ATTACHMENT C: INDIVIDUAL RESPONSE FORM FOR COMMUNITY SOLAR PROVIDERS

COVER LETTER

The undersigned is the duly authorized representative of the company or entity identified below (the "Company"), with full authority to sign this document and to submit this information pursuant to the **CNY RPDB's** Request for Proposals (the "RFP").

I hereby certify:

- The Company is duly organized and in good standing under the laws of the jurisdiction in which it is organized. The financial statements are true, correct and complete and fairly present the financial condition of the Company as of their date. Since the date of the most recent financial statements, there has been no material adverse change in the Company's financial condition. All tax returns required to be filed in any jurisdiction have been duly filed, and all taxes due in respect of the Company have been duly paid.
- The Company has read the RFP, understands it and is familiar with its requirements.
- The information contained in this response, and any correspondence or other documentation relating to
 this response, are all true, correct and complete. The information disclosed by the Company in this
 response relating to the nature of the partnerships (if applicable), corporate partnerships, affiliations and
 other relationships is true, correct and complete.
- The Company understands and acknowledges that, until a final selection is made under the RFP, the CNY RPDB may enter in discussions with the Company to negotiate the terms of its response in an effort to reach the most favorable arrangement for the relevant community. Moreover, the CNY RPDB reserves the right (i) to reject any or all responses; (ii) to waive defects or irregularities in any response; (iii) to discontinue discussions at any time and for any reason; (iv) to correct inaccurate awards; (v) to change the timing or sequence of activities related to the EnergySmart CNY Community Campaigns; (vi) to modify, suspend or cancel the EnergySmart CNY Community Campaigns; and (vii) to condition, modify or otherwise limit the mandate pursuant to the RFP.

By submitting this response, the Company represents and warrants that, if it is selected under this RFP, it will comply with the terms of the RFP and will perform all the duties and obligations of the "Selected Contractor" under the RFP.

| Printed Name of Community Solar Organization | | |
|--|----------|--|
| | | |
| Printed Name of Authorized Representative | Title | |
| Signature | Date | |

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Please answer all the questions on this form. If more room is needed or questions are better answered by separate documents, please attach the document to your response and clearly refer to them in the answer (e.g., see Attachment A, Staff List).

| CONTRACTOR INFORMATION | | |
|--|--|--|
| COMPANY INFORMATION | | |
| Company Name | | |
| Headquarters Address | | |
| Additional locations with proximity to Central New York (Cayuga, Cortland, Madison, Onondaga, and Oswego Counties) | | |
| Service Territory | | |

| Company Website | |
|---|--|
| Are you listed on EnergySage? | |
| Are the community solar farms you promote listed on NYSERDA's NY SUN website? | |
| COMPANY TEAM | |
| | |
| Primary Point of Contact | |
| Contact Title | |
| Contact Phone | |
| Contact Email | |
| Total number of full-time employees | |

| Total number of part-time employees |
|-------------------------------------|
|-------------------------------------|

List all relevant key staff (e.g. salespeople, project managers, and key administrative staff) in your company who will be working on **EnergySmart CNY Community Campaigns**, as well as roles, years of experience, and relevant certifications/licenses held by each. Add additional rows as necessary. This information may also be submitted as an additional addendum.

| Staff #1 | |
|----------|--|
| Staff #2 | |
| Staff #3 | |
| Staff #4 | |
| Staff #5 | |
| Staff #6 | |

| Staff #7 | |
|----------|--|
| Staff #8 | |

RESPONSE TEAM

Please provide the names and contact information of any subcontractors who would support customer acquisition through this program.

| Company Name | Technology/Role | Contact Person | Contact Phone Number | Contact Email |
|--------------|-----------------|----------------|----------------------|---------------|
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| COMPANY EXPERIENCE | | | |
|---|---|--|--|
| | | | |
| Number of years in operation | 1 | | |
| What is your ownership structure? | | | |
| How would you describe your business? | r | | |
| How many government complaints have you had in the last year? | | | |

| What is your residential customer turnover (% cancellation) on an annual basis? | |
|---|--|
| Approximate number of new subscriptions in New York State in past 12 months | |
| | |
| Approximate number of new subscriptions in CNY (Cayuga, Cortland, Madison, Onondaga, and Oswego Counties) in past 12 months | |
| Please describe any other relevant experience, skills, and capabilities of your company. | |

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CAPACITY

Describe the number of full- or part-time staff who will be made available to serve the **EnergySmart CNY Community Campaigns** over the course of the campaign, as well as their capacity to assist with marketing and the company's capacity for subscribers.

| Expected average number of full- time equivalent (FTE) staff active in community during campaign period | |
|---|--|
| Expected average number of hours per month available to assist with marketing for the campaign (including in-person events, mailer campaigns, etc.) | |

SOLAR FARM DETAILS

Please list details of any known solar farms you will be subscribing to over the next 12 months.

| Name of solar farm | Location of solar farm | Solar Developer | Discount(s) offered | Status of Project and estimated enrollment timeframe | Method of billing (e.g. consolidated billing or separate billing) | Estimated # of non-anchor subscriptions available |
|--------------------|------------------------|-----------------|------------------------|---|--|---|
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CAMPAIGN AND ENROLLMENT DETAILS

| Are you serving or applying to serve as the selected Installer/Contractor of any other NYSERDA Clean Energy Hubs campaigns? | |
|---|--|
| What additional incentives do you offer municipal partners (if applicable)? | |
| Describe the typical timeline for customers from lead intake through to contract signed. | |
| How long on average does it take from contract signed to receiving monthly bill reductions? | |

| Describe your quality assurance process, including how you will address any customer disputes. | |
|--|--|
| Describe your geographic proximity to the region and how this will affect your ability to provide services to all areas included in the EnergySmart CNY Community Campaigns. | |
| If applicable, please provide details on providing any additional discount for Low and Middle-Income household subscribers and/or Disadvantaged Communities. | |
| Please describe how the customer is billed for their subscription. Do you utilize consolidated billing? Are the bills consolidated on the utility or your own bills? | |

| What are your standard contract terms with customers? Is auto pay required in the terms? | |
|--|--|
| What are your standard subscription cancellation rules? | |
| What projects do you have currently under development, and how will they be built out fast enough to take advantage of federal tax credits before they sunset? | |
| Do you provide community solar options for small businesses and/or non-residential enterprises? If so, please describe offerings. | |

| Which utility areas are you willing to serve through this campaign? Please check all boxes that are applicable. | | |
|---|---|--|
| | | |
| are you willing to serv | e through this campaign? Please check all boxes that are applicable. | |
| • | Please describe any partial coverage. | |
| · - | | |
| Madison | | |
| Onondaga | | |
| Oswego | | |
| COMMUNICATION AND OUTREACH DETAILS | | |
| letails below on how y | ou will support the campaign's outreach and communication. | |
| nent forms? If you vide an example as . If not, skip this. u plan to share icipant details and e CNY RPDB's | | |
| | are you willing to serve County Cayuga Cortland Madison Onondaga Oswego | |

| What additional in-kind advertising (ex: mailers, social media advertisements, marketing collateral) or support are you willing to provide for the campaign? | | |
|--|--|--|
| Do you or any subcontractors/3 rd party affiliates engage in any door-to-door marketing techniques? | | |
| Describe your process for handling customer leads that are not suitable for your offerings. | | |
| | | |
| LICENSING AND INSURANCE | | |
| Please provide information about all lid | censes and insurance held by your company. | |
| New York State license number(s) | | |

| Liability insurer, coverage, and policy number | |
|--|--|
| Worker's compensation insurer, coverage, and policy number | |