

DESCHUTES COUNTY COMMERCIAL PROPERTY ASSESSED CLEARN ENERGY (CPACE) PROJECT APPLICATION

Deschutes County administers a Commercial Property Assessed Clean Energy (CPACE) financing program. The CPACE Program allows owners of eligible commercial property to obtain long-term financing from private capital providers for certain qualified improvements. While the financing is repaid to the Capital Provider, the CPACE Act directs the County to impose a voluntary benefit assessment and record a lien (the "CPACE Lien") on the property.

The Deschutes County CPACE program was established in 2022 (Ordinance 2022-005) and is administered through the Administrative Services Division.

The follow highlights the steps of the CPACE application process:

- 1. Property owner develops an energy efficiency, renewable energy, water conservation, and/or seismic rehabilitation project idea.
- 2. Property owner identifies a capital provider for their project.
- 3. Property owner and capital provider coordinate to complete application materials and submit to Administrative Services (CPACE@deschutes.org).
- 4. Administrative Services staff reviews application and issues letter or approval, conditional approval or denial within 10 business days.
- 5. Upon approval property owner pays processing and documenting fee to Deschutes County.
- 6. Administrative Services releases the agreements to the property owner.
- 7. Property owner provides recordation number to Administrative Services.
- 8. Capital provider funds the project.
- 9. After project completion, applicant provides a signed certification form to the capital provider and Administrative Services.

CPACE Project Application

Property Owner Information		
Email:	Phone:	
Property Informat	ion	
Property Address	:	
Parcel Numbers:		
Property Descript	ion:	
Property Type: 🛚	Commercial 🛘 Industrial 🗘 Agricultural	
☐ Multi-family (v	vith five or more dwelling units) \Box Other	
Building uses:		
Qualifying owner:	☐ Limited Liability Company ☐ Corporation ☐ Trust	
☐ General or lir	nited partnership 🔲 Individual/Sole proprietorship	
Proposed Qualifi	ed Improvements – Qualifying Improvement Certification	
The improvement	ts sought are (check all that applies):	
☐ Energy Efficie ☐ Seismic Rehab	ncy Renewable Energy Water Conservation pilitation	
i. If Energy Effici	ency, improvement is:	
☐ HVAC System	☐ Windows & Doors ☐ Temperature Control System ☐ Lighting	
☐ Siding/Insulat	ion/Roofing Appliances Other	

ii. If Renewable Energy, improvement is:				
☐ Solar Panels ☐ Thermal ☐ Other				
And if Renewable Energy, improvement is (check one):				
☐ Direct Purchase				
☐ Power Purchase Agreement				
iii. If Water Conservation, improvement is:				
\square Lead Reduction \square Low-flow fixtures \square Irrigation System \square Control System				
☐ Water Collection & Reuse ☐ Other				
iv. If Seismic Rehabilitation, improvement is:				
☐ Seismic Retrofit ☐ Other				
Capital Provider Information				
Legal Name:				
Contact Person:				
Contact Person:				
Mailing address:				
Mailing address:City/State/Zip:				
Mailing address: City/State/Zip: Phone:				
Mailing address:City/State/Zip:				
Mailing address: City/State/Zip: Phone: Email: Phone: Must answer 'Yes' to at least one of the following and p				
Mailing address: City/State/Zip: Phone: Email: Phone: Must answer 'Yes' to at least one of the following and p documentation per Program Application Checklist:	rovide requi	red		
Mailing address:	rovide requi	red		
Mailing address: City/State/Zip: Phone: Phone: Must answer 'Yes' to at least one of the following and p documentation per Program Application Checklist: Federal or state-chartered bank or credit union: Registered capital provider in more than two states:	rovide requi	red □ No □ No		

If consent form will be executed at closing, conditional approval is given. If consent is delivered at closing, applicant must hold county-executed closing documents in escrow until consent is obtained. At discretion of this office, this application may be amended and returned with copy of consent attached.

Application Signatures

By signature below, the applicants (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 CPACE program. Further, the applicants affirm that neither the county, its governing body, executives, nor employees are personally liable as a result of exercising any rights or responsibilities granted under this program.

Application signed and dated on: _____

On behalf of property owner:	
Name and title:	
On behalf of capital provider:	
Name and title:	
TO BE COMPLETED BY AUTHORIZ	ED COUNTY OFFICIAL
Application: Approved Cond	itionally Approved 🛮 Denied
On behalf of Deschutes County:	
Name and title:	
Conditions of approval, if applicab	le: