



HOOD RIVER COUNTY COMMERCIAL PROPERTY ASSESSED CLEAN ENERGY (CPACE) PROJECT APPLICATION

Mid-Columbia Economic Development District (MCEDD) administers Hood River County's Commercial Property Assessed Clean Energy (CPACE) program. The CPACE Program allows owners of eligible commercial property to obtain long-term financing from private capital providers for certain qualified improvements. While the financing is repaid to the Capital Provider, the CPACE Act directs the County to impose a voluntary benefit assessment and record a lien (the "CPACE Lien") on the property.

The Hood River County CPACE program was established March 20, 2023 by Ordinance 378, and Resolution 2525.

The following highlights the steps of the CPACE application process:

- 1. Property owner develops an energy efficiency, renewable energy, water conservation, and/or seismic rehabilitation project idea.
- 2. Property owner identifies a capital provider for their project.
- 3. Property owner and capital provider coordinate to complete application materials and submit to MCEDD email to Lindsay@mcedd.org.
- 4. MCEDD staff reviews application and issues letter of approval, conditional approval or denial within 10 business days.
- 5. Upon approval property owner pays processing and documenting fee to MCEDD.
- 6. County Administration or designee (MCEDD), releases the agreements to the property owner for recording.
- 7. Property owner provides recording number to County Administration, or designee (MCEDD).
- 8. Capital provider funds the project.
- 9. After project completion, applicant provides a signed certification form to the capital provider and MCEDD.

CPACE Project Application

Property Owner Inf	ormation
Legal Name (s):	
Mailing Address:	
Email:	Phone:
Property Informat	tion
Property Address	:
Parcel Numbers:	
Property Descript	tion:
Property Type: 🛛] Commercial 🔲 Industrial 🗌 Agricultural
🛛 Multi-family (\	with five or more dwelling units) 🛛 Other
Building uses:	
Qualifying owner	: 🔲 Limited Liability Company 🗌 Corporation 🔲 Trust
🛛 General or lin	mited partnership 🛛 Individual/Sole proprietorship
Proposed Qualif	ied Improvements – Qualifying Improvement Certification
The improvemen	ts sought are (check all that applies):
Energy EfficieSeismic Rehal	ncy 🔲 Renewable Energy 📋 Water Conservation bilitation
i. If Energy Effic	iency, improvement is:
HVAC System	□ Windows & Doors □ Temperature Control System □ Lighting
□ Siding/Insulat	ion/Roofing 🛛 Appliances 🗍 Other

ii. If Renewable Energy, improvement is:
Solar Panels 🔲 Thermal 🗌 Other
And if Renewable Energy, improvement is (check one):
Direct Purchase
Power Purchase Agreement
iii. If Water Conservation, improvement is:
\square Lead Reduction \square Low-flow fixtures \square Irrigation System \square Control System
□ Water Collection & Reuse □ Other
iv. If Seismic Rehabilitation, improvement is:
□ Seismic Retrofit □ Other

Capital Provider Information

Legal Name:				
Contact Person:				
Mailing address:				
City/State/Zip:				
Email:	Phone:			
Must answer 'Yes' to at documentation per Pro		0 1	ovide requ	ired
Federal or state-chartered bank or credit union:			🗌 Yes	🗆 No
Registered capital provider in more than two states:			🛛 Yes	🗆 No
Qualified to do business in Oregon:			🛛 Yes	🛛 No
Lienholder Consent For	m (signed and notari	zed)		
□ Attached	Delivered at clos	ing		

If consent form will be executed at closing, conditional approval is given. If consent is delivered at closing, applicant must hold county-executed closing documents in escrow until consent is obtained. At discretion of this office, this application may be amended and returned with copy of consent attached.

Application Signatures

By signature below, the applicants (Property Owner and Capital Provider) affirm that the information and documentation are true and correct to the best of their ability and that the applicants understand the risks of participating in the CPACE program. Further, the applicants affirm that neither the county, its governing body, executives, nor employees are personally liable as a result of exercising any rights or responsibilities granted under this program.

Application signed and dated on:	
On behalf of property owner:	
Name and title:	
On behalf of capital provider:	
Name and title:	

TO BE COMPLETED BY AUTHORIZED COUNTY OFFICIAL

	Application:		Approved		Conditional	y Ap	proved		Deni	ec
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On behalf of Hood River County:

Name and title:

Conditions of approval, if applicable: