## Public Service Commission of Wisconsin Office of Energy Innovation

**Refueling Readiness Grant Program**

ATTACHMENT A - COVER SHEET

|  |
| --- |
| **SECTION I - Provide information summarizing the project proposal.** |
| **Project Title:** |  |
| **PSC Grant Request ($):** | **Applicant Cost Share ($):** | **Project Total ($):** |
|  |  |  |
| **Select all that apply:** |
| * Area of Interest One- Tap Switch (up to $5,000)
 | * Area of Interest One- Bulk Tank Station Tap Switch (up to $25,000)
 | * Area of Interest Two- Generator Readiness (up to $100,000)
 |
| **SECTION II - Provide information for your organization, signatory, and primary contact for the project.** |
| **Applicant:** |
| **Name** (on W-9)**:** |  |
| **Address** (on W-9)**:** |  |
| **County or Counties Served by Project:** |  |
| **DUNS Number or CAGE 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** |  |