

Appendix C: Utility Coordination Form

The Utility Coordination Form is optional but recommended for applicants requesting North Texas Zero Emission Vehicles (NTxZEV) Call for Projects (CFP) funding for battery-electric vehicle (BEV) and/or supporting electric vehicle supply equipment (EVSE) infrastructure projects. The information identified in this document may be used to support the Feasibility and Risk scoring category of the NTxZEV CFP Guidelines, as detailed on page 24 and 25 of the Guidelines.

The intent of this form is to ensure **awareness** of all parties involved in the potential new zero-emission vehicle project. The Utility Coordination Form demonstrates an applicant has begun planning with their utility provider for BEV and/or EVSE adoption and the utility has determined the applicant's project is feasible.

This document is non-binding. If awarded, all program beneficiaries who receive funding for BEV or supporting EVSE will be required to submit the Utility Coordination Form prior to receiving reimbursement for the new vehicle and supporting infrastructure.

Instructions: Please complete all fields to the best of your ability. The information identified in this document should match the information provided in the Application Form for the applicable projects.

1. Fleet Information

	Requested in Application <i>[Please provide the number of BEV and EVSE requested in your application.]</i>	Current Electric Fleet at time of Application Submission <i>[Please provide the number of vehicles and chargers already in your electric fleet.]</i>
Type and Number of Electric Vehicles/Equipment:		
Number of DC Fast Charger Units:		
Number of Level 2 AC Charger Units:		
Number of Other EV Charger Units: <i>(please specify the type of chargers)</i>		
Describe any other features that would impact the grid (e.g., BESS, solar):		
Expected location(s) (street, city, state) of Charger and/or Electrical Infrastructure Installations:		

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2. Utility Information

If applicants are communicating with different utility providers about their potential BEV and/or supporting EVSE infrastructure projects, please fill out the information below for each utility provider. Copy this page for additional utility provider information, as necessary.

Utility Provider #1

Name of the Utility Provider:	
Utility Contact Name:	
Utility Contact Phone:	
Utility Contact Email:	

Additional Utility Providers, if applicable

Name of the Utility Provider #2:	
Utility Contact Name:	
Utility Contact Phone:	
Utility Contact Email:	

3. Applicant and Utility Coordination Certifications and Assurances

By signing this Affirmation, I certify that I am an Authorized Representative for the Applicant or Utility Provider identified below.

Applicant Certification

I have discussed the project plan for the BEV and supporting EVSE infrastructure outlined above with the Utility Company.

Project Contact

Name:	
Title:	
Organization:	

Signature (Project Contact):

Date: _____

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Authorized Official

Name:	
Title:	
Organization:	

Signature (Authorized Official):

Date: _____

Utility Provider Certification

I have discussed the project plan for the BEV and supporting EVSE infrastructure outlined above with the Utility Company.

Utility Provider #1

Name:	
Title:	
Organization:	

Signature (Utility Provider):

Date: _____

Utility Provider #2

Name:	
Title:	
Organization:	

Signature (Utility Provider):

Date: _____