



***New Jersey's Clean Energy Program
Successor Solar Incentive Program (SuSI)
"New" Trade Ally Categories***

"ASSISTANCE FOR DISTRESSED CUSTOMERS" & "OPERATIONS AND MAINTENANCE"

Instructions and Conditions:

- A. **Item 3 Experience with NJCEP:** is an eligibility requirement for only the Assistance for Distressed Customers Category. For the Operations and Maintenance Category, it is not a requirement; it is only an opportunity for applicants to provide the information to NJCEP, who will then share it with potential customers upon request. Applicants can request an inspection by emailing njreinfo@njcleanenergy.com.
- B. **Item 4 Business Registration:** the applicant must exist as a legal entity (including as sole proprietorship) and be duly registered with the State of New Jersey or, only for general partnerships and sole proprietorships, a New Jersey County.
- C. **Item 5 Certifications and Signatures:** This application form must be signed by an owner, officer, or director of the applicant.
- D. Successful applicants must have a record of good performance, responsiveness, and cooperation with NJCEP, as determined by the Program Manager in its absolute discretion. Those who do not have such a record will not be approved for any category.

1. Identify the Category(ies) Applied for:

Assistance for Distressed Customers
Operations and Maintenance

2. Contact Information:

- a. Legal Business Entity Name:

- b. Any Doing Business As ("DBA") name:

- c. Address of principal place of business:

- d. Company's main telephone number:



e. Company's website (if any):

f. Name, phone number, and email address of primary point of contact responsible for the company's day-to-day interaction with NJCEP:

g. Name, phone number, and email address of senior-level staff person who handles customer complaints and compliance issues, including communication with NJCEP re same:

3. Experience with NJCEP:

a. List 10 successfully completed NJCEP registrations, including 1 that passed NJCEP inspection. The list should include NJCEP Registration Number, Premise Name, and the date inspection was passed (only for the 1 that constitutes the requisite passing inspection).

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. _____
- 10. _____

4. Business Registration:

- a. If registered with the State, provide a certificate of good standing no older than 6 months prior to the date of the subject application. **Please attach to this form.**
- b. If registered with a County, provide a copy of the registration. **Please attach to this form.**



5. Certifications and Signatures:

I agree that this document and all notices and disclosures made or given relating to this document may be created, executed, delivered, and retained electronically and that the electronic signatures appearing on this document and any related documents shall have the same legal effect for all purposes as a handwritten signature.

The information, statements, and documents I have provided in and with this document are true and accurate to the best of my knowledge. I am aware that if any of them are willfully false, I am subject to punishment.

IF USING AN ELECTRONIC SIGNATURE, PLEASE UPLOAD IN THE ADI ONLINE PORTAL THE CERTIFICATE OF COMPLETION OR THE SIGNATURE VERIFICATION SHEET.

Signature: _____

Print Name: _____

Print Title: _____

Date: _____