



Due to the retirement of PowerClerk on January 1, 2022, GoSolarSF is now processing new Low-Income DAC-SASH Applications using the below form.

Please email this form to <u>GoSolarSF@sfwater.org</u> with the subject line "Submission of NEW Low-Income DAC-SASH Project Application number HHP-X (contact the SFPUC for the next application number to use). Should you rather not email any data due to web security concerns, contact the GoSolarSF team and we will provide you with a secure link for uploading that data.

NEW APPLICATION FORM (FOR LOW-INCOME DAC-SASH ONLY)		
Application No. (Call SFPUC for Next		
Application number) Submission Date		
Submission Bate		
Documents Included	☐ Terms and Conditions	
	☐ Insurance Declaration	
	☐ CARE PG&E Bill from Within the Last Six Months for Site	
	☐ Solar Purchase Agreement	
	☐ CleanPowerSF Enrollment Verification (if CleanPowerSF enrollment is not indicated on above PG&E bill)	
	☐ GRID Intake Form Confirming Low Income Eligibility	
DATE	NAME, TITLE, and SIGNATURE	
HOST CUSTOMER		
Company Name		
Contact Person Name		
Contact Person Title		
Mailing Address		
City, State, Zip		
Email		
Business Phone		
SITE OWNER		
Company Name		
Contact Person Name		
Contact Person Title		
Mailing Address		
City, State, Zip		
Email		





Business Phone			
PAYEE			
Company Name			
Contact Person Name			
Contact Person Title			
Mailing Address			
City, State, Zip			
Email			
Business Phone			
APPLICANT			
Company Name			
Contact Person Name			
Contact Person Title			
Mailing Address			
City, State, Zip			
Email			
Business Phone			
PROJECT SITE INFORMATION / EL	ECTRIC UTILITY SERVICES		
Address			
City, State, Zip			
County			
Service Account Number			
Meter Number(s)			
EQUIPMENT INFORMATION	Manufacturer:	Model:	Quantity:
PV Modules			
Inverters			
CEC-AC System Rating kW			
System Orientation	☐ Fixed ☐ Single-A	xis Tracking 🔲 Dual-A	Axis Tracking
Estimated Annual Energy			
Production kWh/yr			
PROJECT INCENTIVE CALCULATION	N		
CEC-AC System Rating			
Design Factor			
Incentive Type			
Incentive Details			
Requested Incentive Amount			
Total System Cost			





BELOW IS FOR SFPUC USE ONLY			
Application Number			
Approvals / Reviews	Name and Date		
*Confirmed Reservation			
Final Application Review			
Application Review #2			
Application Review #1			
Project Status Change	Date		
*Incomplete			
*Cancel			
*Denied			
*Expired			
Communications			
*Correspondence Letter Issued	☐ Confirmed Reservation		
	Low Income Application Approval		
	Low Income Application Incomplete		
	☐ Low Income Application Cancelled		
	Low Income Application Denied		
	☐ Low Income Application Expired		