 **REGISTRATION**

**OF COMMUNITY SOLAR**

**COMPANY**

621 Woodland Square Loop SE

Lacey, WA 98503

PO Box 47250

Olympia, WA 98504-7250

Telephone (360) 664-1222

Website: [www.utc.wa.gov](http://www.utc.wa.gov)

Email: [transportation@utc.wa.gov](mailto:transportation@utc.wa.gov)

1. Complete this application form
2. Submit this form via the [Records Center Web portal](https://www.utc.wa.gov/docs/Pages/howToFile.aspx)
3. UTC will issue a letter generally within 30 days
4. Pay online at [Make a Payment Now](https://www.utc.wa.gov/regulatedIndustries/Pages/online-payments.aspx)

**Type of Application:**

New Applicant - Fee $450

Amending Registration (Change of business structure, name change, etc.) – Fee $150

**Community Solar Company Information:**

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| --- | --- | --- | --- |
| Company Name: | | d/b/a: | |
| Company Mailing Address: | | | |
| City/State/Zip:  Website Address: | | | |
| **Unified Business Identification Number (UBI):**  *For assistance contact Department of Revenue/Business Licensing Services at 1 (800) 451-7985 or* [*www.bls.dor.wa.gov*](http://www.bls.dor.wa.gov)*.*  **Active electrical license or registration number** issued by the Washington Department of Labor and Industries (LNI), if applicable:  *For assistance contact LNI 360 (902) 5269 or* [*ElectricalProgram@lni.wa.gov*](mailto:ElectricalProgram@lni.wa.gov)*.*    **Questions regarding this application should be directed to:** | | | |
| Name: | | | |
| Phone Number: |  | |  |
| Mailing Address: | | | |
| City/State/Zip:  Email: | | | |

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| --- | --- | --- |
| *FOR OFFICIAL USE ONLY* |  |  |
| Receipt ID | 111-0268-141-02 | Payment ID |

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| **Registered Agent** (A Washington agent is required if the company is located outside Washington state): | | |
| Name: | | |
| Mailing Address: | | |
| City/State/Zip:  Phone Number:  Email: | | |
| **Name, address and title of each officer or director (attach additional pages if needed):** | | |
| Name | Address | Title |
|  |  |  |
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|  |  |  |

**Name and address of all administrators the company has contracted with or retained to perform tasks on its behalf (attach additional pages if needed):**

|  |  |  |
| --- | --- | --- |
| Name | Address | Title |
|  |  |  |
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| --- | --- |
| **Regulatory Contact**  Name:  Mailing Address:  City/State/Zip:  Phone Number:  Email: | **Consumer Questions and UTC Complaint Contact**  Name:  Title:  City/State/Zip:  Phone Number:  Email: |
| **Emergency Contact**  Name:  Title:  City/State/Zip:  Phone Number:  Email: |  |

**Description of services offered or services the company intends to offer, including financing models:**

**Description of the technical administrative competency (i.e., project management experience) of the principal personnel that the company will use to provide the proposed services:**

**Is there any pending litigation against the company? If so, describe litigation giving county and state of filing, case number, and brief synopsis of the issues being litigated:**

**I acknowledge the company’s responsibilities under WAC 480-103-135 (Complaints and Disputes):**

Yes  No

**If there have been complaints filed againse the company, give evidence of the resolution of any outstanding complaints against the company on file at the commission.**

**Evidence of adequate financial resources (add a PDF of the following):**

Current Balance Sheet  Prospective Profit & Loss Statement  Latest Annual Report, if any

Evidence of Escrow or trust account where the company will hold advances or deposits collected from

customers, project participants or applicants.

I understand that the filing of this registration application does not in itself constitute registration until registration is authorized by this Commission. I hereby declare and affirm that the information contained in this registration application is true to the best of my knowledge and belief.

Yes  No