



COMMERCIAL / INDUSTRIAL INSTALLATION PROPERTY TAX EXEMPTION APPLICATION
PURSUANT TO CGS 12-81 (57)(B) or (57)(C) or (57)(D) or (57)(F) or (62) or (63)
Form M-44a

Please complete the information below and provide additional documentation as necessary.
A SEPARATE APPLICATION MUST BE Completed for Fuel Cell installations (see enclosed)

1. LEGAL OWNER: (If applicant from Page 1 is not the system owner, identify the owner by name and address)

2. ENERGY SYSTEM INFORMATION FORMAT TO BE PROVIDED BY APPLICANT:

PROPERTY LOCATION	INSTALL DATE (MO/DAY/YR)	TOTAL COST (TO INCL. INSTALL & ELECTRICAL)	SYSTEM SIZE (IN KW(WHICH SUBSECTION OF CGS 12-81 IS EXEMPTION BEING CLAIMED UNDER? (SEE MAIN APPLICATION FOR STATUTE REFERENCES)	ASSESSOR'S USE: DO THESE ENERGY SYSTEMS MEET THE STANDARD FOR EXEMPTION AS ESTABLISHED BY CGS 12-81(57) or (62) or (63) of PA21-180?
					<input type="checkbox"/> ASSESSOR APPROVE <input type="checkbox"/> ASSESSOR DENIED

IMPORTANT: SEE DETAILED DESCRIPTION REQUIREMENT OF THE ENERGY SYSTEM FOR WHICH THIS EXEMPTION APPLICATION APPLIES. IF THE CLASS I EQUIPMENT IS USED FOR COMMERCIAL &/OR INDUSTRIAL PURPOSES, **THE FOLLOWING INFORMATION MUST BE PROVIDED:**

- 1.) Nameplate capacity of such Class I source system (i.e.: kWh produced per year)
- 2.) Capacity **for one year** of the facility or location where such generation or displacement is located (i.e.: kWh consumed)
- 3) Copy of Power Purchase Agreement and/or VNM Agreement (if participating in Virtual Net Metering)
- 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: (in megawatts)

b.) Identify the customer(s) & location(s) of the beneficial accounts : _____

CERTIFICATION	I hereby certify that the statements made herein have been examined by me, and to the best of my knowledge and belief are true and correct.	
	Applicant Signature: _____	Telephone: _____
	Print or Type Name: _____	Date: _____ Email: _____
ASSESSOR USE ONLY	Notes: _____	
	Assessor Signature: _____	Date: _____