FY24 Open Program

Application Form



Application Deadline:

For best chance of consideration in FY24

5:00 P.M January 31, 2024



The Maryland Energy Administration (MEA) is interested in receiving proposals that fall outside the range of existing programs but serve to advance the State’s energy goals and agency mission. MEA will provide a listing of topics of interest but will consider proposals on other topics as they are submitted. A full description of the fiscal year 2024 (FY24) Open Program can be found [here](https://energy.maryland.gov/SiteAssets/Pages/OpenEnergyGrantProgram/FY24%20FOA%20Open%20Energy%20Program.pdf) and the Grant Agreement General Provisions, version 3 are available on [MEA’s website](https://energy.maryland.gov/SiteAssets/Pages/all-incentives/General%20Provisions%20v3%202.11.22.pdf).

**Application Deadline:** There is no firm deadline by which an OPEN Energy proposal must be submitted to MEA. Applications will be accepted, screened for eligibility, and eligible proposals will be evaluated throughout the fiscal year, subject to funding availability. However, applicants are strongly encouraged to submit applications no later than **January 31, 2024**, for best chance of consideration. Proposals received after this date may be deferred to a following fiscal year at MEA’s sole discretion, or the applicant may need resubmit in the subsequent fiscal year. Given the unique nature of applications received under the OPEN ENERGY program, MEA cannot firmly estimate the timeframe for thorough consideration, award, and negotiation of grant agreements.

**Submit your complete application package via email to**

**OPEN.MEA**[**@Maryland.gov**](about:blank)**.**

**A1. Applicant Information**

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| Type of Organization Making Submission (Individual, Business, Non-Profit, Academic, Other (specify) | | | | | | |
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| Point of Contact (POC) Name | | POC Title | | | | |
|  | |  | | | | |
| POC Phone Number | | POC Email | | | | |
|  | |  | | | | |
| POC Address | | City | | | State | Zip Code |
|  | |  | | |  |  |
| MD County | Congressional District\* | | | MD Legislative District\* | | |
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| **A2. Type of Project**  The Point of Contact will be responsible for coordinating all paperwork related to the Grant and will be the recipient of all MEA correspondence.     * Area of Interest 1 (AOI 1): Energy Efficiency, Renewable Policy, Resilience and Clean Transportation Solutions * Area of Interest 2 (AOI 2): Research Activities * Area of Interest 3 (AOI 3): Energy Workforce Development * Area of Interest 4 (AOI 4): Outreach, Engagement and Education * Other | | | | | | |  |  |
|  | | | | | | | | | |
| Signatory's Name | | Title | | | | |
|  | |  | | | | |
| Signatory's Signature | | Date Signed | | | | |
|  | |  | | | | |
| Email Address of Signatory | |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Person Authorized to sign the Grant Agreement (if different from above the applicant signatory) | | | | | | | |
| Print Name | | Title | | | | | |
|  | |  | | | | | |
| Email Address of the Signer of a Grant Agreement, if selected for award | |  |  |  |  |  |  |
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| **B1. Proposal Information** | | | | | | | | |
| Proposal Title | | | | | | | |
|  | | | | | | | |
| Projected Project Start Date | | Projected Project End Date | | | | | |
|  | |  | | | | | |
| Requested Funding (estimate) ($) | |  | | | | | |
|  | |  | | | | | |
| Organization Performing Work | |  | | | | | |
|  | |  | | | | | |
| Organization's Mailing Address | | City | | | | State | Zip Code |
|  | |  | | | |  |  |
| MD County | Congressional District\* | | | | MD Legislative District\* | | |
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| \*Find MD Congressional and Legislative Districts at http://www.mdelect.net | | | | | | | | | | |
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| **C. Communications**  Electronic communication provides the fastest and most efficient method of interacting with MEA; therefore, MEA encourages the use of electronic communication for all matters relating to this grant program. Unless the applicant opts out as indicated below, MEA will require the electronic submission and receipt of all documents (including but not limited to the application, the grant agreement, reports, and invoices).  The Applicant agrees to use electronic communication for all purposes relating to this grant program.  Type **"Yes" or "No”:** \_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | |
| **D. Applicant Certification and Signature**  **Instructions:** The Authorized Representative for the Applicant organization should carefully read the attestations and acknowledgements below before signing this Application form. If the Applicant has contracted with a project contractor at the time of submitting the Application package, the Authorized Representative for the project contractor should also carefully read the attestations and acknowledgements before signing the Application Form.  **Signature of Individual Authorized to Sign on Behalf of the Applicant**  **Acknowledgements and Certification**  **By signing this Application, I certify as follows: I am authorized to submit this Application Package on behalf of the Applicant. The information provided on this Application form and in each of its attachments (“Application Package”) is complete, accurate, and true. I have not made and will not knowingly make or cause to be made, any false statement or report in any document furnished to MEA in relation to the Program subject to the penalties set forth in MD Code, § 9-20B-11 of the State Gov't Article. This submission complies with the Copywrite, Trademark and Patent laws of the United States, and I authorize the submission of this application and the provision of all information pertaining to the ideas expressed in the Concept Paper and (if requested, the Final Proposal). I further certify that, and agree to the terms and conditions stated below on behalf of the Applicant:**   1. I understand and acknowledge that MEA accepts Application Packages and awards grants on a competitive basis, and that for best chance of consideration, Application Packages should be received by MEA **no later than 5:00 P.M. January 31, 2024.** 2. I affirm that the project for which the grant funds have been requested, if ultimately installed, will be located within the State of Maryland. 3. I understand and acknowledge that the use of any funds awarded under this Grant Program for projects benefiting facilities and/or off takers not located within the State of Maryland **is strictly prohibited.** 4. I understand and acknowledge that submission of this Application Package does not guarantee that a Grant will be awarded for the project. 5. I understand and acknowledge that Grant funds cannot be used to offset costs that are incurred by the Applicant organization or any project contractor prior to the execution of a Grant Agreement between the Applicant and the Maryland Energy Administration. 6. I understand and acknowledge that the Maryland Energy Administration reserves the right to determine the final award amount for each grant. 7. I understand and acknowledge that the Maryland Energy Administration or its representative(s) may use photos and video of the Applicant facility (or the facility under analysis, subject to written agreement with the Maryland Energy Administration by the facility owner), and data presented in my final reports for marketing, publicity, and advertising purposes. The Maryland Energy Administration and its representatives, subject to the requirements of the Maryland Public Information Act, and other applicable laws, will not divulge any confidential information or trade secrets. 8. I have read MEA’s Grant Agreement General Provisions document available at <https://energy.maryland.gov/SiteAssets/Pages/all-incentives/General%20Provisions%20v3%202.11.22.pdf>and understand it will be included in a grant agreement under this program. 9. I understand and acknowledge that, if awarded a Grant, an Applicant must provide the Maryland Energy Administration with a complete, current, and accurate IRS Form W9. All Applicant information on the IRS Form W9 must match the information provided on this Application form. 10. Under penalties of perjury, I, the Authorized Representative for the Applicant, certify that: the Federal Tax Identification Number/Employer Identification Number on this form is the correct Tax Identification Number/Employer Identification Number (or I am waiting for a number to be issued to me), and I am not subject to backup withholding because: 11. I am exempt from backup withholding, or 12. I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding because of a failure to report all interest or dividends, or 13. The IRS has notified me that I am no longer subject to backup withholding; and I am a U.S. citizen or other U.S. person (as defined in IRS Form W9). 14. I understand and acknowledge that any Grant received through this program is taxable as income. Therefore, if a Grant is provided to the Applicant for this project, the State of Maryland will send a 1099-G form, which the Applicant must report as income on its federal and state tax returns. For more information, Applicants should contact a qualified tax professional. 15. I understand and acknowledge that if a Grant is awarded for this project, MEA representatives must have reasonable access to the relevant facility to conduct site inspections and measurement and verification activities, and to take photos or videos of the project, as deemed appropriate by MEA in consultation with the Grantee. If the relevant facility is owned by a third party, a written agreement between the applicant and the facility owner is required. 16. I understand and acknowledge that the FY24 Open Program terms and conditions are subject to change at the discretion of MEA. 17. I understand and acknowledge that if MEA awards a Grant to the Applicant, any Grant payment will be contingent upon the successful MEA review and approval of the Grantee’s submissions, including progress reports and requests for reimbursement (including supporting documentation). 18. I understand and acknowledge that FY24 Open Program funding is limited as outlined in the FY24 Open Program FOA. | | | | | | | | | | | |
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| **AUTHORIZED APPLICANT SIGNATURE (REQUIRED)** | |
| **Authorized Signature:** |  |
| **Name (First and Last):** |  |
| **Title:** |  |
| **Applicant Organization Name:** |  |
| **Date:** |  |

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| **AUTHORIZED CONTRACTOR SIGNATURE (IF CURRENTLY KNOWN, OTHERWISE SKIP)** | |
| **Authorized Signature:** |  |
| **Name (First and Last):** |  |
| **Title:** |  |

**SUBMIT THIS APPLICATION VIA EMAIL TO:**

**>>> OPEN**[**.MEA@Maryland.gov**](mailto:.MEA@Maryland.gov) **<<<**

**For best chance of consideration in FY24, APPLICATIONS SHOULD BE RECEIVED BY MEA BY**

**5:00 P.M. JANUARY 31, 2024**

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Any questions or concerns regarding Program requirements, Application instructions, or Open Program should be directed to **Garry Aime, Program Manager**, at [garry.aime@Maryland.gov](mailto:garry.aime@Maryland.gov) or via phone at 443-306-8149.