



# Rhode Island C-PACE Application

Please fill out the following application form. Respondents must submit the completed application and all attachments through email to [application@RI-CPACE.com](mailto:application@RI-CPACE.com).

## For additional Information

Rhode Island C-PACE Program Manager

E-mail: [application@RI-CPACE.com](mailto:application@RI-CPACE.com)

Telephone: (401) 519-1648

Visit: <http://www.RI-CPACE.com>

Or contact us with any questions

All applicants are advised that any and all records (documents, correspondence, memoranda, etc.), regardless of the form provided, received or maintained by the Rhode Island Infrastructure Bank or any of its agents, may be a matter of public record and subject to release under the Rhode Island Access to Public Records Act (R.I. Gen. Laws §38-2-1 et seq.). The Rhode Island Infrastructure Bank does however have the right to redact any information which is exempt under the statute before releasing the documents. The exemptions that would most pertain to financing or grant applications include but are not limited to reports and statements of strategy or negotiation, trade secrets and commercial and financial information which is privileged or confidential pursuant to R.I. Gen. Laws §38-2-2. As such, we suggest that any portion of the application or materials provided by the applicant that contains such information (including for example, customer lists, processes, etc. or financial information) be clearly labeled with a legend or marking such as "Confidential information -- Not Public Record". This does not guarantee that the information so marked will necessarily be exempt from public release, as the Rhode Island Infrastructure Bank will make any final determination about which information is to be made available to the public, but this will be helpful in identifying any records which may be exempt.

## I. PROPERTY ELIGIBILITY *(check all that apply)*

Learn about C-PACE Eligibility Requirements in our [Program Guidelines](#).

- Property requires financing for energy improvements.
- Property is non-residential  
*(multi-family properties of five or more units are eligible).*
- Property is located in a participating C-PACE municipality  
*(see [participating municipalities list on website](#)).*
- Property is current on all property taxes and municipal assessments.
- Property is not in bankruptcy.
- Property is not in mortgage default.

## II. PROPERTY INFORMATION

### 1. Who is submitting this application?

a. Contact person \_\_\_\_\_

b. Email \_\_\_\_\_

c. I am a:

Building Owner

Contractor/Auditor/Project Developer

Building Manager

Capital Provider

Other: \_\_\_\_\_

### 2. Who is the property owner, i.e. building owner's corporate identity? (e.g. John Doe LLC)

\_\_\_\_\_

### 3. Property address

a. Street address line 1 \_\_\_\_\_

b. Street address line 2 \_\_\_\_\_

c. City \_\_\_\_\_

d. State **Rhode Island**

e. ZIP code \_\_\_\_\_

4. Property size \_\_\_\_\_ (gross square feet)

### 5. Property type

Office

Hotel

Industrial/Manufacturing

Non-Profit

Warehouse/Storage

Education

Healthcare  
(inpatient)

Retail

Multi-Family/Apartment  
(>5 Units)\*

Healthcare  
(outpatient)

Religious/Worship

Other \_\_\_\_\_

6. Do you have a mortgage on the property?

Yes

- a. Mortgage lender company \_\_\_\_\_
- b. Mortgage closing date \_\_\_\_\_
- c. Mortgage payments current (Yes/No) \_\_\_\_\_
- d. Principal outstanding \_\_\_\_\_
- e. Current monthly payment \_\_\_\_\_
- f. Interest rate (*fixed or variable*) \_\_\_\_\_
- g. Term of mortgage \_\_\_\_\_
- h. Amortization schedule \_\_\_\_\_
- i. Balloon date (*if applicable*) \_\_\_\_\_

No

7. What is the estimated value of the property?

- a. Appraised value \_\_\_\_\_
- b. Appraisal year \_\_\_\_\_
- c. Assessed value (*e.g. municipal assessment value*) \_\_\_\_\_
- d. Assessment year \_\_\_\_\_

8. Do you have clear title to the property with no encumbrances?

Yes

No

9. Are there any outstanding tax liens or notices of default?

Yes

No

10. When was the property acquired by the current owner(s)? \_\_\_\_\_

11. Other than the proposed project, are there any other major (>\$100,000) capex expenditures planned for the next 5 years? \_\_\_\_\_

12. Over the last 5 years, what has been the property's lowest and highest vacancy rate?

Low \_\_\_\_\_%

High \_\_\_\_\_%

### III. PROJECT INFORMATION

1. What type of project do you plan on financing?

Energy efficiency upgrade

Renewable energy system

(solar PV, solar thermal, cogeneration, fuel cell, biomass, geothermal, wind)

Other: \_\_\_\_\_

2. Describe the planned energy efficiency measures and/or renewable energy system in your proposed project

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3. What is the estimated cost of your project? \_\_\_\_\_

4. Have you selected a C-PACE Registered Contractor to design and/or install your project?

Yes

a. Contractor company \_\_\_\_\_

b. Contractor name \_\_\_\_\_

i. First name \_\_\_\_\_

ii. Last name \_\_\_\_\_

c. Contractor email \_\_\_\_\_

d. Contractor phone \_\_\_\_\_

No

5. Have you conducted a recent energy audit on the building?

No

Yes

ASHRAE Level I

ASHRAE Level II

ASHRAE Level III

Other: \_\_\_\_\_

6. Date of the energy audit \_\_\_\_\_

7. For renewable energy systems, has a feasibility study been prepared for the project?

Yes

No

8. Date of feasibility study \_\_\_\_\_

9. Have you contacted your utility for incentives, if applicable?

Yes

No

10. Have you selected a Capital Provider to finance your project?

Yes

a. Company name \_\_\_\_\_

b. Contact person

i. First name \_\_\_\_\_

ii. Last name \_\_\_\_\_

iii. Email \_\_\_\_\_

iv. Phone \_\_\_\_\_

c. Is the Capital Provider a C-PACE Qualified Capital Provider?    Yes    No    Unsure

No, I would like the Program Administrator to request financing term sheets from participating Qualified Capital Providers to support my selection.

Property Owner signature \_\_\_\_\_ Date \_\_\_\_\_

Property Owner printed name \_\_\_\_\_

Title \_\_\_\_\_

Company \_\_\_\_\_

Company address \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

## IV. MULTI-FAMILY/APARTMENT BUILDING INFORMATION

Fill in this section for multi-family/apartment buildings only

- a. Number of buildings in complex \_\_\_\_\_
- b. Number of units in complex \_\_\_\_\_
  - i. Rental units \_\_\_\_\_
  - ii. Owner-occupied units \_\_\_\_\_
- c. Year built \_\_\_\_\_
- d. Date of last major renovation \_\_\_\_\_
- e. Property condition

**Poor Condition** – significant capital improvements needed, including emergency repairs

**Good Condition** – systems generally work adequately; no immediate capital improvements needed or planned in the next 3 to 5 years

**Excellent Condition** – all systems work well; no major capital improvements needed or planned in the next 5 to 10 years; property could be described as new or “almost new” condition

f. Property Type (*check*)

- Rental
- Condo
- Co-op
- Congregate housing (*apartments or group accommodations that provide supportive services for residents, including the elderly and disabled*)

g. Affordability (*check all that apply*)

- Market rate housing
- Mixed income housing
- Privately financed affordable housing  
(*serves low-income tenants, but no public subsidies*)
- Subsidized affordable housing  
(*units are subsidized and rented to income-eligible tenants*)
- Public housing authority – HFA/State financed
- Public housing authority – HUD financed

h. Financial Structure (*check all that apply*)

- Privately financed (*Please provide mortgage holder information in Section II, Question 6*)
- Fannie Mae financing
- Freddie Mac financing
- FHA insured loans

- Other HUD financing (*please indicate type*)
- CMBS
- Low income housing (*tax credit financing*)
- Section 8 rental
- No debt on property
- Other (*please indicate type*) \_\_\_\_\_

**i. Utility Information:**

**i.** What is the source of heating fuel?

Oil

Natural Gas

Propane

Electric

Other (*please indicate*) \_\_\_\_\_

**ii.** Who pays the fuel bill?

Owner

Tenant

**iii.** Rough estimate of annual fuel bill \_\_\_\_\_

**iv.** What is the source of hot water?

Oil

Natural Gas

Propane

Electric

Other (*please indicate*) \_\_\_\_\_

**v.** Who pays the water bill?

Owner

Tenant

**vi.** Rough estimate of annual water bill \_\_\_\_\_

**vii.** Is electricity metered at the building or individual apartment level? \_\_\_\_\_

**viii.** Who pays the electric bill?

Owner

Tenant

**ix.** Rough estimate of annual electric bill \_\_\_\_\_



## V. DOCUMENTATION OF ABILITY TO MONETIZE FEDERAL TAX CREDITS ASSOCIATED WITH CLEAN ENERGY INSTALLATIONS

C-PACE applicants can apply the value of all relevant federal tax credits (including the Investment Tax Credit and MACRS depreciation benefits) towards their projects' estimated savings.

However, all applicants seeking to have the value of such tax benefits credited towards their projects' estimated savings must demonstrate the ability to monetize those benefits within the timeframe allowed by federal law.

Please check either or both of the boxes below:

- As of this date and to the best of my knowledge, my company will be able to fully monetize the value of the federal Investment Tax Credit.
- As of this date and to the best of my knowledge, my company will be able to fully monetize the value of federal MACRS depreciation benefits.

Note: After confirming the property's eligibility and prior to finance closing, the C-PACE program administration team will request the following supporting documentation:

- Prior year federal tax return, for the corporate entity that will be taking advantage of the federal tax benefits associated with the clean energy installation at the property. If the corporate entity that will be taking the tax credits is not the direct owner of the property, the program administrator will request additional documentation that demonstrates the legal relationship between the parent corporate entity and the subsidiary owner of the property.