X-X	EXT	LED PAR38	14 w	9	\$39.00	\$351.0
EGWP-CR42-5000-UNV-BZ-X-FL-D-PH-X-X	EXT	LED Walipack	42 w	3	\$295.00	\$885.0
EGAL-SA70-5000-UNV-WH-T07-Type 3-X-PH-X-X	EXT	LED Area Light-T07-WHITE	70 w	4	\$397.00	\$1,588.0
EGFL-SA320-5000-UNV-GY-X-X-PH-X-X	EXT	LED Flood	320 w	67	\$1,519.00	\$101,773.0
EGAL-SA160-4000-UNV-X-X-X-PH-X-X	EXT	LED Area Light	160 w	7	\$750.00	\$5,250.6
EGRP-SA80-5000-UNV-X-N39-X-X-X	EXT	LED Retro Plate	80 w	20	\$425.00	\$8,500.0
			w			
			w			
			w			
			w			
			w			
					SUBTOTAL	\$164,016.6
I quantities need to be verified by the customer					LABOR	\$47,025.0
					SALES TAX	\$13,121.3
sc. Charges:(Fasteners, Brackets, Mounts, Boom Rental, Scisor Lift, W	ire, J Boxes, Wire	Nuts, Disposal, Shipping & Handling, ETC.)				\$24,553.2
				TOTAL F	ROJECT COST	\$248,716.2
			TOTAL	SCE FUND	ING AMOUNT	\$217,498.8
			TOTA	L SCE REB	ATE AMOUNT	\$31,257.2
			TOTAL OF	IT OF BOC	KET AMOUNT	\$0.0



SEND TO: Southern California Edison, Business Incentives – OBF Program P.O. Box 800, Rosemead, CA 91770-0800 E-mail: BusinessIncentives@sce.com | Fax: 626-633-3243 Questions? (866) 635-6015

November 27, 2017

Customer Information:

Robert Lipton City of Commerce 2535 Commerce Way Commerce, CA 90040 Trade Professional Information

Corey Brophy Ecogreen Solutions 27611 La Paz Rd. Ste. A2 Laguna Niguel, CA 92677

RE: NOTICE OF ON-BILL FINANCING (OBF) APPLICATION APPROVAL AND FUNDING RESERVATION

PROJECT NUMBER: 318-17-0500992135 SA#: 3-000-0105-13

Dear Robert Lipton and Corey Brophy:

Your On-Bill Financing Application has been reviewed and approved, and funding for your On-Bill Financing (OBF) Loan has been reserved.

An OBF Loan Reservation for this project has been established in the amount of \$217,498.80 and is subject to the following terms and conditions.

Terms and Conditions of Loan Reservation:

- 1. The reserved amount has been calculated based on the results of the review and approval of your Energy Efficiency Project Application, and according to the provisions and methodology of the OBF Loan Term Calculation [LTC]. Since the loan reservation amount is based on an approved project proposal, it is an <u>estimate</u> of what the actual loan amount may be.
 - 1a. An OBF Loan Term Calculation [LTC] is attached.
- 2. The actual loan amount will be calculated based on the results of the review and approval of your Energy Efficiency Project Installation Report, and according to the provisions and methodology of the OBF Loan Term Calculation [LTC]. Therefore, the actual amount of the OBF Loan may differ from the reserved amount presented above.
 - 2a. The actual amount of the OBF loan may be less than the reserved amount presented above.
 - 2b. The actual amount of the OBF loan shall not exceed the reserved amount presented above.
- 3. The expiration of the loan reservation shall be consistent with that of the project incentive.

Next Steps:

- You submit the completed Installation Report [IR] to SCE, and SCE will review it. Installation Report
 must be submitted within 60-days of measure installation date or final invoice date, whichever is
 greater.
- Measures installed before Dec. 31, 2017 must be submitted for rebate no later than Mar 2, 2018.
 Example: If a measure is installed before Dec 31, 2017, Installation Report must be submitted by Mar 2, 2018. (Does not apply to Expired Measures)
- SCE will calculate the actual final loan amount, based on the results of the IR approval, and the LTC provisions.
- SCE will issue 2 copies of the OBF Loan Agreement to you.
- You will sign, and have notarized, the Agreements and return to SCE.
- SCE will counter-sign the Agreements.
- SCE will provide you with 1 copy of the fully-executed Loan Agreement and will process the loan proceeds.



SEND TO: Southern California Edison, Business Incentives – OBF Program P.O. Box 800, Rosemead, CA 91770-0800 E-mail: BusinessIncentives@sce.com | Fax: 626-633-3243

Questions? (866) 635-6015

If you have any questions, please contact your SCE Account Representative. You may also call us at (866) 635-6015 Monday through Friday, from 8:00 a.m. to 5:00 p.m., or send an e-mail to **BusinessIncentives@SCE.com**. Please have your Project Number available for reference when you call, or include it in your e-mail.

Sincerely,

Delia Williams

Program Manager - On Bill Financing Southern California Edison Company.

Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning SCE is the Federal Trade Commission, Equal Credit Opportunity, Washington DC 20580.

On-Bill Financing Program - Preliminary Loan Term Calculation (LTC1)

 Completion Date/Time:
 11/27/2017 1:18 PM

 Project Number:
 318-17-0500992135

 Service Account:
 3-000-0105-13

 Customer Number:
 1-0-000-1057

 Customer Account Number:
 2-00-437-0755

 OBF Application Receipt Date:
 9/7/2017

Project Type(s): Customized and Deemed

Market Segment: Government and Institutions

Business Name: COMMERCE, CITY OF

Reference Name: OBF -COMMERCE AQUATIC CENTER&ROSEWOOD

Address: 2535 COMMERCE WAY

COMMERCE, CA 90040

City, CA Zip:

**** LTC1 **

ACTUAL TERMS WILL BE CALCULATED BASED ON FINAL REVIEW AND VERIFICATION OF THE PROJECT INSTALLATION REPORT

LTC1 Reserved Amount is \$217,498.80
First month payment is \$1,812.49
119 subsequent monthly payments \$1,812.49

PROJECT ECONOMIC SUMMARY		EXPLANATION
A AVERAGE ELECTRIC BILLING RATE – past 12 months (Cents/kWh)	\$ 0.12753	Based on Billing History
B. ENERGY EFFICIENCY PROJECT SAVINGS		
B.1. Estimated Annual Kilowatt Hour Savings (kWh)	170,546.8	From Approved Project Application
B.2. Estimated Annual Dollar(\$) SavingsB.3. Estimated Monthly Dollar(\$) Savings	\$ 21,749.84 \$ 1,812.49	Estimated Annual kWh Savings x Average Rate \simeq \$ savings (B.1 x A) Estimated Monthly \$ Savings (B.2 / 12)
C. COSTS		
C.1. Estimated Total Project Cost	\$ 354,929.18	From Approved Project Application
C.2. Excess Project Cost	\$ -	Based on 20% Basic Lighting Cap Rule
C.3. Estimated Total Rebate/Incentive	\$ 31,257.29	From Approved Project Application
C.4. Other	\$ -	
C.5. Estimated Potential Loan Amount (Gross Amount)	\$ 323,671.89	(C.1) - (C.2) - (C.3) - (C.4)
C.6. LTC1 Reserved Amount	\$ 323,671.89	From LTC1 calculation following Approved Project Application
C.7. LTC2 Reserved Amount		
). LOAN		
D.1. Gross Amount for Potential Financing	\$ 250,000.00	Lesser of (C.5) or (E.1.2) or (E.2.3) or other rules apply
D.2. Monthly Loan Repayment Amount	\$1,812.49	(B.3)
D.3. Actual loan term (Months)	138	Time required to repay loan in months (subject to exception analysis below)
D.4. Actual loan term (Years)	11.5	Time required to repay loan in years: (D.3)/12
E. LOAN LIMIT TESTS		
E.1. Market Segment Amount of Loan Test (Min/Max Loan Amount)		
E.1.1. Market Segment Minimum Loan Amount	\$ 5,000	Minimum Loan Amount per Service Account or Bundle
E.1.2. Market Segment Maximum Loan Amount	\$ 250,000	Com, Ind, Ag = \$100,000, G&I, Multifamily = \$250,000
E.1.3. Within Market Segment Limit?	Υ 200,000	Is D.1 within loan amount limits Y/N?
		S D.1 Within loan amount little 1/14:
E.2. Customer Loan Limit Test (Previous Loans for this Service Account) E.2.1. Service Account Loan Amount Limit	\$ 250,000	(E.1.2) or \$1M for G&I Facility
		Total of previous OBF loans + reservations
E.2.2. Previous Loans Reserved for this Service Account		
E.2.3. Estimated Amount Eligible for Loans	\$ 250,000.00	(E.2.1) - (E.2.2), If < 0, then 0.
E.2.4. Within Available Amount?	Υ	Is D.1. ≤ E.2.3. Y/N?
E.3. Length of Loan Test	400	CIA = 60 months, G&I, Multifamily = 120 months
E.3.1. Loan Length Limit (months)	120	•
E.3.2. Within Loan Length Limit?	N	Is D.3 within limit Y/N?
E.4. Expected Useful Life (EUL)* Loan Length Limit Test	400	Fill is specificated and specification
E.4.1. Applicable Measure EUL (months)	120	EUL in months of measure with greatest kWh contribution
E.4.2. Within EUL Loan Length Limit?	Y	Is D.3 within limit Y/N?
E.5. EXCEPTION ANALYSIS (If any E.1 thru E.4. yields a "No")		Exception Analysis Loan Minimum Requirement Test
		Does the loan amount from Exception Analysis meet the \$5K loan minimum requirement? YES
E.5.1. First Payment Amount	\$ 1,812.49	- Part & Mar Palic Marian Mariana
E.5.2. Subsequent Monthly Loan Repayment Amount	\$ 1,812.49	Based on minimum loan requirement of \$5K and supplement
E.5.3. Subsequent Monthly Payments	119	Exception Analysis, this amount qualifies for an estimated OF
E.5.4. Net Amount for Financing	\$ 217,498.80	loan.



SEND TO: Southern California Edison, Business Incentives – OBF Program P.O. Box 800, Rosemead, CA 91770-0800 E-mail: BusinessIncentives@sce.com | Fax: 626-633-3243 Questions? (866) 635-6015

January 18, 2018

Customer Information:

Robert Lipton City Of Commerce 2535 Commerce Way Commerce, CA 90040 Trade Professional Information

Corey Brophy Ecogreen Solutions 27611 La Paz Rd Ste A2 Laguna Niguel, CA 92677-3999

RE: NOTICE OF ON-BILL FINANCING (OBF) APPLICATION APPROVAL AND REVISED FUNDING RESERVATION PROJECT NUMBER: 318-17-0500990897 SA#: 3-000-0106-53

Dear Robert Lipton and Corey Brophy:

Your On-Bill Financing Application has been reviewed and approved, and funding for your On-Bill Financing (OBF) Loan has been reserved. This Loan Reservation overrides any partial Loan Reservations previously received.

An OBF Loan Reservation for this project has been established in the amount of \$301,358.40 and is subject to the following terms and conditions.

Terms and Conditions of Loan Reservation:

- 1. The reserved amount has been calculated based on the results of the review and approval of your Energy Efficiency Project Application, and according to the provisions and methodology of the OBF Loan Term Calculation [LTC]. Since the loan reservation amount is based on an approved project proposal, it is an <u>estimate</u> of what the actual loan amount may be.
 - 1a. An OBF Loan Term Calculation [LTC] is attached.
- 2. The actual loan amount will be calculated based on the results of the review and approval of your Energy Efficiency Project Installation Report, and according to the provisions and methodology of the OBF Loan Term Calculation [LTC]. Therefore, the actual amount of the OBF Loan may differ from the reserved amount presented above.
 - 2a. The actual amount of the OBF loan may be less than the reserved amount presented above.
 - 2b. The actual amount of the OBF loan shall not exceed the reserved amount presented above.
- 3. The expiration of the loan reservation shall be consistent with that of the project incentive.

Next Steps:

- You submit the completed Installation Report [IR] to SCE, and SCE will review it. Installation Report
 must be submitted within 60-days of measure installation date or final invoice date, whichever is
 greater.
- Measures installed before Dec. 31, 2017 must be submitted for rebate no later than Mar 2, 2018.
 Example: If a measure is installed before Dec 31, 2017, Installation Report must be submitted by Mar 2, 2018. (Does not apply to Expired Measures)
- SCE will calculate the actual final loan amount, based on the results of the IR approval, and the LTC provisions.
- SCE will issue 2 copies of the OBF Loan Agreement to you.
- You will sign, and have notarized, the Agreements and return to SCE.
- SCE will counter-sign the Agreements.
- SCE will provide you with 1 copy of the fully-executed Loan Agreement and will process the loan proceeds.



SEND TO: Southern California Edison, Business Incentives - OBF Program P.O. Box 800, Rosemead, CA 91770-0800 E-mail: BusinessIncentives@sce.com | Fax: 626-633-3243 Questions? (866) 635-6015

If you have any questions, please contact your SCE Account Representative. You may also call us at (866) 635-6015 Monday through Friday, from 8:00 a.m. to 5:00 p.m., or send an e-mail to **BusinessIncentives@SCE.com**. Please have your Project Number available for reference when you call, or include it in your e-mail.

Sincerely,

Delia Williams

Program Manager - On Bill Financing Southern California Edison Company.

Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning SCE is the Federal Trade Commission, Equal Credit Opportunity, Washington DC 20580.

On-Bill Financing Program - Preliminary Loan Term Calculation (LTC1)

 Completion Date/Time:
 1/18/2018 2:52 PM

 Project Number:
 318-17-0500990897

 Service Account:
 3-000-0106-53

 Customer Number:
 1-0-000-1057

 Customer Account Number:
 2-00-437-0755

 OBF Application Receipt Date:
 9/7/2017

Project Type(s):

Market Segment:
Business Name:

Reference Name:

Customized and Deemed

Government and Institutions

COMMERCE, CITY OF

CITY OF COMMERCE -VETERANS MEMORIAL PARK

Address: 6364 ZINDELL AVE
City, CA Zip: COMMERCE, CA 90040

*** LTC1 **

ACTUAL TERMS WILL BE CALCULATED BASED ON FINAL REVIEW AND VERIFICATION OF THE PROJECT INSTALLATION REPORT

LTC1 Reserved Amount is \$301,358.40
First month payment is \$2,511.32
119 subsequent monthly payments \$2,511.32

PROJECT ECONOMIC SUMMARY		EXPLANATION
A. AVERAGE ELECTRIC BILLING RATE – past 12 months (Cents/kWh)	\$ 0.16239	Based on Billing History
B. ENERGY EFFICIENCY PROJECT SAVINGS		
B.1. Estimated Annual Kilowatt Hour Savings (kWh)	185,577.0	From Approved Project Application
B.2. Estimated Annual Dollar(\$) Savings B.3. Estimated Monthly Dollar(\$) Savings	\$ 30,135.86 \$ 2,511.32	Estimated Annual kWh Savings x Average Rate = \$ savings (B.1 x A) Estimated Monthly \$ Savings (B.2 / 12)
c. costs		
C.1. Estimated Total Project Cost C.2. Excess Project Cost	\$ 475,782.00 \$ -	From Approved Project Application Based on 20% Basic Lighting Cap Rule
C.3. Estimated Total Rebate/Incentive	\$ 23,340.18	From Approved Project Application
C.4. Other	\$	
C.5. Estimated Potential Loan Amount (Gross Amount)	\$ 452,441.82	(C.1) - (C.2) - (C.3) - (C.4)
C.6. LTC1 Reserved Amount C.7. LTC2 Reserved Amount	\$ 452,441.82	From LTC1 calculation following Approved Project Application
D. LOAN		
D.1. Gross Amount for Potential Financing	\$ 452,441.82	Lesser of (C.5) or (E.1.2) or (E.2.3) or other rules apply
D.2. Monthly Loan Repayment Amount	\$2,511.32 181	(B.3) Time required to repay loan in months (subject to
D.3. Actual loan term (Months)	101	exception analysis below)
D.4. Actual loan term (Years)	15.1	Time required to repay loan in years: (D.3) /12
E. <u>LOAN LIMIT TESTS</u>		
E.1. Market Segment Amount of Loan Test (Min/Max Loan Amount)		
E.1.1. Market Segment Minimum Loan Amount	\$ 5,000	Minimum Loan Amount per Service Account or Bundle
E.1.2. Market Segment Maximum Loan Amount	Facility	Com, Ind, Ag = \$100,000, G&I, Multifamily = \$250,000
E.1.3. Within Market Segment Limit?	Y	Is D.1 within loan amount limits Y/N?
E.2. Customer Loan Limit Test (Previous Loans for this Service Account)		
E.2.1. Service Account Loan Amount Limit	\$ 1,000,000	(E.1.2) or \$1M for G&I Facility
E.2.2. Previous Loans Reserved for this Service Account	\$ -	Total of previous OBF loans + reservations
E.2.3. Estimated Amount Eligible for Loans	\$ 1,000,000.00	(E.2.1) - (E.2.2), If < 0, then 0.
E.2.4. Within Available Amount?	Y	Is D.1. ≤ E.2.3. Y/N?
E.3. Length of Loan Test		
E.3.1. Loan Length Limit (months)	120	CIA = 60 months, G&I, Multifamily = 120 months
E.3.2. Within Loan Length Limit?	N	Is D.3 within limit Y/N?
E.4. Expected Useful Life (EUL)* Loan Length Limit Test		
E.4.1. Applicable Measure EUL (months)	120	EUL in months of measure with greatest kWh contribution
E.4.2. Within EUL Loan Length Limit?	ΥΥ	Is D.3 within limit Y/N?
E.5. EXCEPTION ANALYSIS (If any E.1 thru E.4. yields a "No")		Exception Analysis Loan Minimum Requirement Test
		Does the loan amount from Exception Analysis meet the \$5K loan minimum requirement? YES
E.5.1. First Payment Amount	\$ 2,511.32	
E.5.2. Subsequent Monthly Loan Repayment Amount	\$ 2,511.32	Based on minimum loan requirement of \$5K and supplement
E.5.3. Subsequent Monthly Payments E.5.4. Net Amount for Financing	\$ 301,358.40	Exception Analysis, this amount qualifies for an estimated Ol loan.
*Expected Useful Life (EUL): Each measure is expected to perform satisfactorily for a period of time. An EUL for		ME CAPACITAN ACCURATION



SEND TO: Southern California Edison, Business Incentives
P.O. Box 800, Rosemead, CA 91770-0800

E-mail: BusinessIncentives@sce.com | Fax: 626-633-3243

February 2, 2018

Project Number: 318-17-0500990897

Project: Customized Solutions Approach

Customer Ref.: City of Commerce-Veterans Memorial Park

<u>Trade Professional Information:</u> <u>Customer Information:</u>

Corey Brophy Robert Lipton
EcoGreen Solutions City of Commerce
27611 La Paz Rd, Suite A2 2535 Commerce Way
Laguna Niguel, CA 92677 Commerce, CA 90040

RE: NOTICE OF CUSTOMIZED SOLUTIONS CONTRACT AND INCENTIVE APPROVAL

SA # 3-000-0106-53

Dear Corey Brophy & Robert Lipton:

Thank you for submitting your Energy Management Solutions Incentive Application ("Application") for the Customized Solutions Program ("Program"). Your Application for incentives for the Project(s) described in your application has been reviewed and approved. Funds reserved are based on SCE approved savings estimate set forth below; however, the actual incentive payments will be made based on verified and actual savings' amounts:

SCE Final Approved Sa	avings and Inc	entive Estir	mate	Tw.	The second
SOLUTIONS DESCRIPTION	Code	kWh	kW	100	Incentive Amount
Exterior LED Fixture mounted	LT-19132	14,710.1	0.00	\$	1,176.81
Exterior LED Fixture mounted above 40 ft.	LT-19133	52,416.0	0.00	\$	4,193.28
				-	
Total Approved Savings/Incentive Estimates		67,126.1	0.00	\$	5,370.09
Project Cost Adjustment	11.64				
Total Estimated Incentive				\$	5,370.09
10% Measurement and Verification	Adder (if applicat	ole)			

If you do not concur with the energy savings and incentive amounts shown above, you have 30 days from the date of this letter to notify SCE, so that we can attempt to resolve your concern(s). If you do not notify us of any concerns within 30 days of this letter, the savings/incentive estimates set forth above will be deemed correct. If you agree with the estimates, you may proceed to purchase and install the above solution code(s) at any time. This Project Approval incorporates by reference the Application, including the Applicant Agreement regarding Program Terms and Conditions.

After your project is <u>completely installed</u>, operational, and meets all requirements of the Program, which is described in detail in the Customized Statewide Procedures Manual for Business and at www.sce.com/customized solutions:

- Complete, sign and submit the enclosed Customized Solutions Installation Report.
- Submit final invoices and/or documentation to support project cost, clearly detailing all costs associated with the project (equipment, labor, tax, etc.).
- Submit complete engineering calculations to demonstrate energy savings and documentation, if applicable (including archival diskette, CD, etc.).
- Submit schematic drawings and/or manufacturer specification sheets, if applicable.
- Operating Report, if measurement and verification is required.
- Submit Pump Curve (if applicable)
- Submit Permit Closure for HVAC measures (if applicable)

NOTE:

As a reminder, the deadline for the project to be completely installed and operational is one year from the date of this Project Approval letter. Please submit the completed Installation Report within 30 days after installation and prior to the one year deadline.

Upon SCE review and approval of your completed Installation Report and supporting cost documentation, you will be notified in writing. Thereafter, SCE will process the incentive check or SCE utility bill credit, as applicable. If SCE is unable to approve your incentives based on the information provided, SCE may require you to submit other documents related to the Project, Project site, solutions, energy savings, or any other documents it requires, in its sole discretion, to make a decision on your Application.

If you have any questions, please contact your SCE Account Representative. You may also call us at (626) 635-6015 Monday through Friday, from 8:00 a.m. to 5:00 p.m., or send an e-mail to BusinessIncentives@sce.com. Please have your project number available for reference when you call and include it in any e-mail correspondence.

Business Incentives Team Southern California Edison

WT2#/UPN/Service Contract ID	318-17-0500990897
Review Completion Date	12/04/17
Technical Review Engineer	Doron Fishman
Consulting Firm	PL Energy

Approval		1	2
Approval	Status	Declined	Approved as submitted
	Additional Comments	During the pre-installation site inspection, the inspector reported that the existing fixtures had been removed and construction had commenced at the site. See photos in the inspection tab. The reviewer removed the interior fixture savings from this application as existing equipment must be in	The existing exterior fixtures in this application are
	Cubanitand	operation to be eligible for incentive.	mounted 7 feet and 8 feet above grade.
	Submitted	LT-17492 Interior LED fixture replacement (utilizing approved	LT-19132
Solution Code	Description	luminaries) LT-17492	LT-19132
	Approved	Interior LED fixture replacement (utilizing approved	11-19132
	Description	luminaries)	12.00
EUL	Submitted Approved	12.00	12.00
202	Source		82.00
	Submitted	N/A	N/A
RUL.	Approved	N/A	N/A
	Source	N/A	N/A
	Submitted	ROB	ROB
Install Type	Approved		ROB
	Assessment		Approved as submitted
Destruct Describes Western Laws	Submitted	T8 Fixtures	HPS and incandescent Fixtures
Project Baseline Technology	Approved	N/A	HPS and Incandescent Fixtures
Desired Manager Tacks along	Submitted	LED fixtures	LED fixtures
Project Measure Technology	Approved	N/A	LED fixtures
	Approved	Easy Lighting Calculator V3.0	Easy Lighting Calculator V3.0
Calculation Methodology	Additional Comments		
	1st Period kWh Savings		14,710.1
Project Savings	1st Period kW Savings 2nd Period kWh Savings 2nd Period kW Savings		
	1st Period kW Savings 2nd Period kWh Savings 2nd Period kW Savings 1st Period		
Project Savings	1st Period kW Savings 2nd Period kWh Savings 2nd Period kW Savings 1st Period 2nd Period		
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WT2#/UPN/Service Contract ID	318-17-0500990897
Review Completion Date	12/04/17
Technical Review Engineer	Doron Fishman
Consulting Firm	PL Energy

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Solution Code Description	Approval	Additional Comments		inspector reported that the existing fixtures had bee removed and construction had commenced at the site. See photos in the inspection tab. The reviewer removed the interior fixture savings from this application as existing equipment must be in
Solution Code Approved IT-19183 Description Approved IT-19183 Description FUL Approved 0.00 Approved 0.00 Submitted N/A N/A N/A RUL Approved N/A N/A N/A Source N/A N/A N/A Source N/A N/A N/A Source N/A N/A Source N/A N/A Approved Approved Broblem Ross Approved IR-1918 Approved N/A N/A Source N/A N/A Project Baseline Technology Approved as submitted Froject Measure Technology Approved IP Source ID Fotures ID Fotures Approved ID Fotures ID Fotures Approved ID Fotures ID Fotures Cateforized Approved ID Fotures Changes made Changes made Additional Comments Additional Comments Additional Comments Project Savings Tat Period kWh Savings 2000000000000000000000000000000000000		Submitted		
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Is the Submitted M&V Plan Approved ? Not Required	Project Cost Basis Is Onsite Generation Preser Load Shifting employed a	1st Period 2nd Period Approved 1st Baseline Approved 2nd Baseline Cost Documentation [IMC] Early Retirement Cost [ERC] nt at this customer site?	\$ - Cost Estimate Reference Cost Estimate Reference \$ There is no onsite generation at the facility that may impact the proposed measure savings. No load shifting strategies are in place that impact the demand reduction savings. The customer site is not enrolled in any SCE Demand	\$



Energy Management Solutions Incentives Application for Business Customers

Customized Installation Report

UPN#: 318-17-0500990897

SA#: 3-000-0106-53

Customer Ref.:

City of Commerce-Veterans Memorial I

Customer Name:

City of Commerce

Trade Professional:

EcoGreen Solutions

INSTRUCTIONS:

After your project is installed and operational, input the project installation commencement and completion dates in the fields provided in Section 3. Review the information from your Application Approval Letter. If nothing has changed, and the information in Customized Solutions and Energy Savings is correct, complete and sign Section 8 on page 2 of this Installation Report (IR) Form. If any information differs from Section 1 of this page or your Application Approval Letter, use Section 4 on page 2 of this IR Form to indicate the change. Then, mark the appropriate check box in section 8 on page 2 of this IR Form. If any Payment Information differs from Section 2 on page 1 of this IR Form, complete Section 5 on page 2. Review Sections 6 and 7 on page 2 of this IR Form and complete if applicable. Sign and return both pages to SCE at one of the addresses below.

Business Incentives Southern California Edison P.O. Box 800

Rosemead, CA 91770-0800

E-mail: BusinessIncentives@sce.com

Fax: (626) 633-3243

Questions: Contact your Account Manager

or call (626) 635-6015

Section 1 - Customized Solutions, Energy Savings & On-Peak Demand Reduction Estimate:

NOTE: If submitting more than 5 Solutions complete and attach the Customized Solution page from the Multiple Site/Solution Worksheet at www.sceonlineapp.com

Line#	Solution Code	Baseline Usage		installed Usage		Approved Savings		centive Rate		Project Cost	Incer	ntive Amount
4	LT 40420	16,090.20	kWh	1,380.10	kWh	14710.1	kWh	\$ 0.08	•	0.002 E0		4 470 0
1	LT-19132		kW		kW	0.00	kW	\$ -	\$	9,883.50	2	1,176.81
	LT 40422	70,324.80	kWh	17,908.80	kWh	52,416.00	kWh	\$ 0.08	•	475 000 00	•	4 402 0
2	LT-19133		kW		kW	0.00	kW	\$	\$	175,980.00	\$	4,193.2
3			kWh		kWh		kWh					
3			kW		kW		kW					
. 1			kWh		kWh		kWh					
4			kW		kW		kW					
			kWh		kWh		kWh					
5			kW		kW		kW					

Total Approved Energy Savings (kWh):

67126.10

Total Approved
On-Peak Reduction (kW):

0.00

Total Project Cost (\$):

A. Form of Payment:

\$185,863.50

Calculated Savings Incentive:
* Includes Project Cost Adjustment (If Applicable)

\$5,370.09

NOTE; For projects requiring M&V, attach any required baseline or post-installation measurements and analysis, as specified in your approved M&V plan.

Section 2 - Payment Information: (As indicated on the Application)

B. Payee Information: (Check to Custome

Incentive Check to third party

EcoGreen Solutions

(Check to Customer, Check to TradePro or Check to Third Party)

Corey Brophy

Payee-Customer/ Business Name 27611 La Paz Rd, Suite A2

Attention to (only if required to be printed on the check)

Laguna Niguel

CA

92677

Company/Business Mailing Address

City

olate

Zip Code

949-364-6800 Contact Phone Number

Contact E-Mail Address

submissions@ecogreen-solutions.net

C. Tax Identification Type:

Federal Tax ID

Federal Tax ID/Employer ID Number (EINI/ Social Security Number (SSN

800196823 Identification Number Corporation

Exempt Reason

Service Account Numbe

Section 3 - Installation Dates:

Complete both dates:

D. Utility Bill Credit:

Installation Commencement Date:

Installation Completion Date:

Section	on 4 - Customized S	Solutions, Energy S	avings & On-Pea	k Demand Red	uction:	(If different tha	n page 1)			
	submitting more than 5 Solutions co									
Line #	Solution Code	Baseline Usage	Installed Usage	Savings	Incentive Rate	Project Cost	Incentive Amount			
1		kWh	kWh	å kWh						
		kW	kW	kW						
2		kWh	kWh	kWh						
		kW	kW	kW						
3		kWh	kWh	kWh						
		kW	kW	kW						
4		kWh	kWh kW	kWh						
		kWh	kWh	kWh	1					
5		kW	kW	kW	-					
Total	Energy Savings (kWh):			Total On-Peak Reducti	/k/M)·					
IVun										
NOTE: E	Total Project Cost (\$):		-ti measurements and anal	Calculated Savings In		.l				
	or projects requiring M&V, attach and non 5 - Payment Infor									
		mation. (Use this 50)	к to update Раутен п	nformation il dinere	nt ironi pay	e 1)				
	of Payment:	heck to Customer, Check to TradePro or Che	ck to Third Party)							
B. rayec	Information:									
Payee-Cu	stomer/ Business Name		Attention to (only if requ	ired to be printed on the check)		Title				
Company	/Business Mailing Address		City			State	Zip Code			
							7			
	hone Number entification Type:	Contact E-Ma	il Address							
VI 1	• • • • • • • • • • • • • • • • • • • •	leral Tax ID/Employer ID Number (EIN)/ Socia	Security Number (SSN)	Identification Number		T	ax Status			
Exempt Reason										
D. Utility	Bill Credit: 3-			2-		****				
Section	on 6 - To be complet	Service Account Numb		emmissionina I		ustomer Account Number				
	on 6 - 10 be complet e following supporting docum			ommissiomng (KUX) IIIC	easures.				
Attach th	e rollowing supporting document Verification data as evidence of		Report.							
	Updated savings calculations, w	_ `								
	Copies of invoices for implement		•							
See the P	RCx Training Completion Form, Cx Program Guidelines for mo			ndees, and measure per	sistence strate	gies.				
	on 7 - To be complet			AC Rebate:						
	Permit (if required). If a permit a				ovided the pe	mit number and/or	r nermit closure			
	entation. (If no permit is require		•	Agen	•	Mit Hulmber and o	penni Good G			
2. Contrac	ctor Certification. If a Contractor	or Trade Professional was used	for any HVAC installation/re	eplacement, this section	must be comp	leted by the contra	ctor.			
□Вус	hecking this box, I certify I am a	licensed contractor and have for	llowed applicable permitting	requirements and, if requ	uired, that the	HVAC permit infor	mation above is correct.			
C41	Signature of Contractor	tion Ctatomont		e (please print)			Date			
	on 8 - Installation/Op propriate boxes:	peration Statement	and Signature.							
	No changes to the proposed sol Application approved savings ca		ne Project Application Revie	w and Approval, and the	Customer or 1	Frade Professional	verifies that the			
	Due to changes to the proposed this section, and Sections 4 on particulation backup: the output fr	page 2, to calculate the revised	installed energy usage, end	ergy savings, peak dema	nd reduction, a	and incentives. Att	ach the appropriate			
being mair	comer or Trade Professional belo ntained to perform in conformity v n were followed. The installation	with their design intent, and (ii) t	hat a licensed contractor wa	as used, where applicable	e, and all appli	cable permitting re	quirements for this			
	Signature		Name (please print)		Т	itle	Date			

Form (Rev. December 2014)
Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Interna	111010	1100 001 1100								
	1 N	lame (as shown on your income tax return). Name is required on this line; do not leave this line blank.								
9.2	2 E	susiness name/disregarded entity name, if different from above								
Print or type Specific Instructions on page	II —	Check appropriate box for federal tax classification; check only one of the following seven boxes: Individual/sole proprietor or Corporation S Corporation Partnership single-member LLC Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partners Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the tax classification of the single-member owner.	ship) ►	ust/estate	Ex	Exempertain enstruction sempt persemption semption semption	ntities, ns on payee con from nn from	not ind page 3) ode (if a FATCA	ividual : any) A repor	s; see ting
<u>~ -</u>		Other (see instructions) ▶			(Ap	plies to a	ccounts n	aintained	outside t	he U.S.)
pecifi	5 A	ddress (number, street, and apt. or suite no.)	Reques	ter's nan	ne and	addres	s (opti	onal)		
See	6 C	ity, state, and ZIP code								
	7 L	ist account number(s) here (optional)								=
Par	t I	Taxpayer Identification Number (TIN)								
Enter	vour	TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo	oid	Social	securi	ty num	ber			
reside entitie	nt al s, it	thholding. For individuals, this is generally your social security number (SSN). However, for ien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>				-		-[
TIN or	ı paç	je 3.		or						
Note.	If the	e account is in more than one name, see the instructions for line 1 and the chart on page	4 for	Employ	er ide	ntificat	tion nu	mber		
guidel	ines	on whose number to enter.					П			
Par		Certification								
Under	pen	alties of perjury, I certify that:								
1. The	e nur	nber shown on this form is my correct taxpayer identification number (or I am waiting for	a numb	er to be	issue	d to n	ne); an	d		
Ser	vice	t subject to backup withholding because: (a) I am exempt from backup withholding, or (b (IRS) that I am subject to backup withholding as a result of a failure to report all interest or er subject to backup withholding; and) I have or divide	not bee ends, or	n noti (c) the	fied by e IRS I	the land	nterna tified	Reve	nue at I am
3. Iar	nal	J.S. citizen or other U.S. person (defined below); and								
4. The	FAT	CA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	g is con	rect.						
becau interes genera	se yo st pa ally, p	on instructions. You must cross out item 2 above if you have been notified by the IRS the bulk have failed to report all interest and dividends on your tax return. For real estate transaid, acquisition or abandonment of secured property, cancellation of debt, contributions to be bus on the certification, and the certification, so on page 3.	actions, o an ind	item 2 d	does n etirem	ot app ent ar	oly. Fo	r mort ment (gage IRA), a	and
Sign Here		Signature of U.S. person ► Da	ite ►							

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S, person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued), $\,$
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

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Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- . An individual who is a U.S. citizen or U.S. resident alien:
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- . An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301,7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- 2. The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- 4. The type and amount of income that qualifies for the exemption from tax.
- Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester,
- 2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

- 3. The IRS tells the requester that you furnished an incorrect TIN,
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See Exempt payee code on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See Exemption from FATCA reporting code on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; do not leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. Individual. Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

- b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.
- c. Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.
- d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.
- e. Disregarded entity. For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

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Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC), If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys'
 fees or gross proceeds paid to attorneys, and corporations that provide medical or
 health care services are not exempt with respect to payments reportable on Form
 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
 - 2-The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- $4-\!\mbox{\it H}$ foreign government or any of its political subdivisions, agencies, or instrumentalities
 - 5-A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- $7\!-\!A$ futures commission merchant registered with the Commodity Futures Trading Commission
 - 8-A real estate investment trust
- 9-An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
 - 13-A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for	THEN the payment is exempt for				
Interest and dividend payments	All exempt payees except for 7				
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.				
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4				
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²				
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4				

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
 - B-The United States or any of its agencies or instrumentalities
- $C\!-\!A$ state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
 - G-A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
 - I-A common trust fund as defined in section 584(a)
 - J-A bank as defined in section 581
 - K-A broker
 - L-A trust exempt from tax under section 664 or described in section 4947(a)(1)
 - M-A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see How to get a TIN below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments must be respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

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Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see Exempt payee code earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.
- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
Individual Two or more individuals (joint account)	The individual The actual owner of the account or, if combined funds, the first individual on the account'
Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee' The actual owner'
Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i) (A))	The grantor*
For this type of account:	Give name and EIN of:
Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity
Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
Association, club, religious, charitable, educational, or other tax- exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i) (BI)	The trust

List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 2.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- · Protect your SSN,
- . Ensure your employer is protecting your SSN, and
- . Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: *spam@uce.gov* or contact them at *www.ftc.gov/idtheft* or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

² Circle the minor's name and furnish the minor's SSN.

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The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- . The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- 2. The treaty article addressing the income.
- 3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- 4. The type and amount of income that qualifies for the exemption from tax.
- 5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester,
- 2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
 - 3. The IRS tells the requester that you furnished an incorrect TIN,
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see Special rules for partnerships on page 1.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

Partnership, C Corporation, or S Corporation. Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA) name" on the "Business name/disregarded entity name" line.

Disregarded entity. Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the "Name" line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the "Business name/disregarded entity name" line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter "P" for partnership. If you are an LLC that has filled a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line.

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Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/ disregarded entity name" line.

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following pavees are exempt from backup withholding:

- 1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
 - 2. The United States or any of its agencies or instrumentalities,
- 3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
- A foreign government or any of its political subdivisions, agencies, or instrumentalities.
- 5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

- 6. A corporation,
- 7. A foreign central bank of issue,
- 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States.
- 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
 - 10. A real estate investment trust,
- 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
 - 12. A common trust fund operated by a bank under section 584(a),
 - 13. A financial institution,
- 14. A middleman known in the investment community as a nominee or custodian, or
- 15. A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for	THEN the payment is exempt for					
Interest and dividend payments	All exempt payees except for 9					
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.					
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5					
Payments over \$600 required to be reported and direct sales over \$5,000 1	Generally, exempt payees 1 through 7 ²					

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see How to get a TIN below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see Exempt Payee on page 3.

Signature requirements. Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

- Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.
 You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- **3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.

2016 Withholding Exemption Certificate

590

The payee completes this form and submits it to the withholding agent. The withholding agent keeps	this fo	orm with their records.
Withholding Agent		
Name		
Payee		
	IN □ F	EIN CA Corp no. CA SOS file no.
Address (and (the grown PO has an PMP or)		
Address (apt./ste., room, PO box, or PMB no.)		
City (If you have a foreign address, see instructions.)	State	ZIP code
Exemption Reason		
Check only one reason box below that applies to the payee.		
By checking the appropriate box below, the payee certifies the reason for the exemption from the California requirements on payment(s) made to the entity or individual.	rnia ir	ncome tax withholding
Individuals — Certification of Residency: I am a resident of California and I reside at the address shown above. If I become a nonresider notify the withholding agent. See instructions for General Information D, Definitions.	nt at a	any time, I will promptly
☐ Corporations: The corporation has a permanent place of business in California at the address shown above a California Secretary of State (SOS) to do business in California. The corporation will file a California corporation ceases to have a permanent place of business in California or ceases to do any of the withholding agent. See instructions for General Information D, Definitions.	fornia	tax return. If this
Partnerships or Limited Liability Companies (LLCs): The partnership or LLC has a permanent place of business in California at the address shown California SOS, and is subject to the laws of California. The partnership or LLC will file a Califo or LLC ceases to do any of the above, I will promptly inform the withholding agent. For withhold partnership (LLP) is treated like any other partnership.	rnia ta	ax return. If the partnership
Tax-Exempt Entities: The entity is exempt from tax under California Revenue and Taxation Code (R&TC) Section 23 Internal Revenue Code Section 501(c) (insert number). If this entity ceases to be exempt the withholding agent. Individuals cannot be tax-exempt entities.		
Insurance Companies, Individual Retirement Arrangements (IRAs), or Qualified Pension/Pro The entity is an insurance company, IRA, or a federally qualified pension or profit-sharing plan.		aring Plans:
California Trusts: At least one trustee and one noncontingent beneficiary of the above-named trust is a California California fiduciary tax return. If the trustee or noncontingent beneficiary becomes a nonreside notify the withholding agent.		
Estates — Certification of Residency of Deceased Person: I am the executor of the above-named person's estate or trust. The decedent was a California of The estate will file a California fiduciary tax return.	reside	ent at the time of death.
Nonmilitary Spouse of a Military Servicemember: I am a nonmilitary spouse of a military servicemember and I meet the Military Spouse Residen requirements. See instructions for General Information E, MSRRA.	ncy Re	elief Act (MSRRA)
CERTIFICATE OF PAYEE: Payee must complete and sign below.		
To learn about your privacy rights, how we may use your information, and the consequences for not provide to ftb.ca.gov and search for privacy notice . To request this notice by mail, call 800.852.5711.	viding	the requested information,
Under penalties of perjury, I hereby certify that the information provided in this document is, to the best correct. If conditions change, I will promptly notify the withholding agent.	of my	knowledge, true and
Type or print payee's name and title	Teleph	none ()
Payee's signature ▶ □	Date_	

2016 Instructions for Form 590

Withholding Exemption Certificate

References in these instructions are to the California Revenue and Taxation Code (R&TC).

General Information

Registered Domestic Partners (RDP) - For purposes of California income tax, references to a spouse, husband, or wife also refer to a Registered Domestic Partner (RDP) unless otherwise specified. For more information on RDPs, get FTB Pub, 737, Tax Information for Registered Domestic Partners.

Purpose

Use Form 590, Withholding Exemption Certificate, to certify an exemption from nonresident withholding.

Form 590 does not apply to payments of backup withholding. For more information, go to ftb.ca.gov and search for backup withholding.

Form 590 does not apply to payments for wages to employees. Wage withholding is administered by the California Employment Development Department (EDD). For more information, go to edd.ca.gov or call 888.745.3886.

Do not use Form 590 to certify an exemption from withholding if you are a Seller of California real estate. Sellers of California real estate use Form 593-C, Real Estate Withholding Certificate, to claim an exemption from the real estate withholding requirement.

The following are excluded from withholding and completing this form:

- The United States and any of its agencies or instrumentalities.
- A state, a possession of the United States. the District of Columbia, or any of its political subdivisions or instrumentalities.
- · A foreign government or any of its political subdivisions, agencies, or instrumentalities.

Income Subject to Withholding

California Revenue and Taxation Code (R&TC) Section 18662 requires withholding of income or franchise tax on payments of California source income made to nonresidents of California.

Withholding is required on the following, but is not limited to:

- · Payments to nonresidents for services rendered in California.
- Distributions of California source income made to domestic nonresident partners, members, and S corporation shareholders and allocations of California source income made to foreign partners and members.
- Payments to nonresidents for rents if the payments are made in the course of the withholding agent's business.

- · Payments to nonresidents for royalties from activities sourced to California.
- Distributions of California source income to nonresident beneficiaries from an estate or trust.
- · Endorsement payments received for services performed in California.
- Prizes and winnings received by nonresidents for contests in California.

However, withholding is optional if the total payments of California source income are \$1,500 or less during the calendar year.

For more information on withholding get FTB Pub. 1017, Resident and Nonresident Withholding Guidelines. To get a withholding publication, see Additional Information.

Who Certifies this Form

Form 590 is certified by the payee. California residents or entities exempt from the withholding requirement should complete Form 590 and submit it to the withholding agent before payment is made. The withholding agent is then relieved of the withholding requirements if the agent relies in good faith on a completed and signed Form 590 unless notified by the Franchise Tax Board (FTB) that the form should not be relied upon.

An incomplete certificate is invalid and the withholding agent should not accept it. If the withholding agent receives an incomplete certificate, the withholding agent is required to withhold tax on payments made to the pavee until a valid certificate is received. In lieu of a completed exemption certificate, the withholding agent may accept a letter from the payee as a substitute explaining why they are not subject to withholding. The letter must contain all the information required on the certificate in similar language, including the under penalty of perjury statement and the pavee's taxpaver identification number. The withholding agent must retain a copy of the certificate or substitute for at least four years after the last payment to which the certificate applies, and provide it upon request to the FTB. If an entertainer (or the entertainer's business

entity) is paid for a performance, the entertainer's information must be provided. Do not submit the entertainer's agent or promoter information.

The grantor of a grantor trust shall be treated as the payee for withholding purposes. Therefore, if the payee is a grantor trust and one or more of the grantors is a nonresident, withholding is required. If all of the grantors on the trust are residents, no withholding is required. Resident grantors can check the box on Form 590 labeled "Individuals Certification of Residency.'

D Definitions

For California non-wage withholding purposes, nonresident includes all of the following:

- Individuals who are not residents of California.
- Corporations not qualified through the California Secretary of State (CA SOS) to do business in California or having no permanent place of business in California.
- Partnerships or limited liability companies (LLCs) with no permanent place of business in California.
- Anv trust without a resident grantor, beneficiary, or trustee, or estates where the decedent was not a California resident.

Foreign refers to non-U.S.

For more information about determining resident status, get FTB Pub. 1031, Guidelines for Determining Resident Status. Military servicemembers have special rules for residency. For more information, get FTB Pub. 1032. Tax Information for Military Personnel

Permanent Place of Business:

A corporation has a permanent place of business in California if it is organized and existing under the laws of California or it has qualified through the CA SOS to transact intrastate business. A corporation that has not qualified to transact intrastate business (e.g., a corporation engaged exclusively in interstate commerce) will be considered as having a permanent place of business in California only if it maintains a permanent office in California that is permanently staffed by its employees.

E Military Spouse Residency Relief Act (MSRRA)

Generally, for tax purposes you are considered to maintain your existing residence or domicile. If a military servicemember and nonmilitary spouse have the same state of domicile, the MSRRA provides:

- A spouse shall not be deemed to have lost a residence or domicile in any state solely by reason of being absent to be with the servicemember serving in compliance with military orders.
- A spouse shall not be deemed to have acquired a residence or domicile in any other state solely by reason of being there to be with the servicemember serving in compliance with military orders.

Domicile is defined as the one place:

- · Where you maintain a true, fixed, and permanent home.
- To which you intend to return whenever you are absent.

A military servicemember's nonmilitary spouse is considered a nonresident for tax purposes if the servicemember and spouse have the same domicile outside of California and the spouse is in California solely to be with the servicemember who is serving in compliance with Permanent Change of Station orders.

California may require nonmilitary spouses of military servicemembers to provide proof that they meet the criteria for California personal income tax exemption as set forth in the MSRRA.

Income of a military servicemember's nonmilitary spouse for services performed in California is not California source income subject to state tax if the spouse is in California to be with the servicemember serving in compliance with military orders, and the servicemember and spouse have the same domicile in a state other than California.

For additional information or assistance in determining whether the applicant meets the MSRRA requirements, get FTB Pub. 1032.

Specific Instructions

Payee Instructions

Enter the withholding agent's name.

Enter the payee's information, including the taxpayer identification number (TIN) and check the appropriate TIN box.

You must provide an acceptable TIN as requested on this form. The following are acceptable TINs: social security number (SSN); individual taxpayer identification number (ITIN); federal employer identification number (FEIN); California corporation number (CA Corp no.); or CA SOS file number.

Private Mail Box (PMB) – Include the PMB in the address field. Write "PMB" first, then the box number. Example: 111 Main Street PMB 123.

Foreign Address – Follow the country's practice for entering the city, county, province, state, country, and postal code, as applicable, in the appropriate boxes. Do not abbreviate the country name.

Exemption Reason – Check the box that reflects the reason why the payee is exempt from the California income tax withholding requirement.

Withholding Agent Instructions

Keep Form 590 for your records. The certification remains valid for 5 years or until the payee's status changes. **Do not** send this form to the FTB unless it has been specifically requested.

For more information, contact Withholding Services and Compliance, see Additional Information.

The payee must notify the withholding agent if any of the following situations occur:

- The individual payee becomes a nonresident.
- The corporation ceases to have a permanent place of business in California or ceases to be qualified to do business in California.
- The partnership ceases to have a permanent place of business in California.
- The LLC ceases to have a permanent place of business in California.
- The tax-exempt entity loses its tax-exempt status.

If any of these situations occur, then withholding may be required. For more information, get Form 592, Resident and Nonresident Withholding Statement, Form 592-B, Resident and Nonresident Withholding Tax Statement, and Form 592-V, Payment Voucher for Resident and Nonresident Withholding.

Additional Information

For additional information or to speak to a representative regarding this form, call the Withholding Services and Compliance telephone service at:

Telephone: 888.792.4900

916.845.4900

Fax: 916.845.9512

OR write to:

WITHHOLDING SERVICES AND COMPLIANCE MS F182 FRANCHISE TAX BOARD PO BOX 942867 SACRAMENTO CA 94267-0651

You can download, view, and print California tax forms and publications at **ftb.ca.gov**.

OR to get forms by mail write to:

TAX FORMS REQUEST UNIT FRANCHISE TAX BOARD PO BOX 307

RANCHO CORDOVA CA 95741-0307

For all other questions unrelated to withholding or to access the TTY/TDD numbers, see the information below.

Internet and Telephone Assistance

Website: ftb.ca.gov

Telephone: 800.852.5711 from within the

United States

916.845.6500 from outside the

United States

TTY/TDD: 800.822.6268 for persons with

hearing or speech impairments

Asistencia Por Internet y Teléfono

Sitio web: ftb.ca.gov

Teléfono: 800.852.5711 dentro de los

Estados Unidos

916.845.6500 fuera de los Estados

Unidos

TTY/TDD: 800.822.6268 para personas con

discapacidades auditivas

o del habla

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- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
Individual Two or more individuals (joint account)	The individual The actual owner of the account or, if combined funds, the first individual on the account '
Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b, So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ' The actual owner '
Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
Disregarded entity not owned by an individual A valid trust, estate, or pension trust	The owner Legal entity 4
Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
Partnership or multi-member LLC A broker or registered nominee	The partnership The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- · Protect your SSN,
- . Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: *spam@uce.gov* or contact them at *www.ftc.gov/idtheft* or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 1.

^{*}Note. Grantor also must provide a Form W-9 to trustee of trust.

Instructions for Form 590

Withholding Exemption Certificate

References in these instructions are to the California Revenue and Taxation Code (R&TC).

What's New

Backup Withholding — Beginning on or after January 1, 2010, with certain limited exceptions, payers that are required to withhold and remit backup withholding to the Internal Revenue Service (IRS) are also required to withhold and remit to the Franchise Tax Board (FTB). The California backup withholding rate is 7% of the payment. For California purposes, dividends, interests, and any financial institutions release of loan funds made in the normal course of business are exempt from backup withholding. For additional information on California backup withholding, go to ftb.ea.gov and search for backup withholding.

If a payee has backup withholding, the payee must contact the FTB to provide a valid Taxpayer Identification Number (TIN) before filling a tax return. The following are acceptable TINs: social security number (SSN); individual taxpayer identification number (ITIN); federal employer identification number (FEIN); California corporation number (CA Corp No.); or Secretary of State (SOS) file number. Failure to provide a valid TIN will result in the denial of the backup withholding credit. For more information go to ftb.ca.gov and search for backup withholding.

General Information

For purposes of California income tax, references to a spouse, husband, or wife also refer to a Registered Domestic Partner (RDP) unless otherwise specified. For more information on RDPs, get FTB Pub. 737, Tax Information for Registered Domestic Partners.

Private Mail Box (PMB) – Include the PMB in the address field. Write "PMB" first, then the box number. Example: 111 Main Street PMB 123.

Foreign Address – Enter the information in the following order: City, Country, Province/ Region, and Postal Code. Follow the country's practice for entering the postal code. **Do not** abbreviate the country's name.

A Purpose

Use Form 590, Withholding Exemption Certificate, to certify an exemption from nonresident withholding. California residents or entities should complete and present Form 590 to the withholding agent. The withholding agent is then relieved of the withholding requirements if the agent relies in good faith on a completed and signed Form 590 unless told by the FTB that the form should not be relied upon.

The following are excluded from withholding and completing this form:

 The United States and any of its agencies or instrumentalities

- A state, a possession of the United States, the District of Columbia, or any of its political subdivisions or instrumentalities
- A foreign government or any of its political subdivisions, agencies, or instrumentalities

Important – This form cannot be used for exemption from wage and real estate withholding.

- If you are an employee, any wage withholding questions should be directed to the FTB General Information number, 800.852.5711. Employers should call 888.745.3886 or go to www.edd.ca.gov.
- Sellers of California real estate use Form 593-C, Real Estate Withholding Certificate, to claim an exemption from real estate withholding.

B Requirement

R&TC Section 18662 requires withholding of income or franchise tax on payments of California source income made to nonresidents of California

Withholding is required on the following, but is not limited to:

- Payments to nonresidents for services rendered in California.
- Distributions of California source income made to domestic nonresident S corporation shareholders, partners and members and allocations of California source income made to foreign partners and members.
- Payments to nonresidents for rents if the payments are made in the course of the withholding agent's business.
- Payments to nonresidents for royalties with activities in California.
- Distributions of California source income to nonresident beneficiaries from an estate or trust
- Prizes and winnings received by nonresidents for contests in California.

However, withholding is optional if the total payments of California source income are \$1,500 or less during the calendar year.

For more information on withholding get FTB Pub. 1017, Resident and Nonresident Withholding Guidelines. To get a withholding publication see General Information H, Publications, Forms, and Additional Information.

C Who Certifies this Form

Form 590 is certified by the payee. An incomplete certificate is invalid and the withholding agent should not accept it. If the withholding agent receives an incomplete certificate, the withholding agent is required to withhold tax on payments made to the payee

until a valid certificate is received. In lieu of a completed certificate on the preprinted form, the withholding agent may accept as a substitute certificate a letter from the payee explaining why the payee is not subject to withholding. The letter must contain all the information required on the certificate in similar language, including the under penalty of perjury statement and the payee's taxpayer identification number. The withholding agent must retain a copy of the certificate or substitute for at least four years after the last payment to which the certificate applies, and provide it upon request to the Franchise Tax Board.

For example, if an entertainer (or the entertainer's business entity) is paid for a performance, the entertainer's information must be provided. **Do not** submit the entertainer's agent or promoter information.

The grantor of a grantor trust shall be treated as the payee for withholding purposes. Therefore, if the payee is a grantor trust and one or more of the grantors is a nonresident, withholding is required. If all of the grantors on the trust are residents, no withholding is required. Resident grantors can check the box on Form 590 labeled "Individuals — Certification of Residency."

D Who is a Resident

A California resident is any individual who is in California for other than a temporary or transitory purpose or any individual domiciled in California who is absent for a temporary or transitory purpose.

An individual domiciled in California who is absent from California for an uninterrupted period of at least 546 consecutive days under an employment-related contract is considered outside California for other than a temporary or transitory purpose.

An individual is still considered outside California for other than a temporary or transitory purpose if return visits to California do not total more than 45 days during any taxable year covered by an employment contract.

This provision does not apply if an individual has income from stocks, bonds, notes, or other intangible personal property in excess of \$200,000 in any taxable year in which the employment-related contract is in effect.

A spouse/RDP absent from California for an uninterrupted period of at least 546 days to accompany a spouse/RDP under an employment-related contract is considered outside of California for other than a temporary or transitory purpose.

Generally, an individual who comes to California for a purpose which will extend over a long or indefinite period will be considered a resident. However, an individual who comes to perform a particular contract of short duration will be considered a nonresident.

For assistance in determining resident status, aet FTB Pub. 1031. Guidelines for Determining Resident Status, and FTB Pub. 1032, Tax Information for Military Personnel, or call the FTB at 800.852.5711 or 916.845.6500.

Military Spouse Residency Relief Act (MSRRA)

Generally, for tax purposes you are considered to maintain your existing residence or domicile. If a military servicemember and nonmilitary spouse have the same state of domicile, the MSRRA provides:

- · A spouse shall not be deemed to have lost a residence or domicile in any state solely by reason of being absent to be with the servicemember serving in compliance with military orders.
- A spouse shall not be deemed to have acquired a residence or domicile in any other state solely by reason of being there to be with the servicemember serving in compliance with military orders.

Domicile is defined as the one place:

- · Where you maintain a true, fixed, and permanent home
- To which you intend to return whenever you are absent

A military servicemember's nonmilitary spouse is considered a nonresident for tax purposes if the servicemember and spouse have the same domicile outside of California and the spouse is in California solely to be with the servicemember who is serving in compliance with Permanent Change of Station orders (Note: California may require nonmilitary spouses of military servicemembers to provide proof that they meet the criteria for California personal income tax exemption as set forth in the MSRRA).

Income of a military servicemember's nonmilitary spouse for services performed in California is not California source income subject to state tax if the spouse is in California to be with the servicemember serving in compliance with military orders, and the servicemember and spouse have the same domicile in a state other than California.

For additional information or assistance in determining whether the applicant meets the MSRRA requirements, get FTB Pub. 1032.

What is a Permanent Place of Business

A corporation has a permanent place of business in California if it is organized and existing under the laws of California or if it is a foreign corporation qualified to transact intrastate business by the SOS. A corporation that has not qualified to transact intrastate business (e.g., a corporation engaged exclusively in interstate commerce) will be considered as having a permanent place of business in California only if it maintains a permanent office in California that is permanently staffed by its employees.

Withholding Agent

Keep Form 590 for your records. Do not send this form to the FTB unless it has been specifically requested.

For more information, contact Withholding Services and Compliance, see General Information H.

The payee must notify the withholding agent if any of the following situations occur:

- · The individual payee becomes a nonresident,
- The corporation ceases to have a permanent place of business in California or ceases to be qualified to do business in California.
- The partnership ceases to have a permanent place of business in California.
- The LLC ceases to have a permanent place of business in California.
- The tax-exempt entity loses its tax-exempt

The withholding agent must then withhold and report the withholding using Form 592, Resident and Nonresident Withholding Statement, and remit the withholding using Form 592-V, Payment Voucher for Resident and Nonresident Withholding, Form 592-B, Resident and Nonresident Withholding Tax Statement, is retained by the withholding agent and a copy is given to the payee.

H Publications, Forms, and Additional Information

You can download, view, and print California tax forms and publications at ftb.ca.gov.

To have publications or forms mailed to you or to get additional nonresident withholding information, contact the Withholding Services and Compliance.

WITHHOLDING SERVICES AND COMPLIANCE MS F182 FRANCHISE TAX BOARD PO BOX 942867 **SACRAMENTO CA 94267-0651**

Telephone: 888.792.4900 916.845.4900 Fax: 916.845.9512

For all other questions unrelated to withholding or to access the TTY/TDD numbers, see the information below.

Internet and Telephone Assistance

Website:

ftb.ca.gov 800.852,5711 from within the United States 916.845.6500 from outside the Telephone:

United States

800.822.6268 for persons with TTY/TDD:

hearing or speech impairments

Asistencia Por Internet y Teléfono

Sitio web: Teléfono:

fth.ca.gov 800.852.5711 dentro de los Estados Unidos 916.845.6500 fuera de los Estados

TTY/TDD: 800.822.6268 personas con

discapacidades auditivas

v del habla



SEND TO: Southern California Edison, Business Incentives

P.O. Box 800, Rosemead, CA 91770-0800

E-mail: BusinessIncentives@sce.com | Fax: 626-633-3243

February 2, 2018

Project Number: 318-17-0500990897

Project: Customized Solutions Approach

Customer Ref.: City of Commerce-Veterans Memorial Park

Trade Professional Information: Customer Information:

Corey Brophy Robert Lipton
EcoGreen Solutions City of Commerce
27611 La Paz Rd, Suite A2 2535 Commerce Way
Laguna Niguel, CA 92677 Commerce, CA 90040

RE: NOTICE OF CUSTOMIZED SOLUTIONS CONTRACT AND INCENTIVE APPROVAL

SA # 3-000-0106-53

Dear Corey Brophy & Robert Lipton:

Thank you for submitting your Energy Management Solutions Incentive Application ("Application") for the Customized Solutions Program ("Program"). Your Application for incentives for the Project(s) described in your application has been reviewed and approved. Funds reserved are based on SCE approved savings estimate set forth below; however, the actual incentive payments will be made based on verified and actual savings' amounts:

SCE Final Approved S	avings and Inc	centive Esti	mate	N. F		
SOLUTIONS DESCRIPTION	Code	kWh	kW	\$ Incentive Amount		
Exterior LED Fixture mounted	LT-19132	14,710.1	0.00	\$	1,176.81	
Exterior LED Fixture mounted above 40 ft.	LT-19133	52,416.0	0.00	\$	4,193.28	
				-		
Total Approved Savings/Incentive Estimates		67,126.1	0.00	\$	5,370.09	
Project Cost Adjustment						
Total Estimated Incentive	\$	5,370.09				
10% Measurement and Verification	n Adder (if applicat	ole)				

If you do not concur with the energy savings and incentive amounts shown above, you have 30 days from the date of this letter to notify SCE, so that we can attempt to resolve your concern(s). If you do not notify us of any concerns within 30 days of this letter, the savings/incentive estimates set forth above will be deemed correct. If you agree with the estimates, you may proceed to purchase and install the above solution code(s) at any time. This Project Approval incorporates by reference the Application, including the Applicant Agreement regarding Program Terms and Conditions.

After your project is <u>completely installed</u>, operational, and meets all requirements of the Program, which is described in detail in the Customized Statewide Procedures Manual for Business and at www.sce.com/customized solutions:

- Complete, sign and submit the enclosed Customized Solutions Installation Report.
- Submit final invoices and/or documentation to support project cost, clearly detailing all costs associated with the project (equipment, labor, tax, etc.).
- Submit complete engineering calculations to demonstrate energy savings and documentation, if applicable (including archival diskette, CD, etc.).
- Submit schematic drawings and/or manufacturer specification sheets, if applicable.
- · Operating Report, if measurement and verification is required.
- Submit Pump Curve (if applicable)
- Submit Permit Closure for HVAC measures (if applicable)

NOTE:

As a reminder, the deadline for the project to be completely installed and operational is one year from the date of this Project Approval letter. Please submit the completed Installation Report within 30 days after installation and prior to the one year deadline.

Upon SCE review and approval of your completed Installation Report and supporting cost documentation, you will be notified in writing. Thereafter, SCE will process the incentive check or SCE utility bill credit, as applicable. If SCE is unable to approve your incentives based on the information provided, SCE may require you to submit other documents related to the Project, Project site, solutions, energy savings, or any other documents it requires, in its sole discretion, to make a decision on your Application.

If you have any questions, please contact your SCE Account Representative. You may also call us at (626) 635-6015 Monday through Friday, from 8:00 a.m. to 5:00 p.m., or send an e-mail to BusinessIncentives@sce.com. Please have your project number available for reference when you call and include it in any e-mail correspondence.

Business Incentives Team Southern California Edison

WT2#/UPN/Service Contract ID	318-17-0500990897
Review Completion Date	12/04/17
Technical Review Engineer	Doron Fishman
Consulting Firm	PL Energy

		1	2
	Status	Declined	Approved as submitted
Approval	Additional Comments	During the pre-installation site inspection, the inspector reported that the existing fixtures had been removed and construction had commenced at the site. See photos in the inspection tab. The reviewer removed the interior fixture savings from this application as existing equipment must be in	The existing exterior fixtures in this application are
		operation to be eligible for Incentive.	mounted 7 feet and 8 feet above grade.
	Submitted	LT-17492	LT-19132
Solution Code	Description	Interior LED fixture replacement (utilizing approved luminaries)	
	Approved	LT-17492	LT-19132
	Description	Interior LED fixture replacement (utilizing approved luminaries)	
	Submitted	12.00	12.00
EUL	Approved		12.00
	Source		
	Submitted	N/A	N/A
RUL	Approved	N/A	N/A
	Source	N/A	N/A
Install Trees	Submitted	ROB	ROB ROB
Install Type	Approved		Approved as submitted
	Assessment Submitted	T8 Fixtures	HPS and incandescent Fixtures
Project Baseline Technology	Approved	N/A	HPS and incandescent Fixtures
	Submitted	LED fixtures	LED fixtures
Project Measure Technology	Approved	N/A	LED fixtures
	Approved	Easy Lighting Calculator V3.0	Easy Lighting Calculator V3.0
	7,7,7,7,7		and a second sec
	Changes made		
Calculation Methodology	Additional Comments 1st Period kWh Savings		14,710
	1st Period kW Savings		14,710
Project Savings	2nd Period kWh Savings		
	2nd Period kW Savings		
Business Theorem In Albert	1st Period		
Project Therms Indirect	2nd Period		
	Approved 1st Baseline	\$ -	\$ 1,614
	Approved 2nd Baseline		\$
Project Cost Basis	Cost Documentation [GMC]	Cost Estimate Reference	Cost Estimate Reference
	Cost Documentation [IMC]	Cost Estimate Reference	Cost Estimate Reference
	Early Retirement Cost [ERC]	\$ -	\$
Is Onsite Generation Prese		There is no onsite generation at the facility that may impact the proposed measure savings.	There is no onsite generation at the facility that n impact the proposed measure savings.
Load Shifting employed	at this customer site?	No load shifting strategies are in place that impact the demand reduction savings.	No load shifting strategies are in place that impact the demand reduction savings.
Customer site enrolled in Demand Response Programs?		The customer site is not enrolled in any SCE Demand Response Programs.	The customer site is not enrolled in any SCE Dema Response Programs.
oes Equipment Operate 2-5PN	A During DEER Peak Periods?	Yes	No

WT2#/UPN/Service Contract ID	318-17-0500990897
Review Completion Date	12/04/17
Technical Review Engineer	Doron Fishman
Consulting Firm	PL Energy

		3	4
	Status	Approved as submitted	Declined
Approval	Additional Comments	The existing exterior fixtures in this application are 65	During the pre-installation site inspection, the inspector reported that the existing fixtures had beer removed and construction had commenced at the site. See photos in the inspection tab. The reviewer removed the interior fixture savings from this application as existing equipment must be in
	Submitted	feet above grade. LT-19133	operation to be eligible for incentive. LT-58676
	Description		Interior LED recessed, surface and pendant-mounted
Solution Code			downlights
	Approved	LT-19133	
	Description		
Pa 11	Submitted	12.00	12.00
EUL	Approved Source	0.00	
	Submitted	N/A	N/A
RUL	Approved	N/A	N/A
	Source	N/A	N/A
Install Ton	Submitted	ROB	ROB
Install Type	Approved Assessment	Approved as submitted	
	Submitted	CFL fixtures	CFL Fixtures
Project Baseline Technology	Approved	CFL fixtures	N/A
Project Measure Technology	Submitted	LED fixtures	LED fixtures
Project Measure recimology	Approved	LED fixtures	N/A
	Approved	Customized Analysis Other	
	Changes made		
Calculation Methodology	Additional Comments	Hours of operation were changed by the applicant as the savings for this measure exceeded the Average Energy Usage Vs. Estimated Savings Comparison Sheet found in attachment "OBF Usage Vs Savings_318-17-0500990897_SA_3-000-0106-53.pdf". The applicant provided an update to the hours of operation in attachment "Email.pdf" of 780 hr/yr. (3 hr/day x 5 days/week x 52 weeks/ year). The reviewer updated the calculations in attachment "318-17-0500990897_QUOTES_quote 501050 - city of commerce - veteran's memorial park - r2 - 7.21.17-ple.xls".	
	1st Period kWh Savings	52,416.00	
Project Savings	1st Period kW Savings 2nd Period kWh Savings		
	2nd Period kW Savings		
Project Therms Indirect	1st Period		
	2nd Period	A 447 FF 60	
	Approved 1st Baseline Approved 2nd Baseline	\$ 112,556.08 \$ -	\$ - \$ -
Project Cost Basis	Cost Documentation [GMC]	Cost Estimate Reference	
	Cost Documentation [IMC]	Cost Estimate Reference	
	Early Retirement Cost [ERC]	\$ -	\$ -
Is Onsite Generation Prese	nt at this customer site?	There is no onsite generation at the facility that may impact the proposed measure savings.	
Load Shifting employed	at this customer site?	No load shifting strategies are in place that impact the demand reduction savings.	
Customer site enrolled in Der		The customer site is not enrolled in any SCE Demand Response Programs.	
Does Equipment Operate 2-5PN Is the Submitted M&		No Not Required	
is the Submitted Mg.	A Liett Whiteat	· · · · · · · · · · · · · · · · · · ·	



Energy Management Solutions Incentives Application for Business Customers

Customized Installation Report

LIPN#: 318-17-0500990897 SA#: 3-000-0106-53 **Customer Ref.:**

City of Commerce-Veterans Memorial I

Customer Name:

City of Commerce

Trade Professional:

EcoGreen Solutions

INSTRUCTIONS:

After your project is installed and operational, input the project installation commencement and completion dates in the fields provided in Section 3. Review the information from your Application Approval Letter. If nothing has changed, and the information in Customized Solutions and Energy Savings is correct, complete and sign Section 8 on page 2 of this Installation Report (IR) Form. If any information differs from Section 1 of this page or your Application Approval Letter, use Section 4 on page 2 of this IR Form to indicate the change. Then, mark the appropriate check box in section 8 on page 2 of this IR Form. If any Payment Information differs from Section 2 on page 1 of this IR Form, complete Section 5 on page 2. Review Sections 6 and 7 on page 2 of this IR Form and complete if applicable. Sign and return both pages to SCE at one of the addresses below.

Business Incentives Southern California Edison P.O. Box 800

Rosemead, CA 91770-0800

E-mail: BusinessIncentives@sce.com

Fax: (626) 633-3243

Questions: Contact your Account Manager

or call (626) 635-6015

Section 1 - Customized Solutions, Energy Savings & On-Peak Demand Reduction Estimate:

NOTE: If submitting more than 5 Solutions complete and attach the Customized Solution page from the Multiple Site/Solution Worksheet at www.sceonlineapp.com

Line #	Solution Code	Baseline Usage		installed Usage		Approved Savings		entive Rate		Project Cost	incent	tive Amount
4	LT 40430	16,090.20	kWh	1,380.10	kWh	14710.1	kWh	\$ 0.08		0.000 50	•	4 470 04
1	LT-19132		kW 0.00 kW \$ -	9,883.50	Ф	1,176.81						
	17 40400	70,324.80	kWh	17,908.80	kWh	52,416.00	kWh	\$ 0.08	c	475 000 00	•	4 402 0
2	LT-19133		kW		kW	0.00	kW	\$	\$	175,980.00	4	4,193.28
			kWh		kWh		kWh					
3			kW		kW		kW					
á l			kWh		kWh		kWh					
4			kW		kW		kW					
_			kWh		kWh		kWh					
5			' kW		kW		kW					

Total Approved Energy Savings (kWh):

67126.10

Total Approved On-Peak Reduction (kW):

0.00

Total Project Cost (\$):

\$185,863.50

Calculated Savings Incentive: * Includes Project Cost Adjustment (If Applicable)

\$5,370.09

NOTE: For projects requiring M&V, attach any required baseline or post-installation measurements and analysis, as specified in your approved M&V plan.

Section 2 - Payment Information: (As indicated on the Application)

A. Form of Payment:

Incentive Check to third party

B. Payee Information:

(Check to Customer, Check to TradePro or Check to Third Party)

Payee-Customer/ Business Nam

EcoGreen Solutions

949-364-6800

Attention to (only if required to be printed on the check

27611 La Paz Rd, Suite A2

Laguna Niguel

CA

92677

Company/Business Mailing Address

submissions@ecogreen-solutions.net

Contact Phone Number

Contact E-Mail Address

800196823

Corey Brophy

Corporation

Zip Code

C. Tax Identification Type:

Federal Tax ID

Federal Tax ID/Employer ID Number (EINI/ Social Security No Identification Numbe Tax Status

Exempt Reason

D. Utility Bill Credit:

Section 3 - Installation Dates:

Complete both dates:

Installation Commencement Date:

Installation Completion Date:

Section 4	- Customized S	Solutions, Energy S	avings & On-Pea	k Demand Red	uction: ((If different tha	n page 1)	
NOTE: If submit	ting more than 5 Solutions co	omplete and attach the Customize	d Solution page from the Mult	iple Site/Solution Workshee	et at www.sceon	lineapp.com		
Line#	Solution Code	Baseline Usage	Installed Usage	Savings	Incentive Rate	Project Cost	Incentive Amount	
4		kWh	kWh	kWh				
1		kW	kW	kW				
, 2		kWh	kWh	kWh				
		kW	kW	kW				
3		kWh	kWh	kWh				
,		kW	kW	kW				
4		kWh	kWh	kWh				
		kW	kW	kW				
5		kWh	kWh	kWh				
		kW	kW	kW	-			
Total Energ	gy Savings (kWh):		-	Total On-Peak Reducti	on (kW):			
Tota	Il Project Cost (\$):			Calculated Savings In	centive:			
NOTE: For proje	ects requiring M&V, attach ar	ny required baseline or post-instal	lation measurements and anal	lysis, as specified in your a	pproved M&V pl	lan.		
Section 5	- Payment Info	rmation: (Use this bo	x to update Payment I	nformation if differer	nt from page	e 1)		
A. Form of Pa					, ,	/		
B. Payee Info	10	heck to Customer, Check to TradePro or Ch	eck to Third Party)					
Payee-Customer/	Business Name		Attention to (only if requ	uired to be printed on the check)		Title		
Company/Busines	ss Mailing Address		City			State	Zip Code	
Contact Phone No C. Tax Identifi		Contact E-M	ail Address					
41 142 144	**	leral Tax ID/Employer ID Number (EIN)/ Soci	al Security Number (SSN)	Identification Number		Т	ax Status	
	Exempt Rea	acon.						
D. Utility Bill (1001		2-				
0	- t	Service Account Num				ustomer Account Number		
		ted only if you have		ommissioning ((RCx) me	asures:		
_	owing supporting documer ication data as evidence of	entation with this Installation	Report:					
_	ated savings calculations, v							
_	-	ntation, as proof of the Custome	r's implementation costs.				5	
RCx	Training Completion Form,	including the training agenda,	training materials, list of atte	ndees, and measure pers	sistence strateg	gies.		
See the RCx P	rogram Guidelines for mo	ore information on these item	8.					
Section 7	- To be complet	ted only if you are	requesting an HV	AC Rebate:				
		and/or proof of permit closure is	•			mit number and/o	permit closure	
		ed, leave this section blank.) or Trade Professional was use		Agen	•	atad by the contro	otor	
		licensed contractor and have for	•	•		•		
by Glecki	ng mis box, i ceruly i am a	noched compactor and have to	moned applicable permitarig	requirements and, ir requ	uncu, maraici	TVAO pentit illion	riculori above is correct.	
	Signature of Contractor		Nam	ne (please print)			Date	
Section 8		peration Statement		to (produce pranty				
Check appropri								
1 1	hanges to the proposed sol cation approved savings ca	lutions have been made since t alculations are correct.	he Project Application Revie	w and Approval, and the	Customer or To	rade Professional	verifies that the	
Due to changes to the proposed measures, appropriate adjustments in the savings calculations have been made. For measures with changes made during installation, use this section, and Sections 4 on page 2, to calculate the revised installed energy usage, energy savings, peak demand reduction, and incentives. Attach the appropriate calculation backup: the output from the Estimation Software, Calculated Energy Savings Total or the calculation sheets that document the engineering calculations.								
I, the Customer being maintaine	or Trade Professional belo	w, certify that (i) the Energy Eff with their design intent, and (ii) date of operation of the Energy	iciency Solutions have been that a licensed contractor wa	completely installed, fundas as used, where applicable	ctionally tested e, and all applic	and proven capal able permitting re	ole of operating and quirements for this	
	Signature		Name (please print)		Tit	Ve	Date	

Page 2

Signature

Form (Rev. December 2014)
Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

internal	Revenue Service														
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.														
Print or type See Specific Instructions on page 2.	2 Business name/disregarded entity name, if different from above														
	individual/sole proprietor or Corporation S Corporation Partnership I rust/estate single-member LLC							te i	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)						
	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.							Or	Exemption from FATCA reporting code (if any)						
rin' Ins	Other (see instructions)							110	(Applies to accounts maintained outside the U.S.)						
Eic P						Reques	ester's name and address (optional)								
Ģ.	Togs									, o o (o p	,				
e Sp	6 City, state, and ZIP code														
Se															
	7 List account number(s) here (optional)														
Par	Taxpa	ver Identifica	ation Number (TIN)											
	Part I Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid Social security number														
backup withholding. For individuals, this is generally your social security number (SSN). However, for a															
	sident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other														
	entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>														
Note, If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for						Employer identification number									
quidelines on whose number to enter.								T		T	Π				
•										-					
Part	Certific	cation								-					
	penalties of perju														
			y correct taxpayer id	dentification	number	(or Lam	waiting for	r a numb	er to b	e issu	ed to	me): a	ind		
						•	•					,.		-I D-:	
 I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and 															
3. I an	n a U.S. citizen or	other U.S. perso	on (defined below);	and											
4. The	FATCA code(s) er	ntered on this fo	rm (if any) indicating	that I am e	exempt fro	om FAT	CA reportir	ng is cori	ect.						
becaus interes genera	se you have failed t paid, acquisition	l to report all inte	oss out item 2 aboverest and dividends on of secured proper and dividends, you a	on your tax r	return. Fo	or real e	state trans tributions t	actions, to an ind	item 2 ividual	does retire	not a	oply. Farrang	or mo	rtgag	e and
Sign Here	Signature of U.S. person ▶	•					Da	ate ►							

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Form W-9 (Rev. 12-2014) Page **2**

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- · An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- . An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301,7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity:
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- 2. The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- 4. The type and amount of income that qualifies for the exemption from tax.
- Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

- You do not furnish your TIN to the requester
- 2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

- 3. The IRS tells the requester that you furnished an incorrect TIN,
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See Exempt payee code on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See Exemption from FATCA reporting code on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; do not leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. Individual. Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

- b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.
- c. Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.
- d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.
- e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation, If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt pavee code

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
 - 2-The United States or any of its agencies or instrumentalities
- $3-\!A$ state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
 - 5-A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- .7—A futures commission merchant registered with the Commodity Futures Trading Commission
 - 8-A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
 - 10-A common trust fund operated by a bank under section 584(a)
 - 11 A financial institution
- 12-A middleman known in the investment community as a nominee or custodian
- 13-A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
- B-The United States or any of its agencies or instrumentalities
- C-A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
 - G-A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
 - I-A common trust fund as defined in section 584(a)
 - J-A bank as defined in section 581
 - K-A broker
 - L-A trust exempt from tax under section 664 or described in section 4947(a)(1)
 - M-A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- **3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.
- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:						
roi tilis type of account:	GIVE HAIRE AND SSN OI.						
Individual Two or more individuals (joint account)	The individual The actual owner of the account or, if combined funds, the first individual on the account'						
Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²						
a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee' The actual owner'						
Sole proprietorship or disregarded entity owned by an individual	The owner ³						
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i) (A))	The grantor*						
For this type of account:	Give name and EIN of:						
7. Disregarded entity not owned by an individual	The owner						
8. A valid trust, estate, or pension trust	Legal entity						
Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation						
Association, club, religious, charitable, educational, or other tax- exempt organization	The organization						
11. Partnership or multi-member LLC	The partnership						
12. A broker or registered nominee	The broker or nominee						
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity						
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i) (B))	The trust						

List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 2.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- · Protect your SSN.
- Ensure your employer is protecting your SSN, and
- · Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

² Circle the minor's name and furnish the minor's SSN.

Form W-9 (Rev. 12-2011)

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- . The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
 - 2. The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- 4. The type and amount of income that qualifies for the exemption from tax.
- 5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester,
- 2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
 - 3. The IRS tells the requester that you furnished an incorrect TIN,
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see Special rules for partnerships on page 1.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

Partnership, C Corporation, or S Corporation. Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA) name" on the "Business name/disregarded entity name" line.

Disregarded entity. Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the "Name" line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the "Business name/disregarded entity name" line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter "P" for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701–3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line.

Form W-9 (Rev. 12-2011) Page **3**

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/ disregarded entity name" line.

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

- 1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
 - 2. The United States or any of its agencies or instrumentalities,
- 3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
- A foreign government or any of its political subdivisions, agencies, or instrumentalities. or
- 5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

- 6. A corporation,
- 7. A foreign central bank of issue,
- 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States.
- 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
 - 10. A real estate investment trust,
- 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
 - 12. A common trust fund operated by a bank under section 584(a),
 - 13. A financial institution,
- 14. A middleman known in the investment community as a nominee or custodian, or
- 15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 1	Generally, exempt payees 1 through 7 ²

See Form 1099-MISC, Miscellaneous Income, and its instructions.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see How to get a TIN below

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see Exempt Payee on page 3.

Signature requirements. Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

- Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.
 You must give your correct TIN, but you do not have to sign the certification
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- 3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.

2016 Withholding Exemption Certificate

590

ın	e payee completes this form and submits it to the withholding agent. The withholding age	nt keeps	this fo	orm with their records.
Wi	thholding Agent			
Nar	ne			
Pay	/ee			
Nar	ne	SSN or IT	rin □ F	EIN CA Corp no. CA SOS file no.
Ado	iress (apt./ste., room, PO box, or PMB no.)		_	
City	(If you have a foreign address, see instructions.)		State	ZIP code
_				
	emption Reason			
	eck only one reason box below that applies to the payee. checking the appropriate box below, the payee certifies the reason for the exemption from	the Califo	rnia ir	ncome tax withholding
	uirements on payment(s) made to the entity or individual.	alo oallo	iiia ii	loome tax with lolding
	Individuals — Certification of Residency: I am a resident of California and I reside at the address shown above. If I become a notify the withholding agent. See instructions for General Information D, Definitions.	nonreside	nt at a	any time, I will promptly
	Corporations: The corporation has a permanent place of business in California at the address show California Secretary of State (SOS) to do business in California. The corporation will corporation ceases to have a permanent place of business in California or ceases to the withholding agent. See instructions for General Information D, Definitions.	file a Cali	fornia	tax return. If this
	Partnerships or Limited Liability Companies (LLCs): The partnership or LLC has a permanent place of business in California at the addre California SOS, and is subject to the laws of California. The partnership or LLC will fi or LLC ceases to do any of the above, I will promptly inform the withholding agent. For partnership (LLP) is treated like any other partnership.	le a Califo	rnia t	ax return. If the partnership
	Tax-Exempt Entitles: The entity is exempt from tax under California Revenue and Taxation Code (R&TC) S Internal Revenue Code Section 501(c) (insert number). If this entity ceases to the withholding agent. Individuals cannot be tax-exempt entities.	Section 23 be exemp	3701 _ pt fror	(insert letter) or n tax, I will promptly notify
	Insurance Companies, Individual Retirement Arrangements (IRAs), or Qualified Per The entity is an insurance company, IRA, or a federally qualified pension or profit-sha			aring Plans:
	California Trusts: At least one trustee and one noncontingent beneficiary of the above-named trust is a California fiduciary tax return. If the trustee or noncontingent beneficiary becomes a notify the withholding agent.			
	Estates — Certification of Residency of Deceased Person: I am the executor of the above-named person's estate or trust. The decedent was a Country trust will file a California fiduciary tax return.	California	reside	ent at the time of death.
	Nonmilitary Spouse of a Military Servicemember: I am a nonmilitary spouse of a military servicemember and I meet the Military Spous requirements. See instructions for General Information E, MSRRA.	e Resider	ncy Ro	elief Act (MSRRA)
CE	RTIFICATE OF PAYEE: Payee must complete and sign below.			
	learn about your privacy rights, how we may use your information, and the consequences for ftb.ca.gov and search for privacy notice . To request this notice by mail, call 800.852.57		viding	the requested information,
Un cor	der penalties of perjury, I hereby certify that the information provided in this document is, to rect. If conditions change, I will promptly notify the withholding agent.	the best	of my	knowledge, true and
Тур	e or print payee's name and title		Telepl	none ()
Pav	/ee's signature ▶		D-4-	

2016 Instructions for Form 590

Withholding Exemption Certificate

References in these instructions are to the California Revenue and Taxation Code (R&TC).

General Information

Registered Domestic Partners (RDP) – For purposes of California income tax, references to a spouse, husband, or wife also refer to a Registered Domestic Partner (RDP) unless otherwise specified. For more information on RDPs, get FTB Pub. 737, Tax Information for Registered Domestic Partners.

A Purpose

Use Form 590, Withholding Exemption Certificate, to certify an exemption from nonresident withholding.

Form 590 does not apply to payments of backup withholding. For more information, go to ftb.ca.gov and search for backup withholding.

Form 590 does not apply to payments for wages to employees. Wage withholding is administered by the California Employment Development Department (EDD). For more information, go to edd.ca.gov or call 888,745.3886.

Do not use Form 590 to certify an exemption from withholding if you are a Seller of California real estate. Sellers of California real estate use Form 593-C, Real Estate Withholding Certificate, to claim an exemption from the real estate withholding requirement.

The following are excluded from withholding and completing this form:

- The United States and any of its agencies or instrumentalities.
- A state, a possession of the United States, the District of Columbia, or any of its political subdivisions or instrumentalities.
- A foreign government or any of its political subdivisions, agencies, or instrumentalities.

B Income Subject to Withholding

California Revenue and Taxation Code (R&TC) Section 18662 requires withholding of income or franchise tax on payments of California source income made to nonresidents of California.

Withholding is required on the following, but is not limited to:

- Payments to nonresidents for services rendered in California.
- Distributions of California source income made to domestic nonresident partners, members, and S corporation shareholders and allocations of California source income made to foreign partners and members.
- Payments to nonresidents for rents if the payments are made in the course of the withholding agent's business.

- Payments to nonresidents for royalties from activities sourced to California.
- Distributions of California source income to nonresident beneficiaries from an estate or trust.
- Endorsement payments received for services performed in California.
- Prizes and winnings received by nonresidents for contests in California.

However, withholding is optional if the total payments of California source income are \$1,500 or less during the calendar year.

For more information on withholding get FTB Pub. 1017, Resident and Nonresident Withholding Guidelines. To get a withholding publication, see Additional Information.

C Who Certifies this Form

Form 590 is certified by the payee. California residents or entities exempt from the withholding requirement should complete Form 590 and submit it to the withholding agent before payment is made. The withholding agent is then relieved of the withholding requirements if the agent relies in good faith on a completed and signed Form 590 unless notified by the Franchise Tax Board (FTB) that the form should not be relied upon.

An incomplete certificate is invalid and the withholding agent should not accept it. If the withholding agent receives an incomplete certificate, the withholding agent is required to withhold tax on payments made to the payee until a valid certificate is received. In lieu of a completed exemption certificate, the withholding agent may accept a letter from the payee as a substitute explaining why they are not subject to withholding. The letter must contain all the information required on the certificate in similar language, including the under penalty of perjury statement and the pavee's taxpaver identification number. The withholding agent must retain a copy of the certificate or substitute for at least four years after the last payment to which the certificate applies, and provide it upon request to the FTB.

If an entertainer (or the entertainer's business entity) is paid for a performance, the entertainer's information must be provided. **Do not** submit the entertainer's agent or promoter information.

The grantor of a grantor trust shall be treated as the payee for withholding purposes. Therefore, if the payee is a grantor trust and one or more of the grantors is a nonresident, withholding is required. If all of the grantors on the trust are residents, no withholding is required. Resident grantors can check the box on Form 590 labeled "Individuals — Certification of Residency."

D Definitions

For California non-wage withholding purposes, **nonresident** includes all of the following:

- Individuals who are not residents of California.
- Corporations not qualified through the California Secretary of State (CA SOS) to do business in California or having no permanent place of business in California.
- Partnerships or limited liability companies (LLCs) with no permanent place of business in California.
- Any trust without a resident grantor, beneficiary, or trustee, or estates where the decedent was not a California resident,

Foreign refers to non-U.S.

For more information about determining resident status, get FTB Pub. 1031, Guidelines for Determining Resident Status. Military servicemembers have special rules for residency. For more information, get FTB Pub. 1032, Tax Information for Military Personnel.

Permanent Place of Business:

A corporation has a permanent place of business in California if it is organized and existing under the laws of California or it has qualified through the CA SOS to transact intrastate business. A corporation that has not qualified to transact intrastate business (e.g., a corporation engaged exclusively in interstate commerce) will be considered as having a permanent place of business in California only if it maintains a permanent office in California that is permanently staffed by its employees.

E Military Spouse Residency Relief Act (MSRRA)

Generally, for tax purposes you are considered to maintain your existing residence or domicile. If a military servicemember and nonmilitary spouse have the same state of domicile, the MSRRA provides:

- A spouse shall not be deemed to have lost a residence or domicile in any state solely by reason of being absent to be with the servicemember serving in compliance with military orders.
- A spouse shall not be deemed to have acquired a residence or domicile in any other state solely by reason of being there to be with the servicemember serving in compliance with military orders.

Domicile is defined as the one place:

- Where you maintain a true, fixed, and permanent home.
- To which you intend to return whenever you are absent.

A military servicemember's nonmilitary spouse is considered a nonresident for tax purposes if the servicemember and spouse have the same domicile outside of California and the spouse is in California solely to be with the servicemember who is serving in compliance with Permanent Change of Station orders.

California may require nonmilitary spouses of military servicemembers to provide proof that they meet the criteria for California personal income tax exemption as set forth in the MSRRA.

Income of a military servicemember's nonmilitary spouse for services performed in California is not California source income subject to state tax if the spouse is in California to be with the servicemember serving in compliance with military orders, and the servicemember and spouse have the same domicile in a state other than California.

For additional information or assistance in determining whether the applicant meets the MSRRA requirements, get FTB Pub. 1032.

Specific Instructions

Payee Instructions

Enter the withholding agent's name.

Enter the payee's information, including the taxpayer identification number (TIN) and check the appropriate TIN box.

You must provide an acceptable TIN as requested on this form. The following are acceptable TINs: social security number (SSN); individual taxpayer identification number (ITIN); federal employer identification number (FEIN); California corporation number (CA Corp no.); or CA SOS file number.

Private Mail Box (PMB) – Include the PMB in the address field. Write "PMB" first, then the box number. Example: 111 Main Street PMB 123.

Foreign Address – Follow the country's practice for entering the city, county, province, state, country, and postal code, as applicable, in the appropriate boxes. **Do not** abbreviate the country name.

Exemption Reason — Check the box that reflects the reason why the payee is exempt from the California income tax withholding requirement.

Withholding Agent Instructions

Keep Form 590 for your records. The certification remains valid for 5 years or until the payee's status changes. **Do not** send this form to the FTB unless it has been specifically requested.

For more information, contact Withholding Services and Compliance, see Additional Information.

The payee must notify the withholding agent if any of the following situations occur:

- The individual payee becomes a nonresident.
- The corporation ceases to have a permanent place of business in California or ceases to be qualified to do business in California.
- The partnership ceases to have a permanent place of business in California.
- The LLC ceases to have a permanent place of business in California.
- The tax-exempt entity loses its tax-exempt status.

If any of these situations occur, then withholding may be required. For more information, get Form 592, Resident and Nonresident Withholding Statement, Form 592-B, Resident and Nonresident Withholding Tax Statement, and Form 592-V, Payment Voucher for Resident and Nonresident Withholding.

Additional Information

For additional information or to speak to a representative regarding this form, call the Withholding Services and Compliance telephone service at:

Telephone: 888.792.4900

916.845.4900

916.845.9512

OR write to:

Fax:

WITHHOLDING SERVICES AND COMPLIANCE MS F182 FRANCHISE TAX BOARD PO BOX 942867 SACRAMENTO CA 94267-0651

You can download, view, and print California tax forms and publications at **ftb.ca.gov**.

OR to get forms by mail write to:

TAX FORMS REQUEST UNIT FRANCHISE TAX BOARD PO BOX 307

RANCHO CORDOVA CA 95741-0307

For all other questions unrelated to withholding or to access the TTY/TDD numbers, see the information below.

Internet and Telephone Assistance

Website: ftb.ca.gov

Telephone: 800.852.5711 from within the

United States

916.845.6500 from outside the

United States

TTY/TDD: 800.822.6268 for persons with

hearing or speech impairments

Asistencia Por Internet y Teléfono

Sitio web: ftb.ca.gov

Teléfono: 800.852.5711 dentro de los

Estados Unidos

916.845.6500 fuera de los Estados

Unidos

TTY/TDD: 800.822.6268 para personas con

discapacidades auditivas

o del habla

- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

what Name and Number 10	
For this type of account:	Give name and SSN of:
Individual Two or more individuals (joint account)	The individual The actual owner of the account or, if combined funds, the first individual on the account '
 Custodian account of a minor (Uniform Gift to Minors Act) 	The minor ²
a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee 1
b. So-called trust account that is not a legal or valid trust under state law	The actual owner 1
Sole proprietorship or disregarded entity owned by an individual	The owner ³
 Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A)) 	The grantor*
For this type of account:	Give name and EIN of:
Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN.
- . Ensure your employer is protecting your SSN, and
- · Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card. bank, or other financial accounts,

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: *spam@uce.gov* or contact them at *www.ftc.gov/idtheft* or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 1.

^{*}Note. Grantor also must provide a Form W-9 to trustee of trust.

Instructions for Form 590

Withholding Exemption Certificate

References in these instructions are to the California Revenue and Taxation Code (R&TC).

What's New

Backup Withholding — Beginning on or after January 1, 2010, with certain limited exceptions, payers that are required to withhold and remit backup withholding to the Internal Revenue Service (IRS) are also required to withhold and remit to the Franchise Tax Board (FTB). The California backup withholding rate is 7% of the payment. For California purposes, dividends, interests, and any financial institutions release of loan funds made in the normal course of business are exempt from backup withholding. For additional information on California backup withholding, go to ftb.ca.gov and search for backup withholding.

If a payee has backup withholding, the payee must contact the FTB to provide a valid Taxpayer Identification Number (TIN) before filing a tax return. The following are acceptable TINs: social security number (SSN); individual taxpayer identification number (ITIN); federal employer identification number (FEIN); California corporation number (CA Corp No.); or Secretary of State (SOS) file number. Failure to provide a valid TIN will result in the denial of the backup withholding credit. For more information go to ftb.ca.gov and search for backup withholding.

General Information

For purposes of California income tax, references to a spouse, husband, or wife also refer to a Registered Domestic Partner (RDP) unless otherwise specified. For more information on RDPs, get FTB Pub. 737, Tax Information for Registered Domestic Partners.

Private Mail Box (PMB) — Include the PMB in the address field. Write "PMB" first, then the box number. Example: 111 Main Street PMB 123.

Foreign Address – Enter the information in the following order: City, Country, Province/ Region, and Postal Code. Follow the country's practice for entering the postal code. **Do not** abbreviate the country's name.

A Purpose

Use Form 590, Withholding Exemption Certificate, to certify an exemption from nonresident withholding. California residents or entities should complete and present Form 590 to the withholding agent. The withholding agent is then relieved of the withholding requirements if the agent relies in good faith on a completed and signed Form 590 unless told by the FTB that the form should not be relied upon.

The following are excluded from withholding and completing this form:

 The United States and any of its agencies or instrumentalities

- A state, a possession of the United States, the District of Columbia, or any of its political subdivisions or instrumentalities
- A foreign government or any of its political subdivisions, agencies, or instrumentalities

Important – This form cannot be used for exemption from wage and real estate withholding.

- If you are an employee, any wage withholding questions should be directed to the FTB General Information number, 800.852.5711. Employers should call 888.745.3886 or go to www.edd.ca.gov.
- Sellers of California real estate use Form 593-C, Real Estate Withholding Certificate, to claim an exemption from real estate withholding.

B Requirement

R&TC Section 18662 requires withholding of income or franchise tax on payments of California source income made to nonresidents of California.

Withholding is required on the following, but is not limited to:

- Payments to nonresidents for services rendered in California.
- Distributions of California source income made to domestic nonresident S corporation shareholders, partners and members and allocations of California source income made to foreign partners and members.
- Payments to nonresidents for rents if the payments are made in the course of the withholding agent's business.
- Payments to nonresidents for royalties with activities in California.
- Distributions of California source income to nonresident beneficiaries from an estate or trust
- Prizes and winnings received by nonresidents for contests in California.

However, withholding is optional if the total payments of California source income are \$1,500 or less during the calendar year.

For more information on withholding get FTB Pub. 1017, Resident and Nonresident Withholding Guidelines. To get a withholding publication see General Information H, Publications, Forms, and Additional

C Who Certifies this Form

Form 590 is certified by the payee. An incomplete certificate is invalid and the withholding agent should not accept it. If the withholding agent receives an incomplete certificate, the withholding agent is required to withhold tax on payments made to the payee

until a valid certificate is received. In lieu of a completed certificate on the preprinted form, the withholding agent may accept as a substitute certificate a letter from the payee explaining why the payee is not subject to withholding. The letter must contain all the information required on the certificate in similar language, including the under penalty of perjury statement and the payee's taxpayer identification number. The withholding agent must retain a copy of the certificate or substitute for at least four years after the last payment to which the certificate applies, and provide it upon request to the Franchise Tax Board.

For example, if an entertainer (or the entertainer's business entity) is paid for a performance, the entertainer's information must be provided. **Do not** submit the entertainer's agent or promoter information.

The grantor of a grantor trust shall be treated as the payee for withholding purposes. Therefore, if the payee is a grantor trust and one or more of the grantors is a nonresident, withholding is required. If all of the grantors on the trust are residents, no withholding is required. Resident grantors can check the box on Form 590 labeled "Individuals — Certification of Residency."

D Who is a Resident

A California resident is any individual who is in California for other than a temporary or transitory purpose or any individual domiciled in California who is absent for a temporary or transitory purpose.

An individual domiciled in California who is absent from California for an uninterrupted period of at least 546 consecutive days under an employment-related contract is considered outside California for other than a temporary or transitory purpose.

An individual is still considered outside California for other than a temporary or transitory purpose if return visits to California do not total more than 45 days during any taxable year covered by an employment contract.

This provision does not apply if an individual has income from stocks, bonds, notes, or other intangible personal property in excess of \$200,000 in any taxable year in which the employment-related contract is in effect,

A spouse/RDP absent from California for an uninterrupted period of at least 546 days to accompany a spouse/RDP under an employment-related contract is considered outside of California for other than a temporary or transitory purpose.

Generally, an individual who comes to California for a purpose which will extend over a long or indefinite period will be considered a resident. However, an individual who comes to perform a particular contract of short duration will be considered a nonresident.

For assistance in determining resident status. get FTB Pub. 1031, Guidelines for Determining Resident Status, and FTB Pub. 1032, Tax Information for Military Personnel, or call the FTB at 800.852.5711 or 916.845.6500.

Military Spouse Residency Relief Act (MSRRA)

Generally, for tax purposes you are considered to maintain your existing residence or domicile. If a military servicemember and nonmilitary spouse have the same state of domicile, the MSRRA provides:

- · A spouse shall not be deemed to have lost a residence or domicile in any state solely by reason of being absent to be with the servicemember serving in compliance with military orders.
- A spouse shall not be deemed to have acquired a residence or domicile in any other state solely by reason of being there to be with the servicemember serving in compliance with military orders,

Domicile is defined as the one place:

- Where you maintain a true, fixed, and permanent home
- To which you intend to return whenever you are absent

A military servicemember's nonmilitary spouse is considered a nonresident for tax purposes if the servicemember and spouse have the same domicile outside of California and the spouse is in California solely to be with the servicemember who is serving in compliance with Permanent Change of Station orders (Note: California may require nonmilitary spouses of military servicemembers to provide proof that they meet the criteria for California personal income tax exemption as set forth in the MSRRA).

Income of a military servicemember's nonmilitary spouse for services performed in California is not California source income subject to state tax if the spouse is in California to be with the servicemember serving in compliance with military orders, and the servicemember and spouse have the same domicile in a state other than California.

For additional information or assistance in determining whether the applicant meets the MSRRA requirements, get FTB Pub. 1032.

What is a Permanent Place of Business

A corporation has a permanent place of business in California if it is organized and existing under the laws of California or if it is a foreign corporation qualified to transact intrastate business by the SOS. A corporation that has not qualified to transact intrastate business (e.g., a corporation engaged exclusively in interstate commerce) will be considered as having a permanent place of business in California only if it maintains a permanent office in California that is permanently staffed by its employees.

Withholding Agent

Keep Form 590 for your records. Do not send this form to the FTB unless it has been specifically requested.

For more information, contact Withholding Services and Compliance, see General Information H

The payee must notify the withholding agent if any of the following situations occur:

- The individual payee becomes a nonresident.
- The corporation ceases to have a permanent place of business in California or ceases to be qualified to do business in California.
- The partnership ceases to have a permanent place of business in California.
- The LLC ceases to have a permanent place of business in California.
- The tax-exempt entity loses its tax-exempt

The withholding agent must then withhold and report the withholding using Form 592, Resident and Nonresident Withholding Statement, and remit the withholding using Form 592-V. Payment Voucher for Resident and Nonresident Withholding, Form 592-B. Resident and Nonresident Withholding Tax Statement, is retained by the withholding agent and a copy is given to the payee.

Publications, Forms, and Additional Information

You can download, view, and print California tax forms and publications at ftb.ca.gov.

To have publications or forms mailed to you or to get additional nonresident withholding information, contact the Withholding Services and Compliance.

WITHHOLDING SERVICES AND **COMPLIANCE MS F182** FRANCHISE TAX BOARD PO BOX 942867 **SACRAMENTO CA 94267-0651**

Telephone: 888.792.4900 916.845.4900

916.845.9512 Fax:

For all other questions unrelated to withholding or to access the TTY/TDD numbers, see the information below.

Internet and Telephone Assistance

Website: ftb.ca.gov Telephone: 800.852.5711 from within the United States 916.845.6500 from outside the

United States 800.822.6268 for persons with TTY/TDD:

hearing or speech impairments

Asistencia Por Internet y Teléfono

Sitio web: Teléfono:

ftb.ca.gov 800.852.5711 dentro de los Estados Unidos

916.845.6500 fuera de los Estados

800.822.6268 personas con TTY/TDD:

discapacidades auditivas

y del habla



SEND TO: Southern California Edison, Business Incentives
P.O. Box 800, Rosemead, CA 91770-0800
E-mail: BusinessIncentives@sce.com | Fax: 626-633-3243

12/22/2017

Project Number: 318-17-0500990897

Project: Express Pending

Customer Reference: City of Commerce-Veterans Memorial Park

Trade Professional Information:
Corey Brophy
EcoGreen Solutions
27611 La Paz Rd, Suite A2
Laguna Niguel, CA 92677

Customer Information: Robert Lipton City of Commerce 2535 Commerce Way Commerce, CA 90040

RE: EXPRESS SOLUTIONS – Installation Report & Previous Participation Notification - SA #3-000-0106-53

Dear Corey Brophy & Robert Lipton:

Thank you for submitting an application for the Express Solution(s) you plan to install. We have completed an initial review of the planned solutions and determined the following solutions within the technology for which you are applying may not be eligible because of previous participation:

Site Address	Year	Technology	Solution Description	Quantity
n/a		n/a	n/a	n/a

Please note: Your projects contains Express solutions that will expire in 2018, and also includes Customized solutions and On-Bill Financing. This letter authorizes you to proceed with the installation of the Express solutions only. The approval to install your Customized solutions will be sent to you at a later date. Your On-Bill financing application will reflect the loan approval for the Express solutions only and will be processed after Express Installation Report (IR) and rebate approval. Separately, the financing for the Customized solutions will also be processed after Customized Installation Report (IR) approval and incentive approval.

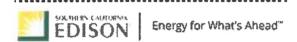
If you wish to proceed with the project, complete and sign the enclosed Express Solutions Installation Report (IR) after you have installed all eligible solutions. Then, to resume the application process, submit the following documents within 60 days of measure installation or the final invoice date, whichever is later:

- Your signed Express Solutions Installation Report (IR)
- Itemized proof of purchase, including invoice(s), with purchase and installation dates.
- Specification sheet(s) for the installed solution(s)/measure(s)
- SCE Product Location Form
- TradePro Participant Agreement (if applicable)
- Permit Closure for HVAC measures (if applicable)
- CA 590
- W9

If you submitted your Express Application and SCE received it before December 2, 2017, you must submit the Installation Report no later than March 2, 2018. All 2017 Express Applications for which the IR is not received by March 2, 2018 will be cancelled.

Upon receipt of these documents, we will confirm your eligibility. You may be contacted if information is missing or incomplete. After successful review, SCE will provide the appropriate incentive to you or your designated payee.

If you have any questions, please contact your SCE Account Representative. You may also call us at (866) 635-6015 Monday through Friday, from 8:00 a.m. to 5:00 p.m., or send an e-mail to **BusinessIncentives@sce.com**. Please have your project number available for reference when you call, or include it in your e-mail.





Energy Management Solutions Incentives

Express Installation Report

INSTRUCTIONS: After your Proposed Express Solutions project is installed and operational, enter the project installation date in the field provided. Review the information from your original Incentive Application below under Sections 1-4. If nothing has changed, complete and sign Section 9 on this Installation Report (IR) Form and submit it to SCE at one of the addresses below. If any information has changed on your application since you sent it to SCE, indicate the change on Section 5-8 of this form, sign Section 9 and return both pages to SCE.

Business Incentives

E-mail: BusinessIncentives@sce.com

	P.O. E	Box 800 nead, CA 91770-				ax: (626) 633 uestions: (62		-6015		
	17-0500990897 000-0106-53		<u>NOTE</u> :	comple		oject for more than the Multiple Site				
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City of Comm						Robert Lipton				
2535 Commer	Company/Busine	sss Name				Contact Name Commerce		CA	Title	90040
323-887-4450	Company/Business M	ailing Address	Facili	tiesSu	pervisor	@CA.US		State		Zip
	Contact Phone Number						tact E-Mail Add	ress		
Section 2 - Cu	istomer's Trade Pro	fessional (From Or	iginal App	olicatio	n)					
	Corey B							een Solutions		
	27611 La Paz I					Laguna Nigue	el	CA		92677 Zip
	949-364-4800				5	ubmissions@		en-solutions		
	ustomer's Trade Professional Phone press Solutions* <i>(Fr</i>		on)			Customer's Trade	Professional E	-Mail Address		
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Section 5 - Cu	stomer Information	(Use this box to up	date Cus	tomer	informatio	on if different fro	om abov	re)		
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Compeny/Business Mailin	g Address				City			State	Zip	
Contact Phone Number			Contact E-l	Mail Addres	s					

UPN#	318-17-0500990897	
SA#	000-0106-53	

Section 6 - Cu	stomer's Trade Professional (Us	se this box	to update Tr	ade Profess	onal information	n if differe	ent from	page 1)	
Customer's Trade Professi				Contact Name					
Customer's Trade Profess	onal Mailing Address			City			State	Zip	
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the Application pa	ackage.								
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Signature of Contractor		Name	(please print)			Date			



Commerce, City of

Veterans Memerial Park 6364 Zindell Ave.

Commerce CA, 90040 3-000-0106-53

Customer Contact: Robert Lipton EcoGreen Sales Rep: Nick Rugulo

Title of Contact: Parks & Rec Director Customer Phone: 323-887-4450

Approx Building Size

0.15 KWh **Energy Rate**





Annual Savings In Reference to Quote # 501050 KWh Usage Saved Suggested Replacements & Savings # of Watts/bulbs | Usa Saved Fixtures Watts/Fix Replacement Bulb Skip Skip Skip Skip Skip Skip Skip 왕왕 Ski Ski Skip Skip Skip Customer Email: Director-ParksRecreation@cl.commerce.ca.us Recessed square cans; unknown wattage Area light mounted under awning Wall packs by outdoor basketball High mounted AL's; no access Haliway to Handball
Haliway to Basketball
Halway to Basketball
Basement Men's RR
Basement Women's RR Recessed cans under awning 3-arm poles mounted floods Wallpacks on bathroom hut Wallpacks by picnic tables Lobby Storage Men's Bathroom Women's Bathroom 2-arm pole mounted AL's Back Stairs to Basketbail Basement Men's RR Basement Women's RR Storage Meeting Room Upstairs Storage Racquetball Gallery Arts + Crafts - 109 Arts + Crafts - 109 **Upstairs Storage** Lobby - Men's RR **Upstairs Storage** Men's Bathroom Exercise Room Unisex Storage Meeting Room Handball - 205 Hallway Hallway Storage Hallway Storage Storage Storage Hallway Office Lobby Hours-Day / Yr EXISTING Operating 2 Watts/Fix Fixture **Existing Bulb** 뜅

ENERGY AUDIT

Commerce, City of

Veterans Memerial Park

6364 Zindell Ave.

Commerce CA, 90040

3-000-0106-53

Title of Contact: Parks & Rec Director Customer Contact: Robert Lipton

EcoGreen Sales Rep: Nick Rugulo

Customer Phone: 323-887-4450

Customer Email: Director-ParksRecreation@ci.commerce.ca.us

0.15 KWh - SF **Energy Rate** Approx Building Size



\$5,141.23 **Annual Savings** 15,579 9,348 6,232 34,275 KWh Saved 3800 w 70.4% 2280 w 70.4% 1520 w 70.4% Usage Saved 8360 w 70.4% Suggested Replacements & Savings Watts/bulbs Saved Fixtures 320 w 320 w 320 w 320 w Watts/Fix Replacement Bulb Skip
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LED Flood
LED Flood Momen's Basthroom
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Outdoor B-Ball Pole Al's; 6 poles, 2 fixtures missin
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ENERGY AUDIT

Commerce, City of

Veterans Memerial Park

6364 Zindell Ave.

Commerce CA, 90040

3-000-0106-53

Customer Email: Director-ParksRecreation@cl.commerce.ca.us

Title of Contact: Parks & Rec Director Customer Phone: 323-887-4450

Customer Contact: Robert Lipton EcoGreen Sales Rep: Nick Rugulo

Approx Building Size

0.15 KWh **Energy Rate**



Watts/bulbs Usage Saved Savings Per Month #VALUE! **Total Savings Over 5 Years #VALUE! Estimated Energy Rebate \$5,234.70 IRS Tax Deduction 179D Available \$0.00 ***Estimated Federal Tax Savings Per Month Btu Savings Per Month Savings Per Avg. Est. Life of LED \$49,425.17 **Loan Payment #VALUE! **Loan Payment #VALUE!	### Savings Saved Saved Saved	Usage Saved Saving Saving Savings Savings Savings Vings A Vings A Vings A Vings A Vings Ext Saving Tederal Saving Tederal Saving Tederal Saving Saving Saving Saving	# of the properties of the pro	Appr Replaceme	Suggester Sulb Watts/Fix # of # o	######################################	Location Total Project Cost After Rebate ****Payback Period Yrs Average Estimated Life of LED Average Estimated Life of		15,960 Watts Saved 7.9 Avg Annual KWh Saved 7.9 Avg Annual Res Powered to Annual CO2 Savings (MT) 70.4% Average Electrical Savings ROI During Payback Payback Period Yrs W/Ret Payback Period 975 9,359 9,359 9,359	Existing Bulb Totals 15,960 Watts Saved 65,434 Annual KWh 7.9 Avg Annual CO2: 70.4% Average Elec #VALUE! ROI During P #VALUE! Payback Peri #VALUE! #VALUE! #VALUE! Payback Peri #VALUE! Payback
** Reflects 6% per year cost of energy increase + Bulb Replacement *** Based on IRS 179D Deduction @ 35% federal tax rate ****Payback Period Yrs = (Total Project Cost - Rebate) / Estimated Savings per Year ****Payback Period Yrs =(Total Project Cost - Rebate - Tax Deduction - Tax Savings //(Estimated Savings Per Yrs)	/ear cost of energy J on IRS 179D Dedu ject Cost - Rebate)	*** Base (Total Provings)/(Estin	** Reflec *Payback Period Yrs : rte - Tax Deduction - Tax Ss	*** roject Cost - Reba	Period Yrs =(Total P	^Payback I	#VALUE! #VALUE! #VALUE! #VALUE!	#VALUE! #VALUE! #VALUE!	9,359 9,359 9,359 \$46,792.80	
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	an Payment	¥					İ	tential Write-Off Amoun	Po	
\$49,425.17	. Life of LED	Avg. Est	nt Savings Per /	teplaceme	Bulb R			Fully Comprehensive^	back Period Yrs	Pay
\$1,350.91	igs Per Year	nt Savir	ulb Replaceme	8			: Savings	W/Rebates & Federal Tax	back Period Yrs	Pay
7	s Per Month	Saving	Btu				o Replacement Savings	W/ Rebates & Yearly Bulb	back Period Yrs	Pay
\$0.00	Tax Savings	Federal	***Estimated				ites/Program	- Out of Pocket - No Rebai	back Period Yrs	Pay
\$0.00	9D Available	tion 17	IRS Tax Deduc						During Payback	<u>5</u>
	ergy Rebate	ated Er	Estim					avings	rage Electrical S	0.4% Ave
	fter 10 Years	vings A	**Total Sa			0.13	Average Estimated Life of Existing Lighting	(MT)	ual CO2 Savings	49 Ann
	Over 5 Years	avings	**Total S			2.00	Average Estimated Life of LED	rered by Savings	Annual Res Pov	7.9 Avg
	ngs Per Year	rgy Savi	Ene			#VALUE!	****Payback Period Yrs		ual KWh Saved	434 Ann
#VALUE!	s Per Month	Saving	oximate Energy	Appr		\$46,792.80	Total Project Cost After Rebate		ts Saved	960 Wat
\$9,815.07	65,434	70.4%	15960 w	21	W			239468	429	
Annual Savings	KWh Saved	Usage Saved	Watts/bulbs Saved	# of Fixtures	Watts/Fix	Replacement Bulb	Location	Operating Hours-Day / Yr		Wa
		vings	Replacements & Sa	Suggested				EXISTING		

Year 1
Year 2
Year 3
Year 4
Year 5
Totals



SEND TO: Southern California Edison, Business Incentives – OBF Program P.O. Box 800, Rosemead, CA 91770-0800 E-mail: BusinessIncentives@sce.com | Fax: 626-633-3243 Questions? (866) 635-6015

12/21/2017

Customer Information:

Robert Lipton City Of Commerce 2535 Commerce Way Commerce, CA 90040 **Trade Professional Information:**

Corey Brophy Ecogreen Solutions 27611 La Paz Rd Ste A2 Laguna Niguel, CA 92677-3999

RE: NOTICE OF ON-BILL FINANCING (OBF) APPLICATION APPROVAL AND PARTIAL FUNDING RESERVATION PROJECT NUMBER: 318-17-0500990897 SA#: 3-000-0106-53

Dear Robert Lipton and Corey Brophy:

Your On-Bill Financing Application has been reviewed and approved, and funding for your On-Bill Financing (OBF) Loan has been reserved for the Express portion of your project. You will receive a revised Loan Reservation when Customized portion of your project is approved.

An OBF Loan Reservation for the Express project has been established in the amount of \$40,844.40 and is subject to the following terms and conditions.

Terms and Conditions of Loan Reservation:

- The reserved amount has been calculated based on the results of the review and approval of your Energy Efficiency Project Application, and according to the provisions and methodology of the OBF Loan Term Calculation [LTC]. Since the loan reservation amount is based on an approved project proposal, it is an <u>estimate</u> of what the actual loan amount may be.
 - 1a. An OBF Loan Term Calculation [LTC] is attached.
- The actual loan amount will be calculated based on the results of the review and approval of your Energy Efficiency
 Project Installation Report, and according to the provisions and methodology of the OBF Loan Term Calculation
 [LTC]. Therefore, the actual amount of the OBF Loan may differ from the reserved amount presented above.
 - 2a. The actual amount of the OBF loan may be less than the reserved amount presented above.
 - 2b. The actual amount of the OBF loan shall not exceed the reserved amount presented above.
- 3. The expiration of the loan reservation shall be consistent with that of the project incentive.

Next Steps:

- You submit the completed Installation Report [IR] to SCE, and SCE will review it.
- SCE will calculate the actual final loan amount, based on the results of the IR approval, and the LTC provisions.
- SCE will issue 2 copies of the OBF Loan Agreement to you.
- You will sign, and have notarized, the Agreements and return to SCE.
- SCE will counter-sign the Agreements.
- SCE will provide you with 1 copy of the fully-executed Loan Agreement and will process the loan proceeds.

If you have any questions, please contact your SCE Account Representative. You may also call us at (866) 635-6015 Monday through Friday, from 8:00 a.m. to 5:00 p.m., or send an e-mail to **Businessincentives@sce.com**. Please have your Project Number available for reference when you call, or include it in your e-mail.

Sincerely.

Delia Williams

Program Manager - On Bill Financing Southern California Edison Company.

Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning SCE is the Federal Trade Commission, Equal Credit Opportunity, Washington DC 20580.

On-Bill Financing Program - Preliminary Loan Term Calculation (LTC1)

 Completion Date/Time:
 12/21/2017 1:54 PM

 Project Number:
 318-17-0500990897

 Service Account:
 3-000-0106-53

 Customer Number:
 1-0-000-1057

 Customer Account Number:
 2-00-437-0755

 OBF Application Receipt Date:
 9/7/2017

Project Type(s):

Market Segment:
Business Name:
Reference Name:
Address:
City, CA Zip:

Customized and Deemed
Government and Institutions
COMMERCE, CITY OF
COMMERCE -VETERANS MEMORIAL PARK
6364 ZINDELL AVE
COMMERCE, CA 90040

*** LTC1 ***

ACTUAL TERMS WILL BE CALCULATED BASED ON FINAL REVIEW AND VERIFICATION OF THE PROJECT INSTALLATION REPORT

LTC1 Reserved Amount Is \$40,844.40
First month payment is \$340.37
119 subsequent monthly payments \$340.37

PROJECT ECONOMIC SUMMARY		EXPLANATION
AVERAGE ELECTRIC BILLING RATE – past 12 months (Cents/kWh)	\$ 0.15916	Based on Billing History
ENERGY EFFICIENCY PROJECT SAVINGS		
B.1. Estimated Annual Kilowatt Hour Savings (kWh)	25,662.4	From Approved Project Application
B.2. Estimated Annual Dollar(\$) Savings B.3. Estimated Monthly Dollar(\$) Savings	\$ 4,084.43 \$ 340.37	Estimated Annual kWh Savings x Average Rate = \$ savings (B.1 x A) Estimated Monthly \$ Savings (B.2 / 12)
costs		
C.1. Estimated Total Project Cost	\$ 52,027.50	From Approved Project Application
C.2. Excess Project Cost	\$ - \$ 6.300.00	Based on 20% Basic Lighting Cap Rule From Approved Project Application
C.3. Estimated Total Rebate/Incentive C.4. Other	\$ 6,300.00	Tom Approved Frojest Application
C.5. Estimated Potential Loan Amount (Gross Amount)	\$ 45,727.50	(C.1) - (C.2) - (C.3) - (C.4)
C.6. LTC1 Reserved Amount C.7. LTC2 Reserved Amount	\$ 45,727.50	From LTC1 calculation following Approved Project Application
LOAN		
D.1. Gross Amount for Potential Financing	\$ 45,727.50	Lesser of (C.5) or (E.1.2) or (E.2.3) or other rules apply
D.2. Monthly Loan Repayment Amount D.3. Actual loan term (Months)	\$340.37 135	(B.3) Time required to repay loan in months (subject to exception analysis below)
D.4. Actual loan term (Years)	11.3	Time required to repay loan in years: (D.3) /12
LOAN LIMIT TESTS		
E.1. Market Segment Amount of Loan Test (Min/Max Loan Amount)		
E.1.1. Market Segment Minimum Loan Amount	\$ 5,000	Minimum Loan Amount per Service Account or Bundle
E.1.2. Market Segment Maximum Loan Amount	\$ 250,000	Com, Ind, Ag = \$100,000, G&I, Multifamily = \$250,000
E.1.3. Within Market Segment Limit?	Y	Is D.1 within loan amount limits Y/N?
E.2. Customer Loan Limit Test (Previous Loans for this Service Account)		
E.2.1. Service Account Loan Amount Limit	\$ 250,000	(E.1.2) or \$1M for G&I Facility
E.2.2. Previous Loans Reserved for this Service Account	\$ -	Total of previous OBF loans + reservations
E.2.3. Estimated Amount Eligible for Loans	\$ 250,000.00	(E.2.1) - (E.2.2), If < 0, then 0.
E.2.4. Within Available Amount?	Y	Is D.1. ≤ E.2.3. Y/N?
E.3. Length of Loan Test		
E.3.1. Loan Length Limit (months)	120	CIA = 60 months, G&I, Multifamily = 120 months
E.3.2. Within Loan Length Limit?	N	Is D.3 within limit Y/N?
E.4. Expected Useful Life (EUL)* Loan Length Limit Test		
E.4.1. Applicable Measure EUL (months)	120	EUL in months of measure with greatest kWh contribution
E.4.2. Within EUL Loan Length Limit?	Y	Is D.3 within limit Y/N?
E.5. EXCEPTION ANALYSIS (If any E.1 thru E.4. yields a "No")		Exception Analysis Loan Minimum Requirement Test
		Does the loan amount from Exception Analysis meet the \$5K loan minimum requirement? YES
E.5.1. First Payment Amount	\$ 340.37	
E.5.2. Subsequent Monthly Loan Repayment Amount	\$ 340.37 119	Based on minimum loan requirement of \$5K and supplement Exception Analysis, this amount qualifies for an estimated OE
E.5.3. Subsequent Monthly Payments E.5.4. Net Amount for Financing	\$ 40,844.40	loan.
*Expected Useful Life (EUL): Each measure is expected to perform satisfactorily for a period of time. An EUL for		A PARTY OF THE PARTY OF T



Energy Management Solutions Incentives

Express Installation Report

INSTRUCTIONS: After your Proposed Express Solutions project is installed and operational, enter the project installation date in the field provided. Review the information from your original Incentive Application below under Sections 1-4. If nothing has changed, complete and sign Section 9 on this Installation Report (IR) Form and submit it to SCE at one of the addresses below. If any information has changed on your application since you sent it to SCE, indicate the change on Section 5-8 of this form, sign Section 9 and return both pages to SCE.

Business Incentives

E-mail: BusinessIncentives@sce.com

	P.O.	hern California Ed Box 800 mead, CA 91770-0				ax: (626) 633-324 uestions: (626) 6		5		
	17-0500992135 000-0105-13	1	<u>NOTE</u> :	Solut	ions complete pleted Installati	ject for more than one and attach the Multiple on Report. lations were comple	Site Forn	n (www.sc	eonlineapp.c	
Section 1 - Cu	stomer Informatior	(From Original App	lication)							
City of Commo	erce					Robert Lipton				
0505 Cammar	Company/Busi	ness Name		7		Contact Name		04	Title	00040
2535 Commer	Company/Business	Mailing Address				Commerce		CA State		90040 Zip
323-887-4450			facilit	tiess	upervisor@	oci.commerce.ca				
Section 2 - Cu	Contact Phone Number stomer's Trade Pro	ofessional (From Orig	ginal App	olicat	ion)	Contact E-Mai	Address		-	
	EcoGreen Customer's Trade Profes						Corey B Contact Name			
	27611 LA Paz					Laguna Niguel	CONTROL (VAII)	CA		92677
	Customer's Trade Profes 949-364-6800					City	roon co	State		Zip
Ci	ustomer's Trade Professional Pho				<u>5u</u>	bmissions@ecog Customer's Trade Professio			.net	
Section 3 - Ex	press Solutions* (F	rom Original Application	n)							
Solution Code	Solution	Description			ription of Repla J., lighting type,	ced Equipment wattage, etc.)	Ins	er of Units stalled A X	Incentive \$ Per Unit	Incentive Total
LT-18911	68 to 90 Watt Exterior LED	Fixture 15 to <24 ft. with IAMS						5	75.00	375.00
LT-18911	68 to 90 Watt Exterior LED	Fixture 15 to <24 ft. with IAMS						2	75.00	150.00
LT-18912	91 to 113 Watt Exterior LED	Fixture 15 to <24 ft. with IAMS						3	75.00	225.00
LT-18912	91 to 113 Watt Exterior LED	Fixture 15 to <24 ft. with IAMS						3	75.00	225.00
LT-18917	14	ED Fixture 15 to <24 ft. with MS						7	225.00	1,575.00
LT-18917		ED Fixture 15 to <24 ft. with MS						20	225.00	4,500.00
LT-27397	68 to 90 Watt Exterior LED	fixture 24 to 40 ft. with IAMS						2	75.00	150.00
LT-30938	255 to 325 Watt Exterior LE	D fixture 24 to 40 ft. with IAMS					4	67	300.00	20,100.00
LT-73969		fixture 24 to 40 ft. with IAMS						2	75.00	150.00
		olutions please refer to the at				YOUR ESTIMA	ATED IN	ICENTIV	E TOTAL:	\$27,450.00
Section 4 - Pa	yment Information	(From Original Applica	tion)							
	of Payment:	Incentive C	heck to		de Pro					
	EcoGreen So									
27611 A De-	Payee-Customer/B	usiness Name				ention To (name on check)		C	Title	92677
ZIVII LA Faz	Company/Business	failing Address		_		aguna Niguel		C/ Sta		92077 Zip
949-364-6800					SUBM	IISSIONS@ECOGI	REEN-S	OLUTIO	NS.NET	
	Contact Phone Number		Contact E-I		ress	2222				
C. Tax Identi	fication Type:	Federal Tax ID/Employer ID Number	al Tax ID or (EIN)/Social		Number (SSN)	6823 Identification Number	er	Corpor	ration Tax State	us
D. Utility Bill	l Credit:	Exempt Reason								

3 - Service	2 -	Customer Account Number
	e this box to update Customer information if differ	The state of the second st
Contact Name	Tifle	
Company/Business Mailing Address	City	State Zip
Contact Phone Number	Contact E-Mail Address	

UPN#	318-17-0500992135	
SA#	000-0105-13	

Section 6 - Cus	stomer's Trade Professional (U	lse this bo	ox to update Ti	ade Professional	information if diffe	rent from	page 1)		
Customer's Trade Professi	onal Business Name			Contact Name					
Customer's Trade Protessional Mailing Address				City		State	Zp		
Curdomer's Trade Professional Phone Number Curdomer's Trade Professional E-Mail Address									
						- 20			
Section 7 - Express Solutions* (Use this box to update Express Solutions information if different from page 1)									
Refer to the Energy Management Solutions Guide or www.sceonliapp.com for Solution Codes, Solution Descriptions, Incentive Amounts and Program Equipment Eligibility Requirements. Then calculate your Express Solutions incentive total*.									
Solution Code	Solution Description		Descrip	tion of Replaced Equip	oment Ir	of Units	Incentive \$ Per Unit	Incentive Total \$	
Columni Couc	Columbia Description		(e.g., lighting type, wattage, etc.)		etc.)	A X	В	= C	
*If submitting more than 5 Express Solutions complete and attach the Express Solution page YOU of the Multiple Site/Solution Worksheet at www.sceonlineapp.com						IR ESTIMATED REVISED INCENTIVE TOTAL:			
					. u.t. fu	INCENT	IVE TOTAL:		
	ment Information (Use this both ment (Please check one)	x to updat	e Payment ini	ormation if differe	ent from page 1)	C. Tax Ide	entification	Type	
☐ Check to Customer (Complete B & C)						(Please check one)			
☐ Utility Bill Credit to Customer (Complete D) ☐ Check to 3rd Party (Complete B, C & E)						Federa	al Tax ID / Employ	yer ID Number (EIN)	
B. Payee Information									
Payee-Customer/Business Name Contact Name				Title		☐ Social	Security Number		
Company/Business Mailing Address City				State	Zp	Tax S	tatus (Pleas	se check one)	
					☐ Corporation/LLC				
Contact Phone Number	Contact E-Mail Address Individual/Sole Proprietor/General Part.						or/General Part.		
☐ Tax-Exempt, Non-profit									
D. Utility Bill Cre Service Account Nur	edit (Please complete this section if you pur mber	refer payment	in the form of a bill Customer Accou		record)		Exempt Re	eason	
3 - 2-									
E. Payment Release Authorization (Please complete this section if an Trade Professional is to receive the check)									
As the Customer, I am authorizing this payment of my incentive to the Third Party named in section B, above, and I understand that I will not be receiving the									
incentive check from SCE. I also understand that my release of this payment to the Trade Professional does not exempt me from the requirements outlined in the Application package.									
ord Approach pa									
Customer Name (please pri	nt)	Sinn	ature		Title		Date		
	allation and Operation Stateme		in the second				Duto		
	r Trade Professional above, certify								
	ing maintained to perform in confor ting requirements for this installation								
Name (Please print)		Sign	ature		Title		Date		
To be complet	ed only if you are requesting	an HVA	C Rebate:						
HVAC Permit (if required). If a permit and/or proof of permit closure is required for HVAC installation/replacement, I have provided the permit number and/or permit closure documentation. (If no permit is required, leave this section blank.)									
Permit # Agency 2. <u>Contractor Certification</u> . If a Contractor or Trade Professional was used for any HVAC installation/replacement, this section must be									
☐ By checking	y the contractor. ng this box, I certify I am a licensed	contractor	and have follow	ed applicable perm	itting requirements a	nd, if requir	ed, that the l	HVAC permit	
Information	above is correct.								
Signature of Contractor		Nam	e (please print)		Date				