



Interim Subsection t (ADI/SuSI) Program Application Form



Application Form: Requirements, Instructions, Terms and Conditions

*By Order dated July 28, 2021, the Board established an Administratively Determined Incentive (“ADI”) Program and a Competitive Solar Incentive (“CSI”) Program within the Successor Incentive Program (“SuSI”). Within the ADI, an Interim Subsection t market segment was established. The interim market segment will be open to applicants starting on August 28, 2021 until the earlier of either 3 months prior to the opening of the CSI program or the receipt of applications totaling 75 MWdc. Projects certified under the ADI program shall be considered “connected to the distribution system” for purposes of NJ Solar Renewable Energy Certificate II (“SREC-II”) eligibility. Subsection t is limited to “grid supply” projects which sell their power in the wholesale electricity market. Consistent with the Solar Act of 2012, projects interconnected behind a customer-generator’s meter that are eligible for net metering are not eligible for Subsection t. The following application is intended only for the development of solar electric power generation facilities that seek certification from the Board of Public Utilities (“Board”) as being located on a brownfield, an area of historic fill, or a properly closed sanitary landfill facility as defined at N.J.S.A. 48:3-87(t)(1) (“Subsection t”). **Before completing the attached Interim Subsection t application, please carefully read all of the information below and in sections I, II, and III.***

Before submitting an application, it is recommended the applicant schedule a meeting with the New Jersey Department of Environmental Protection’s Office of Permitting and Project Navigation (www.nj.gov/dep/pcer) to determine what permits may be required and to identify other potential issues.

Additionally, the applicant should review the compliance history at the proposed site and the various operations that were conducted there. Satisfaction of all outstanding NJDEP regulatory compliance obligations is required prior to obtaining final certification. The applicant should identify if there are any outstanding compliance and enforcement issues associated with the property on which the proposed project is to be sited as early in the process as possible, and resolve accordingly, before submitting the Post Construction NJDEP Compliance Form.

I. Minimum Qualification Requirements

1. Only those applications for projects proposed to be located on sites meeting the definition of a brownfield, an area of historic fill, or a properly closed sanitary landfill facility, pursuant to N.J.S.A. 48:3-51, and which meet all the statutory requirements under Subsection t, will be considered as “connected to the distribution system” for purposes of SREC-II eligibility in the ADI Program. Projects that are proposed to be located on land that has been actively devoted to agricultural or horticultural use that is valued, assessed, and taxed pursuant to the Farmland Assessment Act of 1964, L. 1964, c. 48 (C.54:4-23.1 et seq.) at any time within the ten (10) year period prior to July 24, 2012 will not be eligible for designation as being located on a brownfield, an area of historic fill, or a properly closed sanitary landfill facility for purposes of qualifying for SREC-IIs.

II. Instructions for Completing the Application Form

1. Each solar electric power generation facility seeking certification via the Interim Subsection t ADI program requires the submission of an individual application form. Do not apply for more than one (1) solar facility project per application form. However, if certification of a single facility under more than one (1) of the three (3) designations specified in (1) is sought – for example, certification of a project as being located in part on a landfill and in part on a brownfield is sought for one facility – a separate application is not required for each type of certification. The applicant shall specify in the relevant questionnaires below and on the required site maps delineating the location of the solar array(s) which portions of the site qualify for which designation. The applicant cannot state that a given portion of the site qualifies for more than one designation (for example, if certification of a given block and lot is sought as a brownfield, the same application cannot seek certification for that same block and lot as an area of historic fill).
2. Complete sections A through G contained in this application, and affix the attachments required in the questions contained in section G below.



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3. Original signatures on all forms and the certification contained in section H of this application are required. The certification contained in section H must also be notarized.

III. Important Terms and Conditions

1. The “applicant” is defined as the entity that submits the Interim Subsection t ADI application form (i.e., an applicant may be a project developer, property owner, contractor, installer, land speculator, or agent of any thereof).
2. The applicant, by executing the application and certification, acknowledges on behalf of all project participants that full certification pursuant to Subsection t is a condition of SREC-II eligibility, but that it does not obviate the need for compliance with the Successor Solar Incentive (“SuSI”) Registration Program requirements and the need to meet all relevant local, state and federal laws. In review of an application, the Board may attach specific conditions, including, but not limited to, setting the effective date of the project’s qualification life.
3. The applicant may be required to supplement the initial information provided during the application process.
4. Board staff, in consultation with New Jersey Department of Environmental Protection (“NJDEP”) staff, will review each application.
5. By submitting an application, the applicant acknowledges notice on behalf of all project participants that the information included in the application is subject to disclosure under the Open Public Records Act, N.J.S.A. 47:1A-1 et seq. Aggregated information will be used by the Board and/or other state, federal, county, regional, or local agencies in reports and evaluations, and the geographic location may be used to update Geographic Information System mapping. Applications will be reviewed and decisions on applications will be made by the Board, in consultation with NJDEP.
6. Amendments or supplements to the application form will be provided via the Board website at www.nj.gov/bpu and NJCEP website at www.njcleanenergy.com. This application form may be modified at any time without prior notification.
7. Projects certified via the Interim Subsection t ADI application process must also comply with all appropriate provisions of the Renewable Portfolio Standards rules, such as the proposed SuSI registration program rules to be located at N.J.A.C. 14:8-11. The conditions for certification by the Board include the submission of a ADI/SuSI Program registration within fourteen (14) days of an Order granting conditional certification, and compliance with all applicable local, state, and federal laws, permit requirements, and regulations.

Applications submitted via US postal mail or fax will not be accepted. Submit applications electronically to the Secretary of the New Jersey Board of Public Utilities via board.secretary@bpu.nj.gov.



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A: Applicant Contact Information

Applicant Company Name (if applicable): _____
 First Name: _____ Last Name: _____
 Daytime Phone: _____ Email: _____
 Applicant Mailing Address: _____
 City: _____ State: _____ Zip Code: _____

B: Applicant Role (Indicate the nature of the applicant, being sure to check all that apply)

Applicant is: Solar Facility Installer/Developer Solar Facility Owner Property Owner
 Agent (if agent, what role is represented) _____

C: Property Owner Contact Information

Property Owner Company Name (if applicable): _____

 First Name: _____ Last Name: _____
 Daytime Phone: _____ Email: _____
 Property Owner Mailing Address: _____
 City: _____ State: _____ Zip Code: _____

D: Solar Facility Owner (Who will own the Facility?) Complete if known. Duplicate data contained in A or C above, if applicable.

Solar Facility Owner Company Name (if applicable): _____
 Contact Person: _____
 First Name: _____ Last Name: _____
 Daytime Phone: _____ Email: _____
 Solar Facility Owner Mailing Address: _____
 City: _____ State: _____ Zip Code: _____

E: Contractor / Solar Installer / Developer (Who will construct the Facility?) Complete if known. Duplicate data contained in A, C or D above, if applicable.

Company Name (if applicable): _____
 First Name: _____ Last Name: _____
 Daytime Phone: _____ Email: _____
 Mailing Address: _____
 City: _____ State: _____ Zip Code: _____
 Federal Tax I.D. Number: _____



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F: Proposed Solar Facility Characteristics; Size, Location, Point of Interconnection
Complete if known.

Solar Facility Size: _____ MW ac _____ MW dc _____ total acreage of solar facility
Solar Facility Location (Address): _____
Solar Facility Block and Lot Number(s): _____
Solar Facility Municipality: _____
Solar Facility Zip Code: _____
Electric Distribution Company accommodating facility interconnection: _____

G: Certification Questionnaire;

Indicate below whether the proposed facility is located on land that has been actively devoted to agricultural or horticultural use and that is/has been valued, assessed, and taxed pursuant to the Farmland Assessment Act of 1964, L. 1964, c. 48 (C.54:4-23.1 et seq.) at any time within the ten (10) year period prior to July 24, 2012.

- Yes, the proposed facility is located on land that has been actively devoted to agricultural or horticultural use that is/has been valued, assessed, and taxed pursuant to the Farmland Assessment Act of 1964 within the ten (10) year period prior to July 24, 2012.
- No, the proposed facility is not located on land that has been actively devoted to agricultural or horticultural use that is/has been valued, assessed, and taxed pursuant to the Farmland Assessment Act of 1964 within the ten (10) year period prior to July 24, 2012.
I have attached tax assessment records for those years..... Yes No

Is the proposed facility located in the Pinelands National Reserve? Yes No

If "Yes," please attach any correspondence/approvals with the Pinelands Commission relating to the requirements under the Comprehensive Management Plan ("CMP"), available at www.nj.gov/pinelands/cmp.

- Yes, I have attached the requested materials.
- No, please explain below:

Are there any use restrictions at the site? Yes No

If "Yes," explain the use restriction below and provide documentation that the proposed solar project is not prohibited.

Will the use restriction be required to be modified? Yes No

If "Yes," explain the modification below.



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Complete the questionnaire below (1, 2, or 3) that corresponds to the category under which you are applying for certification: 1 - Properly Closed Sanitary Landfill Facility; 2 - Brownfield; or 3 - Area of Historic Fill. If applying for certification for more than one of the categories, the applicant must complete each applicable subsection. As noted above, if applying for more than one of the categories, the applicant must specify which portions of the site qualify for which category. The applicant cannot state that a given portion of the site qualifies for more than one category (for example, if certification of a given block and lot is sought as a brownfield, the same application cannot seek certification for that same block and lot as an area of historic fill). If an applicant is seeking approval for more than one category, a map(s) shall be submitted that clearly delineates each land classification by block and lot.

1 - Properly Closed Sanitary Landfill Facility Questionnaire

For guidance on installing solar on landfills please review the NJDEP Division of Solid and Hazardous Waste Guidance Document at www.nj.gov/dep/dshw/swp/solarguidance.pdf

1) Name of the sanitary landfill facility as identified in NJDEP’s database of New Jersey landfills, available at www.nj.gov/dep/dshw/lrm/landfill.htm:

2) NJDEP Solid Waste Program Interest (“SW PI”) Number or New Jersey Solid Waste Identification Number:

3) Owner of the sanitary landfill facility:

4) Block(s) and Lot(s) of the sanitary landfill facility: _____
Property Acreage: _____

5) Municipality and County in which the sanitary landfill facility is located:
Municipality: _____ County: _____

6) Date that the sanitary landfill facility ceased operations: _____

7) Submit: (check one)

A copy of the NJDEP approval letter for the closure as-built certification submitted pursuant to N.J.A.C. 7:26-2A.9(c)6;

or

Copies of any other correspondence indicating proper closure of the landfill.

8) I have attached a copy of the most recent sanitary landfill closure and post-closure plan approval, if applicable. Yes No

9) I have attached additional information or documentation that establishes that the sanitary landfill facility is properly closed as defined in N.J.S.A. 48:3-51..... Yes No



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- 10) I have attached a **single** map detailing the property, the location of the solar array, the delineation and identification of the landfill waste footprint and other associated structures and equipment, & the official tax map with the parcels block and lot..... Yes No
- a) A single map cannot clearly identify the block, lot, landfill waste footprint and solar array location. I have submitted a separate maps for each block and lot Yes No
- 11) What permits and/or approvals, if any, have you received from the NJDEP (i.e., Land Use, Air Quality, NJPDES, etc.) directly related to the installation and operation of the solar facility on this property? Please list all permits and/or approvals and attach copies. Attach additional pages if necessary.

Permit Description	Permit Number	Date Permit Issued	Copy Attached
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

- 12) What other permits and/or approvals, if any, have you received from the NJDEP (i.e., Land Use, Air Quality, NJPDES, etc.) for the property? Please list all permits and/or approvals and attach copies. Attach additional pages if necessary.

Permit Description	Permit Number	Date Permit Issued	Copy Attached
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No



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2 - Brownfield Questionnaire

- 1) Name of Property: _____
- 2) Address of Property: _____
- 3) Municipality: _____ County: _____ *(in which the property is located)*
- 4) Block(s) and lot(s) of the property: _____
Property Acreage: _____
- 5) NJDEP Site Remediation Program Interest Number, NJDEP Incident Number, Environmental Protection Agency (“EPA”) Identification Number, and/or NJDEP Known Contaminated Site List Number (located at www.nj.gov/dep/srp/kcsnj/). Please provide all identifying numbers applicable to the property:

- 6) Indicate the history of ownership and/or operatorship and provide a description of the nature of the operations at the property in the tables below. Provide sufficient history regarding the nature of the operations to facilitate the determination of whether the property was/is a commercial or industrial site. Attach additional sheets if necessary.

Name of Property Owner	From	To

Name of Operator	Nature of Operations	From	To

- 7) Indicate below whether the applicant asserts that the property is currently vacant. Provide any supporting documentation for that position.
 - Yes, the property is vacant and documentation is attached.
 - Yes, the property is vacant but no documentation is available.
 - No, the property is not vacant.

- 8) Is the property vacant? Yes No
 If “Yes,” what is the date that operations ceased at the site? _____



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9) Is contamination present at the site? Yes No

10) Has a Licensed Site Remediation Professional (“LSRP”) been retained, if required? Yes No

If “Yes,” provide the Name and License # of LSRP.

Name: _____ License #: _____

If “No,” explain below:

11) Indicate below what remedial phases were conducted.

- A preliminary assessment (“PA”) has been performed pursuant to the Technical Requirements for Site Remediation, N.J.A.C. 7:26E-3 and a copy of the report is attached.
- A site investigation (“SI”) has been performed pursuant to the Technical Requirements for Site Remediation, N.J.A.C. 7:26E-3 and a copy of the report is attached.
- A remedial investigation (“RI”) has been performed pursuant to the Technical Requirements for Site Remediation, N.J.A.C. 7:26E-4 and a copy of the report is attached.
- A remedial action work plan (“RAWP”) has been approved by the NJDEP or certified by a Licensed Site Remediation Professional and a copy of the report is attached.
- A remedial action report (“RAR”) has been approved by the NJDEP or certified by a Licensed Site Remediation Professional and a copy of the report is attached.

12) What, if any, remediation is still required by Federal or State laws and regulations? Attach additional pages if necessary.

13) Has a final remediation document been issued for the property? Yes No

If “Yes,” submit a copy of the Response Action Outcome (“RAO”) issued by the LSRP or the No Further Action (“NFA”) letter issued by the NJDEP.



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14) Will a soil or ground water remedial action permit be required for the property? Yes No

Has a soil or ground water remedial action permit been issued for the property? Yes No

If "Yes," list the permit number for the appropriate remedial action permit(s) issued for the property and attach a copy.

Type of Remedial Action Permit	Permit Number
Soil without engineering control	
Soil with engineering control	
Ground water natural attenuation	
Ground water other than natural attenuation	

15) Is the portion of the property on which the solar facility is proposed to be located within the boundary of the area covered by the proposed/issued remedial action permit? Check all that apply:

Type of Remedial Action Permit	Solar facility located with boundary of area covered by Remedial Action Permit
Soil without engineering control	<input type="checkbox"/> Yes <input type="checkbox"/> No
Soil with engineering control	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ground water natural attenuation	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ground water other than natural attenuation	<input type="checkbox"/> Yes <input type="checkbox"/> No

16) List any existing remedial action permits that will be required to be modified as part of the solar project.

Type of Remedial Action Permit Requiring Modification	Permit Number
Soil without engineering control	
Soil with engineering control	
Ground water natural attenuation	
Ground water other than natural attenuation	

17) I have attached a **single** map detailing the property, the location of the solar array, the delineation of the contamination/brownfield, including all areas of concern¹ & the official tax map with the parcels block and lot..... Yes No

a) A single map cannot clearly identify the block, lot, solar array location and delineation of the contamination/brownfield. I have submitted a separate map for each block and lot Yes No

¹ The definition of area of concern ("AOC") can be found in N.J.A.C. 7:26E TECHNICAL REQUIREMENTS FOR SITE REMEDIATION



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18) I have attached additional information or documentation that establishes that the property meets the definition of a brownfield as contained in N.J.S.A. 48:3-51..... Yes No



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19) What permits and/or approvals, if any, have you received from the NJDEP (i.e., Land Use, Air Quality, NJPDES, etc.) directly related to the installation and operation of the solar facility on this property? Please list all permits and/or approvals and attach copies. Attach additional pages if necessary.

Permit Description	Permit Number	Date Permit Issued	Copy Attached
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

20) What other permits and/or approvals, if any, have you received from the NJDEP (i.e., Land Use, Air Quality, NJPDES, etc.) for the property? Please list all permits and/or approvals and attach copies. Attach additional pages if necessary.

Permit Description	Permit Number	Date Permit Issued	Copy Attached
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No



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3 - Area of Historic Fill Questionnaire

- 1) Name of Property: _____
- 2) Address of Property: _____
- 3) Municipality: _____ County: _____ *(in which the property is located)*
- 4) Block(s) and lot(s) of the property: _____
Property Acreage: _____
- 5) NJDEP Site Remediation Program Interest Number, NJDEP Incident Number, Environmental Protection Agency ("EPA") Identification Number, and/or NJDEP Known Contaminated Site List Number (located at www.nj.gov/dep/srp/kcsnj/). Please provide all identifying numbers applicable to the property:

- 6) Has a Licensed Site Remediation Professional ("LSRP") been retained? Yes No
If "Yes," provide the Name and License # of LSRP.
Name: _____ License #: _____

If "No," explain below:

- 7) Has the property been mapped by the New Jersey Geological Survey ("NJGS") as historic fill? Yes No
If "Yes," attach the NJGS map (This map can be downloaded at: www.nj.gov/dep/njgs/geodata/dgs04-7.htm)

- 8) Was a site investigation performed pursuant to N.J.A.C. 7:26E-3.12? Yes No
If "Yes," submit the results.
If "No," Please explain:

- 9) Has the fill material been identified as being contaminated? Yes No
Please explain. Attach additional pages if necessary.



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10) Have the remedial investigation requirements pursuant to the Technical Requirements for Site Remediation, N.J.A.C. 7:26E-4.7 been implemented? Yes No

Were the activities outlined in the NJDEP Technical Guidance for Historic Fill (located at: www.nj.gov/dep/srp/guidance/#historic_fill) followed? Yes No

Please explain. Attach additional pages if necessary.

11) Has a remedial action work plan, incorporating the requirements from the Technical Requirements for Site Remediation, N.J.A.C. 7:26E-5.4, either been approved by the NJDEP or certified by an LSRP for the historic fill located at this property? Yes No

If "Yes," does the remedial action work plan incorporate the proposed solar facility project? Yes No

I have attached a copy of the approved/certified remedial action work plan..... Yes No

Please explain. Attach the approved/certified remedial action work plan and any additional pages if necessary.

12) Has the remediation of the historic fill been completed pursuant to the Technical Requirements for Site Remediation, N.J.A.C. 7:26E-5.4? Yes No

If "No," please explain:

13) If the remediation of the historic fill has been completed, submit a copy of the Response Action Outcome ("RAO") issued by the LSRP or the No Further Action ("NFA") letter issued by the NJDEP.

I have attached a copy of the RAO or NFA.

Not applicable.



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14) Will a soil or ground water remedial action permit be required for the property? Yes No

Has a soil or ground water remedial action permit been issued for the property? Yes No

If "Yes," list the permit number for the appropriate remedial action permit(s) issued for the property and attach a copy.

Type of Remedial Action Permit	Permit Number
Soil without engineering control	
Soil with engineering control	
Ground water natural attenuation	
Ground water other than natural attenuation	

15) Is the portion of the property on which the solar facility is proposed to be located within the boundary of the area covered by the proposed/issued remedial action permit? Check all that apply:

Type of Remedial Action Permit	Solar facility located with boundary of area covered by the Remedial Action Permit
Soil without engineering control	<input type="checkbox"/> Yes <input type="checkbox"/> No
Soil with engineering control	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ground water natural attenuation	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ground water other than natural attenuation	<input type="checkbox"/> Yes <input type="checkbox"/> No

16) List any existing remedial action permits that will be required to be modified as part of the solar project.

Type of Remedial Action Permit Requiring Modification	Permit Number
Soil without engineering control	
Soil with engineering control	
Ground water natural attenuation	
Ground water other than natural attenuation	

17) I have attached a map of the portion of the property on which the solar facility will be located that delineates the the location of the historic fill and the proposed solar facility. Yes No

18) I have attached a **single** map detailing the property, the location of the solar array, the delineation of the contamination/historic fill & the official tax map with the parcels block and lot..... Yes No

a) A single map cannot clearly identify the block, lot, solar array location and area of contamination/historic fill. I have submitted a separate map for each block and lot..... Yes No

19) I have attached additional information or documentation that establishes that the area of the property on which the solar facility will be located meets the definition of historic fill as contained in N.J.S.A. 48:3-51. Yes No



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20) What permits and/or approvals, if any, have you received from the NJDEP (i.e., Land Use, Air Quality, NJPDES, etc.) directly related to the installation and operation of the solar facility on this property? Please list all permits and/or approvals and attach copies. Attach additional pages if necessary.

Permit Description	Permit Number	Date Permit Issued	Copy Attached
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

21) What other permits and/or approvals, if any, have you received from the NJDEP (i.e., Land Use, Air Quality, NJPDES, etc.) for the property? Please list all permits and/or approvals and attach copies. Attach additional pages if necessary.

Permit Description	Permit Number	Date Permit Issued	Copy Attached
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No



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H: Certifications

Applicant Certification

The undersigned warrants, certifies, and represents that:

- 1) The information provided in this application package has been personally examined, is true, accurate, complete, and correct to the best of the undersigned's knowledge, based on personal knowledge or on inquiry of individuals with such knowledge; and
- 2) The system proposed in the application will be constructed, installed, and operated as described in the application and in accordance with all Board rules and applicable laws;
- 3) The system proposed in the application will be constructed, installed, and operated in accordance with all Board policies and procedures for the ADI / SuSI Registration Program;
- 4) All signing parties understand that certain information in this application is subject to disclosure under the Open Public Records Act, N.J.S.A. 47-1A-1 et seq.; and
- 5) All signing parties acknowledge that **submission of false information may be grounds for denial of this application, and if any of the foregoing statements are willfully false, they are subject to punishment to the full extent of the law, including the possibility of fine and imprisonment.**

Signature: _____

Print Name: _____

Date: _____

Signed and sworn to before me on this _____ day of _____, 20__

Signature

Name



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Project Installer/Developer Certification (if known)

The undersigned warrants, certifies, and represents that:

- 1) The information provided in this application package has been personally examined, is true, accurate, complete, and correct to the best of the undersigned's knowledge, based on personal knowledge or on inquiry of individuals with such knowledge; and
- 2) The system proposed in the application will be constructed, installed, and operated as described in the application and in accordance with all Board rules and applicable laws;
- 3) The system proposed in the application will be constructed, installed, and operated in accordance with all Board policies and procedures for the ADI / SuSI Registration Program;
- 4) All signing parties understand that certain information in this application is subject to disclosure under the Open Public Records Act, N.J.S.A. 47-1A-1 et seq.; and
- 5) All signing parties acknowledge that **submission of false information may be grounds for denial of this application, and if any of the foregoing statements are willfully false, they are subject to punishment to the full extent of the law, including the possibility of fine and imprisonment.**

Signature: _____

Print Name: _____

Date: _____

Signed and sworn to before me on this _____ day of _____, 20____

Signature

Name



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Proposed Facility Owner (if known)

The undersigned warrants, certifies, and represents that:

- 1) The information provided in this application package has been personally examined, is true, accurate, complete, and correct to the best of the undersigned's knowledge, based on personal knowledge or on inquiry of individuals with such knowledge; and
- 2) The system proposed in the application will be constructed, installed, and operated as described in the application and in accordance with all Board rules and applicable laws;
- 3) The system proposed in the application will be constructed, installed, and operated in accordance with all Board policies and procedures for the ADI / SuSI Registration Program;
- 4) All signing parties understand that certain information in this application is subject to disclosure under the Open Public Records Act, N.J.S.A. 47-1A-1 et seq.; and
- 5) All signing parties acknowledge that **submission of false information may be grounds for denial of this application, and if any of the foregoing statements are willfully false, they are subject to punishment to the full extent of the law, including the possibility of fine and imprisonment.**

Signature: _____

Print Name: _____

Date: _____

Signed and sworn to before me on this _____ day of _____, 20____

Signature

Name



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Property Owner

The undersigned warrants, certifies, and represents that:

- 1) The information provided in this application package has been personally examined, is true, accurate, complete, and correct to the best of the undersigned's knowledge, based on personal knowledge or on inquiry of individuals with such knowledge; and
- 2) The system proposed in the application will be constructed, installed, and operated as described in the application and in accordance with all Board rules and applicable laws;
- 3) The system proposed in the application will be constructed, installed, and operated in accordance with all Board policies and procedures for the ADI / SuSI Registration Program;
- 4) All signing parties understand that certain information in this application is subject to disclosure under the Open Public Records Act, N.J.S.A. 47-1A-1 et seq.; and
- 5) All signing parties acknowledge that **submission of false information may be grounds for denial of this application, and if any of the foregoing statements are willfully false, they are subject to punishment to the full extent of the law, including the possibility of fine and imprisonment.**

Signature: _____

Print Name: _____

Date: _____

Email: _____

Signed and sworn to before me on this _____ day of _____, 20__

Signature

Name