

Return all applications and attachments to:
Solar Energy Tax Credit Program
Attn: Annabelle Molina
Arizona Commerce Authority
1700 W. Washington, Suite 600
Phoenix, AZ 85007

Questions regarding Solar Energy Tax Credits can be directed to annabellem@azcommerce.com

**Arizona Commerce Authority
Commercial/Industrial Solar Energy Tax Credit Program**

**APPLICATION FOR INITIAL CERTIFICATION
FOR A SOLAR ENERGY DEVICE**

(A.R.S. §41-1510.01)

Section A. Business Information

Business Name _____ FEI Number _____

Mailing Address _____ City, State & Zip _____

Contact Name _____ Contact Phone _____

Contact Mailing Address _____ City, State & Zip _____

Email Address _____ Contact Fax _____

Business Sector _____ Industry _____ NAICS # _____

Tax year: _____ Legislative District: _____

What is the ownership structure of the business?

- C Corp S Corp LLC Partnership Sole Proprietorship

Name of energy provider? _____

- **Attach documentation that the small business is registered with and is participating in the E-Verify program pursuant to A.R.S. §23-214(B).**

Section B. Solar Energy Device List

Is this application based on a single device or multiple devices that will be installed at a single location?
(If a business is seeking initial certification for multiple devices in this application for a single location, a separate Section C of this form must be completed for each device.) Please list the type of device that will be installed.

Device # 1. _____

Device # 2. _____

Device # 3. _____

Device # 4. _____

For Commerce Use Only	
Unique Identifying #	

Section C. Project Page for a Solar Energy Device

If a business is seeking initial certification for multiple devices in this application for a single location, a separate Section C of this form must be completed for each device.

Business Name _____

Installation Address _____ City, State & Zip _____

Do any of the authorized officers reside at the installation address? Yes No

Please describe the type of device being installed?

Devices make and/or model number. _____

What is the projected start date of installation? (Month, Day, Year) _____

What is the projected finish date of installation? (Month, Day, Year) _____

What is the projected date the device will be operational? (Month, Day, Year) _____

Attach a copy of the device estimate or quotation including total installation cost, make and/or model number, the installer's name and estimated completion date.

Estimate total annual energy production or energy saved in kilowatt hours _____ kWh

Estimated total installed cost of device excluding financing costs? \$ _____

Estimated tax credits generated by this device? (10% X total installed cost not to exceed \$25,000) \$ _____

Estimated number of solar panels, if applicable _____

Wattage rating _____ W

What is the size of the system? _____

Other Solar Energy Incentives

Please indicate which of the following incentives the business intends to pursue.

- 1. Transaction privilege tax exemption on:
 - a. The total sales price of the device sold by retailers registered with the Arizona Department of Revenue? Yes No
 - b. Gross income from contracts to provide and install the device by a prime contractor registered with the Arizona Department of Revenue? Yes No
 - 2. Personal property tax exemption? Yes No
 - 3. Rebate or refund from a utility company or other source? Yes No
- If yes, from whom? _____
- If yes, amount of rebate? \$ _____

To receive a credit certificate, upon completion of installation, the business must submit a "Completion Report for a Solar Energy Tax Credit Certificate" to the Arizona Commerce Authority (Commerce) in which it attests the device is operational and provides records of installation expenses. In addition, the business must certify and submit evidence that all requirements of A.R.S. § 41-1510.01 were met. **If a business doesn't meet the program requirements the credit certificate will not be issued and Commerce will notify the Arizona Department of Revenue (Revenue) of the business's ineligibility.**

Section D. Solar Energy Tax Credits

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|--|--------------------------|-----|--------------------------|----|
| 1. Has the applicant received a credit certificate for a device during this fiscal year? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 2. If yes, state the amount of tax credits the applicant has received? | \$ _____ | | | |
| 3. Has the applicant passed any tax credits on to a third party financier during this fiscal year? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 4. If yes, state the amount passed through to a third party financier? | \$ _____ | | | |
| 5. Subtract line 2 from line 4, to show the amount of tax credits retained by the applicant? | \$ _____ | | | |
| 6. Has the applicant received tax credits from another business for acting as a third party financier? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 7. If yes, identify the amount of tax credits received? | \$ _____ | | | |
| 8. Add the amounts in lines 2 and line 7, to show the total tax credits accumulated by the applicant during this tax year. | \$ _____ | | | |
| 9. Provide the priority placement numbers for each tax credit allocation identified in line 2 and line 7. | | | | |

Section E. Affidavit

As an officer of the business, I certify under penalty of perjury that the information contained herein is true and correct according to my best belief and knowledge after a reasonable investigation of the facts and that the business:

- Is installing a solar energy device as described in A.R.S. §41-1510.01;
- Acknowledges that receipt of an initial certification does not guarantee receipt of tax credits;
- Understands that applications are confidential and not subject to disclosure under Title 39 for eighteen months after the date of receipt of an application;
- Understands that Commerce will transmit initial certification and credit information to Revenue;
- Shall allow inspections and audits by Commerce as are reasonably necessary to verify the accuracy of the submitted information;
- Authorizes Revenue to adjust, terminate or recapture all or part of the tax incentives for noncompliance with program requirements;
- Agrees to submit a "Completion Report for a Solar Energy Tax Credit Certificate" to Commerce for each device when installation is complete and the device is operational;
- Upon completion of installation agrees to furnish records of expenditures, from the person who provided or installed the device, to Commerce;
- Acknowledges that tax credits are available only upon receipt of a credit certificate from Commerce;
- Acknowledges that all tax credits generated by a device can be used by the business or passed to a third party financier to offset Arizona income tax liability.
- Must purchase a device from a retailer registered with Revenue to receive the transaction privilege tax exemption on the total purchase price of the device; and
- Must use a prime contractor registered with Revenue to receive the transaction privilege tax exemption on a contract.
- The date Commerce receives the completion report determines the priority placement number.
- The date the device becomes operational determines the calendar cap year from which the credits are allocated.
- **In order for an application to be considered complete, the applicant shall provide proof that it is registered with and is participating in the E-Verify program pursuant to ARS § 23-214(B) <http://www.uscis.gov/portal/site/uscis>**
- Hereby certifies that the applicant does not have scrutinized business operations in Iran, in accordance with A.R.S. § 35-393 et seq; and
- Hereby certifies that the applicant does not have scrutinized business operations in Sudan, in accordance with A.R.S. § 35-391 et seq.

Signature of Authorized Officer

Title

Print Name

Date