Revised September 2022

P. COMMETICAL PROPERTY OF THE PROPERTY OF THE

FUEL CELL PROPERTY TAX EXEMPTION APPLICATION PURSUANT TO CGS 12-81 (57)(B) or (57)(C) or (57)(D) or (57)(F) 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 S	SYSTEM: (INCLUDING SITE PREP, ELECTRICAL & INSTALLATION)				
5.	SELECT THE PURPOSE FOR FUEL CELL:	□ AGRICULTURAL □ COMMERCIAL □ EDUCATIONAL	□INDUSTRIAL □RELIGIOUS □RESIDENTIAL				
6. GENERAL DESCRIPTION OF FUEL CELL: (Include 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.	8. FUEL CELL NAMEPLATE CAPACITY IN MW: (IF AVAILABLE, ATTACH PHOTO OF NAMEPLATE CAPACITY)						

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a.) What has the	IF FUEL CELL SUPPORTS ONLY ONE LOCATION, WHAT IS THE LOAD FOR THAT LOCATION:						
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) c.) What has the aggregate load of the beneficial accounts participating in, or to be participating in, virtual net metering been, <i>on average</i> , 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:							
11. WILL THE ELEC	ECTRICITY AT ANYTIME BE: (ON-PEAK OR OFF-PEAK)						
☐ STORED AT THE FUEL CELL LOCATION ☐ SENT TO, OR USED BY, ANOTHER 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 Virtual Net Metering)							
	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.						
CERTIFICATION	Applicant Signature: Tele	ephone:					
	Print or Type Name: Date:	Email:					
ASSESSOR	☐ ASSESSOR APPROVE	☐ ASSESSOR DENIED					
USE ONLY	Assessor Signature: Date:						
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