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| CLEAN ENERGY FUND (CEF) 4 - DAIRY DIGESTER ENHANCEMENT  GRANT APPLICATION | | | | | | | | | |
| Directions:  Please follow the guidance provided in the Request for Proposal (RFP) and complete this application in full. If an area does not apply, insert “NA”.  Please be aware that any information provided is subject to public disclosure. Only include proprietary information if necessary.  *Complete all sections of the application. Incomplete applications may be disqualified.*  Requirements:   1. Do not alter or edit any of the following:    * Font size    * Margins    * Font type    * Table size 2. Responses may include embedded visual images or graphs 3. Applications *must be received* by Commerce by **5:00pm Pacific** on **Friday, January 31, 2019** 4. Send questions regarding the application process to [CEF@commerce.wa.gov](mailto:CEF@commerce.wa.gov) 5. The maximum size of the application is 10 MB to ensure delivery   Steps:   1. Save the document with this file name structure in WORD format (not PDF):    * <Name of Organization>\_ CEF 4 DDE\_APP 2. After saving the document, email it to: energy\_policy@commerce.wa.gov    * Subject line: < Name of Organization >\_CEF 4 DDE\_APP\_ PKG 3. Include all required attachments located on the [CEF 4 Dairy Digester Enhancement Program](https://www.commerce.wa.gov/growing-the-economy/energy/clean-energy-fund/dairy-digester-enhancement/) as separate files attached to the same email message as the application:    * Certification Assurance    * Ethics in Public Service Compliance    * Risk Assessment Survey    * Match Documentation Letter    * DOR Compliance Status    * Ethics in Public Service Compliance    * Screenshot of Department of Revenue Status (applicant to provide)   *Award decisions will be made February 28, 2020*  *Commerce reserves the right to adjust timelines to ensure an equitable application review process.  Commerce is under no obligation to pay for any costs associated with preparation or submission of applications.* | | | | | | | | | |
| CEF 4 Dairy Digester Enhancement Grant Application | | | | | | | | | |
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| Applicant Information | | | | | | | | | |
| Organization Name: | | | | | | | | Click or tap here to enter text. | |
| Project Title: | | | | | | | | Click or tap here to enter text. | |
| Total Project Cost: | | | | | | | | Click or tap here to enter text. | |
| Dollar Amount of Grant Funding Requested: | | | | | | | | Click or tap here to enter text. | |
| Mailing Address: | | | | | | Click or tap here to enter text. | | | |
| Project Address (if different): | | | | | | Click or tap here to enter text. | | | |
| Organization Website or NA: | | | | | | Click or tap here to enter text. | | | |
| Project Contact #1 Name: | | | | | | Click or tap here to enter text. | | | |
| Email #1: | | Click or tap here to enter text. | | | | | Email #2: | | Click or tap here to enter text. |
| Phone #1: | | Click or tap here to enter text. | | | | | Phone #2: | | Click or tap here to enter text. |
| Project Contact #2 Name: | | | | | | Click or tap here to enter text. | | | |
| Email #1: | | Click or tap here to enter text. | | | | | Email #2: | | Click or tap here to enter text. |
| Phone #1: | | Click or tap here to enter text. | | | | | Phone #2: | | Click or tap here to enter text. |
| Organization Official/Title: | | | | | Click or tap here to enter text. | | | | |
| Email #1: | | | Click or tap here to enter text. | | | | Email #2: | | Click or tap here to enter text. |
| Phone #1: | | | Click or tap here to enter text. | | | | Phone #2: | | Click or tap here to enter text. |
| Applicant Legal Status: | | | | Sole Proprietorship  Partnership   Corporation  Other (Specify) Click or tap here to enter text. | | | | | |
| Tax ID Number: | | | | Click or tap here to enter text. | | | | | |
| UBI Number: | | | | Click or tap here to enter text. | | | | | |
| Project Information | | | | | | | | | |
|  | Project Approach/Methodology:  Describe the project in one to three paragraphs, including specific goals and objectives, general scope, and how the project will address feedstocks (sourcing, handling, and pre-treatment), operations (energy efficiency and digester function), and co-products (separation, processing and marketing of biogas, nutrients, fiber, and other co-products). | | | | | | | | |
| Response | Click or tap here to enter text. | | | | | | | | |
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|  | Work Plan:  Discuss how this proposal will evaluate the technologies, operations and resources to be used in the proposed project. Include the locations of proposed activities. Include all project requirements and the proposed tasks, services, activities, etc. necessary to accomplish the scope of the project defined in this RFP. This section of the technical proposal must contain sufficient detail to convey to members of the evaluation team the Applicant’s knowledge of the subjects and skills necessary to successfully complete the project. Preference will be given to projects that are replicable at other current and future dairy-based digesters. | | | | | | | | |
| Response | Click or tap here to enter text. | | | | | | | | |
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|  | Project Schedule:  Include a project schedule indicating when the elements of the work will be completed. Project schedule must ensure that any deliverables requested are met. | | | | | | | | |
| Response | Click or tap here to enter text. | | | | | | | | |
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|  | Outcomes and Performance Management:  Describe the impacts/outcomes the Applicants propose to achieve, including how these outcomes would be monitored, measured, and reported to COMMERCE. | | | | | | | | |
| Response | Click or tap here to enter text. | | | | | | | | |
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|  | Risks:  Identify potential risks that are considered significant to the success of the project. Include how the Applicant would propose to effectively monitor and manage these risks, including reporting of risks to the COMMERCE contract manager. | | | | | | | | |
| Response | Click or tap here to enter text. | | | | | | | | |
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|  | Deliverables:  Fully describe deliverables to be submitted under the proposed contract. Deliverables must support the programmatic requirements. | | | | | | | | |
| Response | Click or tap here to enter text. | | | | | | | | |
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|  | Project Team Structure and Internal Controls:  Provide a description of the proposed project team structure and internal controls to be used during the course of the project, including any subgrantees. Provide an organizational chart of your firm indicating lines of authority for personnel involved in performance of this potential contract and relationships of this staff to other programs or functions of the firm. This chart must also show lines of authority to the next senior level of management. Include who within the firm will have prime responsibility and final authority for the work. | | | | | | | | |
| Response | Click or tap here to enter text. | | | | | | | | |
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|  | Staff Qualifications and Experience:  Identify staff, including subgrantees, who will be assigned to the potential contract, indicate their responsibilities and qualifications, and specify the amount of time that each will be assigned to the project. Provide resumes for the named staff which include information on the individual’s particular skills related to this project, education, experience, significant accomplishments and any other pertinent information. The Applicant must commit that staff identified in its proposal will actually perform the assigned work. Any staff substitution must be communicated to COMMERCE. | | | | | | | | |
| Response | Click or tap here to enter text. | | | | | | | | |
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|  | References:  List names, addresses, telephone numbers, and e-mail addresses of three business references for the Applicant and three business references for the lead staff person for whom work has been accomplished and briefly describe the type of service provided. Do not include current COMMERCE staff as references. By submitting a proposal in response to this Request, the vendor and team members grant permission to COMMERCE to contact these references and others, who from COMMERCE’S perspective, may have pertinent information. COMMERCE may or may not, at COMMERCE’S discretion, contact references. COMMERCE may evaluate references at COMMERCE’S discretion. | | | | | | | | |
| Response | Click or tap here to enter text. | | | | | | | | |
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|  | Budget/Identification of Costs:  Applicants must demonstrate maximizing state resources and identify all costs in U.S. dollars including expenses to be charged for performing the tasks necessary to accomplish the objectives of the contract. The Applicant is to submit a fully detailed budget including staff costs and any expenses necessary to accomplish the tasks and to produce the deliverables under the contract. Applicants are required to collect and pay Washington state sales and use taxes, as applicable. | | | | | | | | |
| Response | Click or tap here to enter text. | | | | | | | | |
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| *End of Application* | | | | | | | | | |
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## APPLICATION PROCESS SURVEY (Required)

Survey Questions

*The following questions are intended to help us improve our application process. Please indicate your agreement/disagreement with the following statements.*

*Your responses will not affect the evaluation of your application in any way.*

1: Strongly Disagree

2: Disagree

3: Neither Agree nor Disagree

4: Agree

5: Strongly Agree

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| Organization/Company Name of Applicant: | |
| Click or tap here to enter text. | |
| Application Survey Questions | Responses |
| 1. The guidelines provided enough information on the program. |  |
| 1. The Bidders Conference was a helpful introduction to the application process. |  |
| 1. The Notice of Funding Opportunity (NOFO) application instructions were clear. |  |
| 1. The NOFO application process was easy to follow. |  |
| 1. I was able to receive the assistance I needed from Commerce to complete the application. |  |
| 1. Commerce staff was timely in responding to process related inquiries. |  |
| 1. I had adequate time to prepare the application prior to the deadline. |  |
| 1. Given program requirements, the application process was reasonable. |  |
| Please enter general comments and/or suggestions for improvement in the box below. | |
| Click or tap here to enter text. | |

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| *End of Application* |
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