MISSOURI DEPARTMENT OF ECONOMIC DEVELOPMENT DIVISION OF ENERGY

ALTERNATIVE FUEL INFRASTRUCTURE APPLICATION FOR CERTIFICATION

FOR OFFICE USE ONLY	
APPLICATION NUMBER	DATE RECEIVED
DATE APPROVED	CERTIFICATION NUMBER

ARE YOU ELIGIBLE?

Yes No

☐ ☐ 1. Was construction of this facility completed after August 28, 2008?

☐ ☐ 2. Was the facility placed in service **on** or after January 1, 2009?

☐ ☐ 3. Does the project use a minimum of 70% blend of alternative fuel or any mixture of biodiesel?

If the answer to questions 1, 2, or 3 is "no", the applicant will not be eligible for the tax credit.

☐ ☐ 4. Was at least 51% of the project cost paid to a qualified Missouri contractor?

☐ ☐ 5. Is the contractor(s) principal place of business located in Missouri and established for five years or more?

If no Missouri contractor is located within 75 miles of the property, the requirement that 51% of the costs be paid to a Missouri contractor does not apply.

PROJECT OWNER INFORMATION (We will send all correspondence to this person)

PROJECT OWNER'S NAME			
BUSINESS NAME	PRINCIPAL BUSINESS ACTIVITY (or SIC, if known)		
ADDRESS			
CITY		STATE	ZIP CODE
TELEPHONE	EMAIL ADDRESS		
MISSOURI CHARTER NUMBER (IF CORPORATION)	MISSOURI INTEGRATED TAX NUMBER (MITS)		
TAX ID OR SSN			
CALENDAR YEAR BEGINNING	CALENDAR YEAR ENDING		

PROJECT INFORMATION CONTACT (Who can answer technical questions about the project?)

NAME		
TITLE	TELEPHONE	EMAIL ADDRESS

PROJECT SITE

SITE ADDRESS		
CITY	COUNTY	ZIP CODE

CONSTRUCTION OR INSTALLATION DATES

COMPLETION DATE	DATE PLACED IN SERVICE

ARCHITECT, ENGINEER, VENDOR OR CONTRACTOR OF PROJECT (if more than one, please attach additional listings)

FIRM NAME		
CONTACT PERSON		
ADDRESS		
CITY	STATE	ZIP CODE
TELEPHONE	EMAIL ADDRESS	

TYPE OF ALTERNATIVE FUEL USED
(Must be 70% blend or higher for all fuels except biodiesel) (Check all applicable boxes)

☐ Ethanol	☐ Natural Gas	☐ Propane
☐ Compressed Natural Gas	☐ Liquefied Natural Gas	☐ Any mixture of biodiesel

PROJECT COSTS

Eligible project costs include:
Fabrication of pre-manufactured equipment or process piping used in the construction of such facility.
Construction of such facility.
General maintenance of such facility during the time period in which such facility receives any tax credit under this section.

Facility costs cannot include:
Costs associated with the purchase of land upon which to place a qualified alternative fuel vehicle refueling property.
Costs associated with the purchase of an existing qualified alternative fuel vehicle refueling property.
Costs for the construction or purchase of any structure.

	COST
Equipment and Materials	**$**
Installation and labor	**$**
Other (general maintenance of facility)	**$**
TOTAL COSTS	**$**
Note any federal tax credits or grants (the sum of any rebates or cash payments)	**$**

Please submit an itemized list of each expense paid by the applicant directly related to the construction of the alternative refueling system and any supporting documentation.

PROJECT OWNER STATEMENT

1. I understand that this tax credit application is a public record and that the Missouri Department of Economic Development may be required by law to disclose information in this tax credit application to the public on request.
2. I understand that the Missouri Department of Economic Development does not endorse any company that requests information on this application and does not sell information as a mailing list.
3. I understand that section 135.805.9, RSMo requires the recipient of any environmental tax credit to annually, for a period of three years following issuance of tax credits, provide to the Missouri Department of Economic Development information detailing any change to the type of equipment purchased, if applicable. I understand that failure meet the reporting obligations of section 135.805, RSMo or any determination of fraud in the application process could result in penalties pursuant to section
135.810, RSMo .
4. I verify that the project owner does not restrict membership, sales or services on the basis of race, color, creed, religion, national origin, sexual preference or gender.
5. I certify pursuant to section 285.025 that the project owner employs no illegal aliens.
6. I have completed this form to the best of my knowledge.
7. I certify that I am the project owner or the authorized agent.
8. I certify that all costs are eligible.

☐ *I have read and agree with the terms and conditions of the Project Owner Statement.*

SIGNATURE	TITLE
PRINTED NAME	DATE

MAIL COMPLETED APPLICATION AND DOCUMENTATION TO:	MISSOURI DEPARTMENT OF ECNOMIC DEVELOPMENT'S DIVISION OF ENERGY P.O. BOX 1766, JEFFERSON CITY, MO 65102-0176 TELEPHONE: 573-751-2254 FAX: 573-751-6860