

NORTH CAROLINA C-PACE PROGRAM
Exhibit E: Checklist and Property Owner Certification

CHECKLIST	APPLICANT-PROVIDED INFORMATION	EXAMPLES OF ACCEPTED DOCUMENTATION	NOTES
<input type="checkbox"/> PROPERTY ADDRESS		DEED TITLE INSURANCE REPORT ASSESSOR OFFICIAL RECORD The address must be within a participating jurisdiction.	
<input type="checkbox"/> OWNER INFORMATION	Legal name(s) of Owner(s): Name of contact person: Phone number: Email address:	DEED TITLE INSURANCE REPORT All names must match exactly what is on the Title Insurance Report and Assessor Official Record If the name(s) is different: Certified copy of personal/corporate name change; Certified copy of merger/sale document reflecting name change; Certified copy of Power of Attorney	
<input type="checkbox"/> QUALIFYING PROPERTY	is this Property: _____ commercial _____ agricultural _____ industrial _____ multi-family of 5+ units	ASSESSOR / TREASURER OFFICIAL RECORDS APPRAISAL ZONING REPORT	

<input type="checkbox"/> QUALIFYING OWNER	<p>Property is owned by a: ___ limited liability company ___ general or limited partnership ___ corporation ___ individual/Sole proprietorship ___ trust</p>	<p>If property is held by a limited liability company, general or limited partnership or a corporation, the applicant should include a copy of the certificate of formation, organization, incorporation or similar document and a good standing certificate/ certificate of existence from the state or organization and, if not organized in North Carolina, a certificate of registration to conduct business in North Carolina as a foreign entity.</p> <p>If a trust, a copy of the trust agreement or a trustees' certificate.</p> <p>If an individual, a copy of a valid driver's license.</p> <p>If the application is to be signed by a party other than the applicant, then, in addition to the foregoing, a power of attorney or corporate resolution authorizing said party.</p>	
<input type="checkbox"/> CAPITAL PROVIDER	<p>Legal Name:</p> <p>Name of contact person:</p> <p>Phone number:</p> <p>Email address:</p>		

By signature below, the applicants (the property owner and capital provider) affirm that the information and documentation are true and correct to the best of their ability and that the applicants understand the risks of participating in the c-pace program; further, the applicants affirm that neither the state, the local governing body, executives, nor employees are personally liable as a result of exercising any rights or responsibilities granted under this program.

The property owner certifies they are:

- 1. The holder of title in fee simple to the qualifying commercial property and that title to the qualifying commercial property is not in dispute;**
- 2. Current on all mortgage payments and property taxes; and**
- 3. Not insolvent or in bankruptcy proceedings.**

ON BEHALF OF PROPERTY OWNER: _____

NAME & TITLE: _____

DATE: _____

ON BEHALF OF CAPITAL PROVIDER: _____

NAME AND TITLE: _____

DATE: _____

TO BE COMPLETED BY AUTHORIZED OFFICIAL

APPLICATION: _____ APPROVED _____ CONDITIONALLY APPROVED _____ DENIED

ON BEHALF OF ECONOMIC DEVELOPMENT PARTNERSHIP OF NORTH CAROLINA: _____

NAME AND TITLE: _____

DATE: _____