SOLAR INTAKE FORM

Company Name:

Owner Name:

Mailing Address:

City:

State: Zip Code: Country:

Property Address:

City:

State: Zip Code: Country:

Property Longitude / Latitude:

Other Property Identifier (ex: PID etc.):

Property State: Zip Code: Country:

Phone Number:

Email Address:

Property Type: *(Choose one of the following)*

❒ Vacant ❒ Data Center ❒ Established Business ❒ Church ❒ School ❒ New Construction

Total Acreage Available:

EVCS: ❒ Yes ❒ No Solar: ❒ Yes ❒ No Solar Farm: ❒ Yes ❒ No