



RESIDENTIAL CLEAN ENERGY REBATE PROGRAM
FY24 APPLICATION FORM

Instructions: Please carefully review your application form and associated attachments prior to submitting an application to the Residential Clean Energy Rebate Program offered by the Maryland Energy Administration ("MEA"). Be advised that any incomplete or missing information, or documentation, will prevent your application from being approved. NOTE: All prior versions of the MEA Residential Clean Energy Rebate Program are not valid and will not be accepted by MEA. You must use this version of the application form to be considered for a Residential Clean Energy Rebate. No exceptions.

Table with 2 columns: Checklist for Application, Required Supporting Documentation to be Submitted with Application. Rows include criteria like 'Applicant has installed a qualified Clean Energy system' and 'Copies of all final inspections indicating a passed/approved status'.

Mail the complete application package to MEA at the following address:

Maryland Energy Administration
Attn: Residential Clean Energy Rebate Program
1800 Washington Blvd, Suite 755
Baltimore, MD 21230

If you have any questions about the application process, please review the Funding Opportunity Announcement available on the Residential Clean Energy Rebate webpage, or call MEA at 410.537.4000.

1 https://energy.maryland.gov/business/Pages/Incentives/CleanEnergyGrants.aspx

2 https://sdat.dat.maryland.gov/RealProperty/Pages/default.aspx

3 https://www.irs.gov/forms-pubs/about-form-w-9

4 Same as Footnote 1 link.



**FY24 R-CERP APPLICATION FORM**  
*All prior application form versions invalid.*

**Wes Moore, Governor**  
**Aruna Miller, Lt. Governor**  
**Paul G. Pinsky, Director**

**APPLICANT INFORMATION – YOU MUST SIGN BELOW FOR YOUR APPLICATION TO BE VALID**

<b>Legal First Name</b> (As shown on your MD income tax return)	<b>Middle Initial</b> ( <u>Only if</u> used on your tax return)	<b>Legal Last Name</b> (As shown on your MD income tax return)	
<b>Email Address of Applicant</b>		<b>Phone Number of Applicant</b>	
<b>Installation Street Address</b> (Where the system is installed)	<b>City</b> (Where the system is installed)	<b>State</b>	<b>Zip Code</b> (Where the system is installed)
		MD	
<b>Maryland County</b> (Where the system is installed)	<b>Congressional District*</b> (Where the system is installed)	<b>MD Legislative District*</b> (Where the system is installed)	
<b>Mailing Address</b> (If different from install address)	<b>City</b> (If different from install addr.)	<b>State</b>	<b>Zip Code</b> (If different from install addr.)

\*Find your Maryland Legislative and Congressional Districts at <http://mdelect.net>.

System Type	System Size	Total System Cost**	Rebate Amount
<input type="checkbox"/> Solar Photovoltaic (PV) Panels	kW DC	\$	\$1,000
<input type="checkbox"/> Solar Shingles	kW DC	\$	\$1,000
<input type="checkbox"/> Geothermal Heating & Cooling	Tons	\$	\$3,000
<input type="checkbox"/> Solar Thermal (Water Heating)	Sq. ft.	\$	\$500

**I affirm under penalties of law that:** (1) A qualified clean energy system has been installed on the installation property specified in Section 1 of this Maryland Energy Administration Residential Clean Energy Rebate Application; (2) I am a legal resident of the State of Maryland; (3) I own the property for which I am applying, and it is my primary residence; (4) if the property is held in a trust: I attest that the trust is revocable and that I have the right to remove the property from the trust; (5) I have complied with all state laws, local ordinances, and other legally binding requirements; (6) the contents of this application are true to the best of my knowledge, information, and belief; and (7) I have read and agreed to the terms outlined in the FY24 MEA Residential Clean Energy Rebate Program Funding Opportunity Announcement.

**SIGN HERE** → \_\_\_\_\_

<b>Print Name:</b>	
<b>Social Security Number:</b>	
<b>**YOUR SSN IS REQUIRED TO RECEIVE PAYMENT**</b>	
<b>Date of Signature:</b>	

OFFICIAL USE ONLY				
D13	03	512SA	1298	24
<b>AGENCY</b>	<b>FUND</b>	<b>PCA</b>	<b>SUB-OBJ</b>	<b>FY</b>
<b>SSN</b>		<b>AMOUNT</b>		
	<b>MEA</b>			
<b>PM INIT</b>	<b>MEA INVOICE NO.</b>	<b>DATE RECEIVED</b>		
<b>MEA APPROVAL</b>		<b>FINANCIAL ADM APPROVAL</b>		
<b>DATE:</b>				
<b>POSTED:</b>				

OFFICIAL USE ONLY	
MEA Division of Programs Approval:	



**PERMITTING & PROJECT INFORMATION**

Enter the information for the local permitting authority where the qualified clean energy system has been installed, and all information for all permits required by the local permitting authority. **NOTE: By signing this application form on Page 1, you are affirming that all permits that you have provided information for are all permits required by the local permitting authority for the qualified clean energy system. Also note that you must include proof of final inspection approval with this application for each permit listed.**

Check if Required	Permitting Authority	Permit Number	Final Inspection Pass Date
<input type="checkbox"/> Building Permit			
<input type="checkbox"/> Electrical Permit			
<input type="checkbox"/> HVAC Permit			
<input type="checkbox"/> Plumbing Permit			
<input type="checkbox"/> Well Permit			

**Primary Point of Contact**

Please indicate the preferred primary point of contact that MEA should communicate with regarding information found missing from the application, or information that requires more clarification:

- APPLICANT**       **CONTRACTOR**

Project Start Date	Project Completion Date*	Total Person-Hours Worked

*\*The date on which the project is fully installed, operational, and all required inspections are passed.*

**Geothermal Heating & Cooling ONLY:** Please indicate the type of geothermal heating and cooling system:

- Horizontal Loop     Vertical Well     Pond/Lake     Water Column  
 Other (specify):

Please indicate the type of HVAC system replaced by the geothermal heating & cooling system:

- Electric     Non-Electric     N/A – New Construction

**Solar Thermal (Water Heating) Systems ONLY:** Please indicate the type of Water Heater replaced by the Solar Thermal (Water Heating) system:     Electric     Non-Electric     N/A – New Construction

**Please proceed to the next page. The rest of this page is intentionally left blank.**



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**INSTALLATION CONTRACTOR INFORMATION**

Please enter the information for the installation contracting company that installed the clean energy system in the section below. Contractors must be incorporated or registered to do business in the State of Maryland, possess all licenses and certifications required by all applicable Federal, State, and local laws, regulations, and other legally-binding requirements and be in Good Standing with the Maryland State Department of Assessments and Taxation.

<b>Company Name</b>		<b>MD License Type</b>	<b>MD License Number</b>
<b>Name of Contact Person</b>		<b>Title of Contact Person</b>	
<b>Company Phone number</b>		<b>Contact Person's Email Address</b>	
<b>Company Street Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>For Solar PV Systems Only: MANDATORY NABCEP Certification (To be completed by Installation Contractor)</b>			
<b>Name of NABCEP <u>PV Installation Professional (PVIP)</u></b>		<b>NABCEP Certification Number</b>	

**System and Site Verification by Installation Contractor**

By signing the application below, I affirm that the foregoing information is true and correct to the best of my knowledge, information, and belief. I affirm that each component of the installed system is listed or labeled by a recognized national testing laboratory. In addition, I affirm that I have reviewed the Funding Opportunity Announcement for this program and that the project meets the terms and conditions described in it.

**SIGN HERE** \_\_\_\_\_

<b>Print Name:</b>	
<b>Title:</b>	
<b>Email Address:</b>	
<b>Date of Signature:</b>	



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**ADDITIONAL INFORMATION**

Please add any additional information regarding this application, the clean energy system, permitting, inspections, property ownership or residency, or any other important information that you feel that the MEA Clean Energy Rebate Team should know, in the box below. Leave the box blank if there is no information that you would like to share.