

FUEL CELL PROPERTY TAX EXEMPTION APPLICATION PURSUANT TO CGS 12-81(56) or (57)(A) (as amended by PA 21-180) or (57)(F) or (62) Form M-44a

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	Please complete the information below and provide additional documentation as necessary.					
1.	. LEGAL OWNER: (If applicant from Page 1 is not the system owner, identify the owner by name and address)					
2.	PHYSICAL LOCATION:					
a) If other than this location, please provide address of property being served by fuel cell:						
3.	DATE OF FUEL CELL MO / DAY / YR INSTALLATION:	4. TOTAL COST OF ENERGY \$	SYSTEM: (INCLUDING SITE PREP, ELECTRICAL & INSTALLATION)			
5.	SELECT THE PURPOSE FOR FUEL CELL:	□AGRICULTURAL	□INDUSTRIAL			
		□COMMERCIAL □EDUCATIONAL	□RELIGIOUS □RESIDENTIAL			
6.	GENERAL DESCRIPTION OF FUEL CELL: (Ir	nclude type of fuel cell system (i.e.:	Molten Carbonate (MCFC), Solid Oxide (SOFC))			
7.	7. WHAT EXTERNAL COMPONENTS ARE INCLUDED AT THIS SITE: (i.e.: HRSG, Absorption chillers) Describe external components to include manufacturer, model, and include all costs (plus installation). ENTER N/A IF NONE APPLIES:					
8.	FUEL CELL NAMEPLATE CAPACITY IN MW	7: (IF AVAILABLE, ATTACH PHO	TO OF NAMEPLATE CAPACITY)			

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a.) What has the	JPPORTS ONLY ONE LOCATION, WHAT IS THE LOAI load (usage) been, on average, for the prior three years? Pl from the location serviced, or to be serviced, by the fuel ce	ease calculate this amount using the past three years	_(in megawatts) _ (in megawatts)			
10. IF THE LOCATION SERVED IS GREATER THAN ONE LOCATION, WHAT IS THE AGGREGATED LOAD OF THE BENEFICIAL ACCOUNTS PARTICIPATING OR TO BE PARTICIPATING IN VIRTUAL NET METERING? (in megawatts) a.) What has the aggregate load of the beneficial accounts participating in, or to be participating in, virtual net metering been, on average, for the past three years? Please calculate this amount using the past three years of electricity bills from the location(s) serviced, or to be serviced, by the fuel cell: (in megawatts)						
	CTRICITY AT ANYTIME BE: (ON-PEAK OR OFF-PEAK) ☐ STORED AT THE FUEL CELL LOCATION ☐ SENT TO THE GRID	OTHER (PLEASE SPECIFY):				
12. ATTACH A COPY OF THE <u>POWER PURCHASE AGREEMENT AND/OR VNM AGREEMENT</u> : (if participating in Vial Net Metering)						
	are true and correct.					
CERTIFICATION	Owner Signature:	Telephone:				
	Date:	Email:				
ASSESSOR	☐ ASSESSOR APPROVE	☐ ASSESSOR DENIED				
USE ONLY	Assessor Signature:	Date:				