**Empowering Energy Partnerships in Indiana Communities (EPIC) Grant Application Form**

**Section 1: Applicant Information**

1. **Applicant Name:** Click or tap here to enter text.
2. **Street Address:** Click or tap here to enter text. **City:** Click or tap here to enter text.

**State:** Click or tap here to enter text. **Zip + 4 Code:** Click or tap here to enter text.

1. **County of project location:**  Click or tap here to enter text. **Zip + 4 Code of project location:** Click or tap here to enter text.
2. **Unique Entity Identifier (UEI) #:** Click or tap here to enter text.
3. **Supplier ID #:** Click or tap here to enter text. **Tax EIN:** Click or tap here to enter text.
4. **Applicant Contact (the person who will manage the project)** Click or tap here to enter text.

**Name:** Click or tap here to enter text. **Phone:** Click or tap here to enter text.

**Email:** Click or tap here to enter text.

1. **Authorized Representative (the person signing contract)**

**Name:** Click or tap here to enter text. **Cell Phone:** Click or tap here to enter text.

**Email:** Click or tap here to enter text.

1. **Identify the type(s) of eligible entity that applies to the applicant (see page 4 of the Handbook for eligible entities).** Click or tap here to enter text.

**Affirmation**

1. To the best of my knowledge, the information in this application is true and correct. I am legally authorized to sign and submit this application on behalf of this organization, which is legally eligible to enter a grant contract.
2. I understand that submitting false or misleading information in connection with this application may result in the application or organization being found ineligible for financial assistance under the OED Grant Program. I further understand that receiving public grant funds because of false representations constitutes an act of fraud.
3. The applicant will comply with all conditions of the program if funding is awarded. I understand that OED may conduct audits and conduct site inspections before or after grants are awarded and disbursed.
4. I acknowledge to comply with all Davis-Bacon Act requirements as determined by subchapter IV of Chapter 31 of Title 40, United States Code. For more information click [here](https://www.dol.gov/agencies/whd/laws-and-regulations/laws/dbra).
5. I agree, if selected for funding, to undergo the required Department of Energy sponsored Davis-Bacon Act compliance training.

SIGNATURE: Click or tap here to enter text. DATE: Click or tap here to enter text.

TITLE: Click or tap here to enter text.