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| Clean Energy Fund 3 / Clean Energy Transformation 4  Grid Modernization Program (GRID2021)  Track 2 Application | | | | | | | |
| Directions:   1. Please complete the application below. Cells will expand to accommodate longer responses.    * Questions regarding the application process may be emailed to [cef@commerce.wa.gov](mailto:cef@commerce.wa.gov). 2. Save the document with this file name structure:    * <Name of Submitting Entity>\_GRID2021 TRACK 2 APP 3. Complete all application attachments requirements listed in the Attachments list below, and save the documents using the naming conventions listed in that section. 4. Print Attachment 5, “Certifications and Assurances”, then read, sign, and scan, then save using the naming conventions listed in the Attachments list below.   Upon the completion of steps 1 – 4, email the application and all attachments to [cef@commerce.wa.gov](mailto:cef@commerce.wa.gov), using the subject line: “<Name of Submitting Entity> GRID2021 Track 2 Application”   * + *The Application must be received by 5:00 PM (PST) on Tuesday, May 18, 2020. Successful Applicants are expected to be notified on June 30, 2021.* | | | | | | | |
| Section 1: Application Summary (MANDATORY, SCORED) | | | | | | | |
| 1.01 | Application Title: | | | Click or tap here to enter text. | | | |
| 1.02 | Dollar Amount of Funding Requested (The maximum request must not exceed the maximum award amount specified for Track 2 projects in RFA SECTION 1.4 FUNDING to be considered responsive to this RFA.) | | | $Click or tap here to enter text. | | | |
| 1.03 | Organization Name: | | | Click or tap here to enter text. | | | |
| 1.04 | Legal status of the Applicant (sole proprietorship, partnership, corporation, etc.) | | | Click or tap here to enter text. | | | |
| 1.05 | The year the entity was organized to do business as the entity now substantially exists | | | Click or tap here to enter text. | | | |
| 1.06 | Organization Mailing Address: | | | Click or tap here to enter text.  Click or tap here to enter text.  Click or tap here to enter text. | | | |
| 1.07 | Email #1: | Click or tap here to enter text. | | Email #2: | | | Click or tap here to enter text. |
| 1.08 | Phone #1: | Click or tap here to enter text. | | Phone #2: | | | Click or tap here to enter text. |
| 1.09 | Organization Official’s Name:  (Signatory to Certifications and Assurances) | | | Click or tap here to enter text. | | | |
| Official’s Title: | | | Click or tap here to enter text. | | | |
| 1.10 | Email: | Click or tap here to enter text. | | Phone: | | | Click or tap here to enter text. |
| 1.11 | Additional Contacts (Please provide name, email, and phone) | | | Click or tap here to enter text. | | | |
| 1.12 | Name, address, and telephone number of each principal officer (President, Vice President, Treasurer, Chairperson of the Board of Directors, etc.) | | | Click or tap here to enter text. | | | |
| 1.13 | The applicant is a utility serving retail electric customers in Washington State? (See RFA Section 1.3 MINIMUM QUALIFICATIONS) | | | | | | |
| Yes | | | | | | |
| No | | | | | | |
| 1.14 | Which category of technology does your project primarily address? Select all that apply. (See RFA Section 1.3 MINIMUM QUALIFICATIONS) | | | | | | |
| Battery energy storage | | | | | | |
| Demand management | | | | | | |
| Distribution protection and automation for integration of renewable energy and/or distributed energy resources | | | | | | |
| Microgrids using renewable energy or other renewable distributed energy resources | | | | | | |
| Transactive controls | | | | | | |
| Building thermal or district energy systems | | | | | | |
| Reduce transmission or distribution congestion issues limiting renewable energy resources | | | | | | |
| Other clean, distributed energy resources (must not be conventional and commercially available technology such as solar PV systems, smart meters, etc., unless there is an inherent innovative application) | | | | | | |
| 1.15 | Would capital assets to be deployed have a lifespan of greater than 13 years and be located in the State of Washington? (See RFA Section 1.3 MINIMUM QUALIFICATIONS) | | | | | | |
|  | Yes | | | | | | |
|  | No | | | | | | |
| 1.16 | At the conclusion of the project’s performance period, would the activities included under the Track 2 Minimum Scope of Work (listed below) be completed? (See RFA Section 1.3 MINIMUM QUALIFICATIONS)   * Procure consulting and/or other services necessary to completing milestones starting in Track 2 and extending through project completion * Conduct project valuation and investment planning * Assess regulatory, legal and environmental suitability and financial viability * Develop formal commercial terms/contractual relationships between project participants (project organization and operational control, legal and financial terms) * Complete 30% Design Basis Memorandum and secure approval from all project partners * Complete detailed plans for project construction, commissioning, and operations (including, but not limited to, procurement of equipment and services, operations, permitting and compliance, and project schedules) | | | | | | |
|  | Yes | | | | | | |
|  | No | | | | | | |
| 1.17 | Statewide Vendor Number (SWV) | | | | | | Click or tap here to enter text. |
| Applicant Universal Business Identifier (UBI) | | | | | | Click or tap here to enter text. |
| Applicant Tax Identification Number (TIN) | | | | | | Click or tap here to enter text. |
| Section 2: Technical Proposal (MANDATORY, SCORED) | | | | | | | |
| 2.01 | Project Approach/Methodology: Include a complete description of the Applicant’s proposed approach and methodology for the project, clearly delineating between the specific scope of work that would be funded under the potential contract, and of the capital project as a whole. This section should convey Applicant’s understanding of the high-level objectives and minimum qualifications of the RFA and how their project relates to these objectives. If the approach described is innovative, including as a result of technology selection, project development, engagement, implementation, or operation, the Applicant may choose to highlight how they are innovative and why this innovation is important in the broader context of grid modernization in the state. If this project will be a catalyst for market transformation, the Applicant must include a description of information and data supporting this claim, along with projected results. | | | | | | |
| Click or tap here to enter text.  *(750 word maximum)* | | | | | | |
| 2.02 | Equity and Community Benefits Narrative: The Equity and Community Benefits Narrative should describe:   1. How the capital project would be designed to provide direct and/or indirect benefits to Federally Recognized Tribal Governments, Tribal Communities, and/or Vulnerable Populations, in particular those in the community where the project is sited. Direct benefits may include but are not limited to: improved electric grid reliability in ways that primarily benefit Federally Recognized Tribal Governments, Tribal Communities and/or Vulnerable Populations; and improved resilience for critical loads and community resources in the face adverse events (for example, power outages, fires, earthquake, etc). Indirect benefits may include but are not limited to: job or training opportunities. 2. Ways in which the project has, or will, meaningfully engage communities as part of project development. Meaningful engagement includes but is not limited to community input to inform project development (co-creation). *Priority will be given to projects demonstrating meaningful co-creation of project design and outcomes.* 3. If the project is sited and/or designed to provide added reliability and/or resilience in communities that experience a high frequency and/or duration of power interruptions, ways in which the project would accomplish this. Responses may include discussion of current reliability challenges (including via indicative CAIDI, SAIDI, and/or SAIFI figures), infrastructure upgrade deferral that would be enabled by the capital project, savings to communities from prevented outage events, etc. | | | | | | |
| Click or tap here to enter text.  *(750 word maximum)* | | | | | | |
| 2.03 | Work Plan: Include all project requirements and the proposed tasks, services, activities, etc. necessary to complete the Track 2 Minimum Scope of Work listed in RFA Section 1.2 OBJECTIVES AND SCOPE OF WORK, and any additional objectives of the scope of work that would be funded under this solicitation. 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 scope of work. Include any required involvement of COMMERCE staff. | | | | | | |
| Click or tap here to enter text.  *(600 word maximum)* | | | | | | |
| 2.04 | Outcomes and Performance Measurement: Briefly describe the high-level impacts/outcomes the Applicant proposes to achieve as a result of the capital project, including benefits to the host utility and to Washington communities. Describe in detail the outcomes of the scope of work proposed under this application, including how these outcomes would be monitored, measured and reported to the state agency. Outcomes described must reflect the Track 2 Minimum Scope of Work listed in RFA Section 1.2 OBJECTIVES AND SCOPE OF WORK. | | | | | | |
| Click or tap here to enter text.  *(500 word maximum)* | | | | | | |
| 2.05 | 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. | | | | | | |
| Click or tap here to enter text.  *(250 word maximum)* | | | | | | |
| Section 3: Management Proposal | | | | | | | |
| 3.01 | 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. If the project includes partnership with Federally Recognized Tribal Governments or Non-Profit Organizations serving Tribal Communities or Vulnerable Populations, please describe the structure of the partnership and relationship between project partners. As applicable, describe lines of authority for personnel involved in performance of this potential contract and relationships of this staff to other programs or functions of the Applicant’s organization. Include who within the organization will have prime responsibility and final authority for the work. (MANDATORY, SCORED) | | | | | | |
| Click or tap here to enter text.  *(250 word maximum)* | | | | | | |
| 3.02 | Staff Qualifications and Experience: Identify staff, including subcontractors, who will be assigned to the potential contract, indicating the responsibilities and qualifications of such personnel, and include the amount of time each will be assigned to the project. (MANDATORY, SCORED) | | | | | | |
| Click or tap here to enter text.  *(250 word maximum)* | | | | | | |
| 3.03 | Identify relevant experience that indicates the qualifications of the Applicant, and any subcontractors, for the performance of the potential contract.  (MANDATORY, SCORED) | | | | | | |
| Click or tap here to enter text.  *(250 word maximum)* | | | | | | |
| 3.04 | Indicate where supplemental expertise will be needed for the performance of the potential contract (such as from consultants, equipment vendors and contractors). (MANDATORY, SCORED) | | | | | | |
| Click or tap here to enter text.  *(250 word maximum)* | | | | | | |
| 3.05 | Include a list of contracts the Applicant has had during the last five years that relate to the Applicant’s ability to perform the services needed under the RFA. List contract reference numbers, contract period of performance, contact persons, telephone numbers, and fax numbers/e-mail addresses. (MANDATORY, SCORED) | | | | | | |
| Click or tap here to enter text. | | | | | | |
| 3.06 | If the Applicant or any subcontractor contracted with the state of Washington during the past 24 months, indicate the name of the agency, the contract number and project description and/or other information available to identify the contract. (MANDATORY) | | | | | | |
| Click or tap here to enter text. | | | | | | |
| 3.07 | If the Applicant’s staff or subcontractor’s staff, or a member of either’s governing board, was an employee of the state of Washington during the past 24 months, or is currently a Washington State employee, identify the individual by name, the agency previously or currently employed by, job title or position held and separation date. If following a review of this information, it is determined by COMMERCE that a conflict of interest exists, the Applicant may be disqualified from further consideration for the award of a contract.(MANDATORY) | | | | | | |
| Click or tap here to enter text. | | | | | | |
| 3.08 | If the Applicant has had a contract terminated for default in the last five years, describe such incident. Termination for default is defined as notice to stop performance due to the Applicant’s non-performance or poor performance and the issue of performance was either (a) not litigated due to inaction on the part of the Proposer, or (b) litigated and such litigation determined that the Proposer was in default. (MANDATORY) | | | | | | |
| Click or tap here to enter text. | | | | | | |
| 3.09 | Submit full details of the terms for default including the other party's name, address, and phone number. Present the Applicant’s position on the matter. COMMERCE will evaluate the facts and may, at its sole discretion, reject the application on the grounds of the past experience. If no such termination for default has been experienced by the Applicant in the past five years, so indicate. (MANDATORY) | | | | | | |
| Click or tap here to enter text. | | | | | | |
| 3.10 | List names, addresses, telephone numbers, and fax numbers/e-mail addresses of two (2) business references for the Applicant and one (1) 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 an application in response to this RFA, 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. (MANDATORY) | | | | | | |
| Click or tap here to enter text. | | | | | | |
| Section 4: Cost Proposal (MANDATORY, SCORED) | | | | | | | |
| 4.01 | Match: Identify the total eligible project costs to be funded by the Applicant. *(Note:* *In-kind or cash claimed as match for this program cannot be claimed as match for any other funding sources.)* | | | $ | | | |
| 4.02 | Indicate what proportion of this funding has already been secured and which is subject to pending applications. | | |  | | | |
| 4.03 | **Identification of Costs:** Identify all costs in U.S. dollars including expenses to be charged for performing the services necessary to accomplish the objectives of the grant project. Applicants are required to collect and pay Washington state sales and use taxes, as applicable.  Costs for subcontractors are to be broken out separately. Please note if any subcontractors are certified by the Office of Minority and Women’s Business Enterprises. | | | | | | |
| $ | | | | Equipment | | |
| $ | | | | Salaries & Benefits | | |
| $ | | | | Contractor/Consultant Services | | |
| $ | | | | Indirect/Overhead | | |
| $ | | | | Other 1  If dollar amount entered is greater than zero, please list major costs:  **Click or tap here to enter text.** | | |
| $ | | | | Other 2  If dollar amount entered is greater than zero, please list major costs:  **Click or tap here to enter text.** | | |
| $ | | | | Total | | |
| 4.04 | Please provide a clear and concise budget narrative to identify what costs are planned to be funded through this grant. Use the table below to identify Scope of Work, Milestones, estimated costs per Milestone, and estimated start/end dates. | | | | | | |
| Click or tap here to enter text.  ***(250 word maximum)*** | | | | | | |
| **Milestone Number and Title** | | **Cost to Complete** | | | **Start/End Dates** | |
|  | **Service Contracts with Partners** | | $ | | |  | |
|  | **Project Development and Confirmation** | | $ | | |  | |
|  | **Engineering Design** | | $ | | |  | |
|  | **(Add additional rows as applicable)** | |  | | |  | |

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| --- | --- | --- |
| Attachments | | |
| # | **Description** | Attachment Naming Convention |
| 5 | CERTIFICATIONS AND ASSURANCES (MANDATORY) The Certifications and Assurances form (Exhibit A to the RFA) must be completed, signed and dated by a person authorized to legally bind the Applicant to a contractual relationship, e.g., the President or Executive Director if a corporation, the managing partner if a partnership, or the proprietor if a sole proprietorship. | 5\_<Name of Submitting Entity>\_GRID CERTIFICATIONS AND ASSURANCES |
| 6 | STAFF RESUMES (MANDATORY, SCORED) Provide resumes for staff (at minimum those named in response to Application Question 3.02), 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 have the prior approval of COMMERCE. | 6\_<Name of Submitting Entity>\_GRID RESUMES |
| 7 | SITE INFORMATION DATA SHEET (MANDATORY, SCORED) The site information data sheet (template provided at the website listed in RFA Section 2.1 RFA COORDINATOR) must be completed for all project sites included in the application.   1. Street Address of the capital project site. 2. Median Income: ACS 2018 5-year household median income levels for the city or town where the site is located    * 1. Go to <https://data.census.gov/cedsci/>.      2. Enter the name of your city or town and the word “income” in the search bar.      3. Click on the first search result under the heading “Explore Data” near the top of the page.      4. Near the top of the page, use the “Product:” dropdown menu to select the “2018: ACS 5-Year Estimates Subject Tables” data set.      5. Scroll down to learn your municipality’s Estimate for Median Income (dollars) for Households.      6. *Note: If an Applicant’s city- or town-level data is unavailable from the source provided above, an Applicant is permitted to substitute county-level ACS 5-Year Estimates instead. If city- or town-level data is available, the Applicant must use that data to determine eligibility for this reduced match option.* 3. Environmental Health Disparities: Environmental Health Disparities v1.1 rank for the census tract where the site is located 4. Based on the Washington Department of Health’s Washington Tracking Network tool 5. <https://fortress.wa.gov/doh/wtn/wtnibl/> 6. Click “Environmental Health Disparities V 1.1” on the left-hand column 7. Locate the exact location of the project’s site(s) and click that tract (optionally use the location tool to search for the site’s physical address) 8. The rank is shown in the left-hand column adjacent to “Environmental Health Disparities V 1.1” 9. Rural Status: Whether the proposed site is in an area identified as “non-entitlement” according to information provided by COMMERCE’s Community Development Block Grant program. 10. Based on <http://www.commerce.wa.gov/wp-content/uploads/2016/06/CDBG-2014-Map-of-Local-Governments-Served.pdf> 11. Note that some cities in Non-Entitlement Counties are identified as Entitlement Cities and will count as entitlement areas for the purposes of this program | **7\_<Name of Submitting Entity>\_GRID SITE INFORMATION** |
| 8 | DIVERSE BUSINESS INCLUSION PLAN (MANDATORY)  The Diverse Business Inclusion Plan form (Exhibit B to the RFA) must be completed and submitted as a component of the application. See RFA SECTION 2.7 DIVERSE BUSINESS INCLUSION PLAN for more information. | 8\_<Name of Submitting Entity>\_GRID DIVERSE BUSINESS INCLUSION |
| 9 | WORKERS’ RIGHTS CERTIFICATION (MANDATORY, SCORED)  The Workers’ Rights Certification form (Exhibit C to the RFA) must be completed, signed and dated by a person authorized to legally bind the Applicant to a contractual relationship, e.g., the President or Executive Director if a corporation, the managing partner if a partnership, or the proprietor if a sole proprietorship. | 9\_<Name of Submitting Entity>\_GRID WORKERS RIGHTS CERTIFICATION |
| 10 | PARTNER LETTERS OF SUPPORT (OPTIONAL, SCORED)  The applicant may optionally submit letters of support from project partners demonstrating their support for and commitment to carrying out the project as written. Letters of Support may also describe the partner’s relationship to the Applicant, as well as any anticipated involvement of the partner in the project. Letters of support should be compiled into a single PDF.  If the Applicant is not a Federally Recognized Tribal Government (nor a subdivision of a Federally Recognized Tribal Government) and the capital project would benefit community(ies) located in census tracts that are fully or partially on "Indian country" as defined in 18 U.S.C. Sec. 1151, the presence or absence of a Letter of Support from a Federally Recognized Tribal Government will contribute to a portion of the Applicant’s Equity & Community Benefits score in addition to other scoring impacts described in Section 4.2. | 10\_<Name of Submitting Entity>\_GRID PARTNER LETTERS OF SUPPORT |
| 11 | OMWBE Certification (OPTIONAL AND NOT SCORED)  Include proof of certification issued by the Washington State Office of Minority and Women’s Business Enterprises (OMWBE) if certified minority-, women-, or veteran-owned firm(s) will be participating on this project. For more information please visit: <http://www.omwbe.wa.gov>. | 11\_<Name of Submitting Entity>\_GRID OMWBE |
|  | | |
| *End of Application* | | |
| *See following page for Application Process Survey* | | |

*Section 6: APPLICATION PROCESS SURVEY*

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 impact the evaluation of your application in any way.*

1: Strongly Disagree

2: Disagree

3: Neither Agree nor Disagree

4: Agree

5: Strongly Agree

|  |  |
| --- | --- |
| Name of Applicant: | |
|  | |
| Application Survey Questions | Responses |
| 1. The guidelines provided enough information on the program. |  |
| 1. The Pre-Application Conference was helpful introducing the application process |  |
| 1. The Request For Applications (RFA) application instructions were clear. |  |
| 1. The RFA 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. |  |