# ATTACHMENT A - COVER SHEET

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| **SECTION I - Provide information summarizing the project proposal.** | | | | | | | | | | | | | | | |
| **Project Title:** | | | | |  | | | | | | | | | | |
| **PSC Grant Request ($):** | | | | | | **Applicant Cost Share ($):** | | | | | | | **Project Total ($):** | | |
|  | | | | | |  | | | | | | |  | | |
| **Choose one Eligible Activity** | | | | | | | | | | | | | | | |
| Renewable Energy & Energy Storage | | | | | Energy Efficiency & Demand Response | | | | | | | ☐ Comprehensive Energy Planning | | | |
| **Acknowledgement of ARRA Applicability. Check all that apply.** (See Section 1.3 of Application Instructions) | | | | | | | | | | | | | | | |
| Buy American: Alteration, maintenance or repair of a public building or public work. | | | | | | | | | | | | | | | |
| Davis Bacon and Related Acts: Use of laborers or mechanics employed by contractors and subcontractors. | | | | | | | | | | | | | | | |
| Historic Preservation: Project involves historical (over 50 years old), archeological or cultural resources. | | | | | | | | | | | | | | | |
| National Environmental Policy Act (NEPA): Review the list of covered activities in Attachment C (also discussed in Section 1.3.4) of the Application Instructions.  Environmental Questionnaire **is attached**. Project activity **is not** covered.  No Environmental Questionnaire needed. Project activity **is** covered. | | | | | | | | | | | | | | | |
| **SECTION II - Provide information for your organization, signatory, and primary contact for the project.** | | | | | | | | | | | | | | | |
| **Applicant Type:** | | City | | | | | Village | | | Town | | | | County |
| Tribal Nation | | | | Manufacturer | | | | | | | | K-12 School District | | |
| University of Wisconsin System | | | | Wisconsin Technical College System | | | | | | | | 501(c)(3) nonprofit | | |
| Municipal Utility  (water, wastewater, electric, natural gas) | | | | | | | | Hospital (public or nonprofit) | | | | | | |
| **Name** (on W-9)**:** | | | | | |  | | | | | | | | | |
| **Address** (on W-9)**:** | | | | | |  | | | | | | | | | |
| **County or Counties Served by Project:** | | | | | |  | | | | | | | | | |
| **DUNS Number or CAGE Code:** | | | | | |  | | | | | | | | | |
| **NAICS Code:** | | | | | |  | | | | | | | | | |
| **FEIN** | | | | | |  | | | | | | | | | |
| **Authorized Representative/Signatory** (Person authorized to submit applications and sign contracts) | | | | | | | | | **Primary Contact** (if different from Authorized Representative) | | | | | | |
| **Name:** |  | | | | | | | | **Name:** | |  | | | | |
| **Title:** |  | | | | | | | | **Title:** | |  | | | | |
| **Phone:** |  | | | | | | | | **Phone:** | |  | | | | |
| **E-mail:** |  | | | | | | | | **E-mail:** | |  | | | | |
| **Signature of the Authorized Representative** | | |  | | | | | | | | | | | | |