

Applicant information

Complete this section if you are a business or organization

Type of applicant: Condominium syndicate Developer, building manager, or owner
 Other: _____

Name: _____ Québec enterprise number: _____

Address: _____ Suite or P.O. box: _____

Municipality: _____ Province: Québec Postal code: _____

Representative

Last name: _____ First name: _____

Email: _____ Telephone: _____

Complete this section if you are an individual

Type of applicant: Owner of a multi-unit dwelling Owner of an electric vehicle

Last name: _____ First name: _____

Social insurance number (SIN)

Individuals will be required to provide their social insurance number (SIN) to Ministère de l'Environnement, de la Lutte contre les changements climatiques, de la Faune et des Parcs (MELCCFP) when their application for reimbursement is being processed.

IMPORTANT: Do NOT enter your SIN on the form or in any other written communication. An MELCCFP representative will contact you so you can provide the information verbally.

Address: _____ Apartment number or unit: _____

Municipality: _____ Province: Québec Postal code: _____

Email: _____ Telephone: _____

Preferred language of communication: French English

Information about the building where the charging station is installed

Total number of rental or condominium units in the building where the charging station is installed: _____

For a building with three or four units, indicate the construction date: _____ (dd/mm/yyyy)

Electric vehicle Information (optional)

If you indicated that you own an electric vehicle, please specify:

Make: _____ Model: _____

Vehicle identification number (VIN): _____

Information about the installed charging station

If your application concerns several charging stations of different models, use the appendix.

Brand: _____ Model: _____

Number of installed connectors covered by this application: _____

Type of acquisition

Purchase Lease Purchase price per connector (before taxes): _____

Date of purchase: _____ (dd/mm/yyyy) Lease start date: _____ (dd/mm/yyyy)

For at least three years, the charging stations covered by this application will be used solely to charge electric vehicles owned by residents of the multi-unit dwelling or by their visitors. Yes No

Information about the future charging station

Number of connectors it will be possible to install as a result of the work covered by this application: _____

Information about the installation work

Electrical contractor

Company name: _____ RBQ licence No.: _____

Cost of installation (before taxes): _____

Installation cost per connector (before taxes): _____ Installation date: _____ (dd/mm/yyyy)

If applicable, also include amounts (before taxes) for:

Professional fees incurred for charging solution design and preparation of plans and specifications: _____

Cost of acquiring a device or software to manage the energy used to charge electric vehicles: _____

Oversizing costs before taxes: _____

Installation location (if different from applicant address above)

Address: _____ Suite or P.O. box: _____

Municipality: _____ Province: Québec Postal code: _____

Total Financial Assistance

If you have applied for funding through a complementary program offered by another government department or agency or by an energy distributor, please indicate this in the table below.

Organization	Program Name	Amount Requested	Amount Obtained

Applicant commitments

- > The charging station(s) and the electricity supply infrastructure installation work covered by this application are not eligible for financial assistance under another program funded by PACC 2020 (Climate Change Action Plan).
- > The charging station(s) must remain in service for at least three years and be used to charge electric vehicles owned by residents of the multi-unit dwelling.
- > Financial assistance obtained under complementary programs (not funded by the Green Fund) must not exceed 75% of total eligible costs when combined with the amount applied for under this program.

Declaration, consent and tax credit

I understand that the information provided in this application or in connection with it will be used by Ministère de l'Environnement, de la Lutte contre les changements climatiques, de la Faune et des Parcs (MELCCFP) and its designated provider to manage the financial assistance received from the Program for the purpose, in particular, of verifying eligibility, disbursing financial assistance, evaluating and monitoring the Program. The only people who will have access to the information are those employees who need it for their work. The information may also be transferred to other government ministries and agencies for the purpose of implementing and overseeing the Roulez vert Program. I understand that failure to provide the information will prevent my application from being processed. I understand that if I do not meet all the conditions and terms set out in the applicant guide and in the normative framework, the application review process may be delayed or the application may be deemed ineligible for financial assistance.

I acknowledge that if the charging station(s) and their installation no longer meet the requirements of the Program applicant guide and normative framework, MELCCFP may ask that the financial assistance be repaid. I also acknowledge that MELCCFP may ask that the financial assistance be repaid in the event of a false declaration.

Social insurance number

Individuals will be required to provide their social insurance number (SIN) to MELCCFP when their application for reimbursement is being processed.

The telephone number and email address can be used to contact applicants, if necessary, to obtain additional information required to process their application or to evaluate the program in which they participated.

Tax compensation

Individuals who receive financial assistance may be subject to government compensation as defined in the *Act respecting the Ministère du Revenu*, which allows certain amounts payable to recipients by public organizations to be withheld for the payment of a debt under a tax law in Québec, or under the *Act to facilitate the payment of support*.

Ministère de l'Environnement, de la Lutte contre les changements climatiques, de la Faune et des Parcs shall not, under any circumstances whatsoever, be held liable for any damage or prejudice resulting from the implementation of the Program.

Attestation and consent

I hereby declare that I have read and understood all the conditions and terms set out in the applicant guide and in the normative framework, along with the declarations and consents indicated earlier. I also declare that the information provided in or in respect of this application is true and complete.

A signature is required only when you submit a claim for reimbursement.

Representative's/Applicant's last and first name: _____

Signature: _____ Date: _____ (dd/mm/yyyy)

Supporting documents

The following supporting documents must be submitted with your application.

- > Invoice and proof of payment for eligible charging stations purchased and installed.
- > Long-term lease agreement for leased charging stations and invoices and proof of payment for first payments already made.
- > Invoice and proof of payment for installation of the charging stations and electricity supply infrastructure (material and labor).
- > Invoice and proof of payment for consulting services for project design and planning.
- > Invoice and proof of payment for a device or software to manage the energy used.
- > The electric vehicle identification number, also known as VIN (no supporting document required).
- > A copy of the "Service receipt" document provided when the vehicle was registered with Société de l'assurance automobile du Québec (SAAQ). The registration certificate alone is not accepted.
- > Photos of the installed charging stations: the photos should show all the stations for which financial assistance is being requested as well as the multi-unit dwelling and parking spaces.
- > Photos of the new electricity infrastructure, if applicable (transformer, distribution panel, etc.).

How to submit your application

Please return the application form and supporting documents to:

Programme Roulez vert - Borne de recharge multilogement

C.P. 27506 B.P. Pont-Viau
Laval (Québec) H7G 2V0

APPENDIX

Complete the appendix if your request involves several charging stations of different models

Applicant information

Name of company or condominium syndicate: _____

Representative's last name: _____ Representative's first name: _____

Information about installed charging station

Brand: _____ Model: _____

Number of installed connectors covered by the application: _____

Type of acquisition

Purchase Lease

Purchase price per connector (before taxes): _____

Date of purchase: _____ (dd/mm/yyyy) Lease start date: _____ (dd/mm/yyyy)