Third Party Payment Addendum

For work completed in Pacific Power Territory



Let's turn the answers on.

Instructions

This form must be completed and signed if you are a property owner, landlord, property management company or homeowner association not listed on the account where qualified equipment was installed or services performed and you would like the incentive check(s) to be made payable to you. This form must also be submitted if you are the property owner and would like to assign payment either to a homeowner (if different than account holder) or a contractor.

Third party entities should review and complete the appropriate option below and submit the completed addendum and all required documentation with the incentive application for verification.

Need help completing this form? Call 1-800-942-0266 for assistance.

Option 1: Forproperty owners, landlords and homeowners not listed on account

Instructions

Property owner or landlord must complete the information below and provide a copy of the current property tax record clearly showing the following:

- Date of report
- Property's physical address (must match installation address below and on incentive application)
- Full name of property owner/landlord (Individual or business; must match name printed below)

If the property tax records show the owner of the property to be a business, a completed and signed W-9 (www.irs.gov/pub/irs-

pdf/fw9.pdf) must also be submitted.	real property of the desired	o, a cop	· (<u></u>		
Installation address					
Name on account					
Installation address	City	State	Zip		
Property owner/landlord information					
Individual or business name					
Business representative (if applicable)					
Mailing address	City	State	Zip		
E-mail address	Day time	phone number			
Completed W-9 attached (if payment is to be made payable to a business): ☐ Yes ☐ No					
(Optional) I would like to make the incentive payable to homeowner listed below: ☐ Yes ☐ No					
Homeowner information (if different than property owner, such as some mobile homes)					
Individual or business name					
Business representative (if applicable)					
Mailing address	City	State	Zip		
-mail address Daytime phone number					
Completed W-9 attached (if payment is to be made payable to a business): ☐ Yes ☐ No					
Property owner/landlord certification					
I hereby certify that all information is accurate, including the claims of customer and equipment information and property ownership. I have read all terms and conditions on the applicable Home Energy Savings program incentive application and acknowledge that Pacific Power may verify all the information provided.					
Signature		Date			

Option 2: For property management companies

Instructions

Property management companies can verify or update their existing landlord accounts or create new landlord accounts by calling Pacific Power customer service at 1-888-221-7070.

If there are individual tenant units not on an existing landlord account, you as a property management company can still direct payment to you by completing the information below and providing a letter <u>from the current Pacific Power account holder</u> authorizing incentive payment to the property management company and a completed and signed W-9 (www.irs.gov/pub/irs-pdf/fw9.pdf).

<pre>pdf/fw9.pdf). Installation address (Attach list of additional individ</pre>	ual account holders and installation add	resses)			
Name on account					
Property name					
Installation address	City	State	_ Zip		
Property management company information					
Property management company name					
Representative name					
Mailing address	_ City	State	Zip		
E-mail address	Day time phone number _				
Completed W-9 attached: ☐ Yes ☐ No					
Signed letter from account holder attached: ☐ Yes	□ No				
Property management company certification					
I hereby certify that all information is accurate, including the claims of customer and equipment information and property ownership. I have read all terms and conditions on the applicable Home Energy Savings program incentive application and acknowledge that Pacific Power may verify all the information provided.					
Signature		Date			
Option 3: Forhomeowner associations					
Instructions					
Homeowner association representative must comple Homeowners Association with the state and a comple	_		_		
Installation address (Attach list of additional individ	ual account holders and installation add	resses)			
Name on account					
Installation address	City	_State	Zip		
Homeowner association information					
Homeowner association name					
Representative name	Homeowner ass	ociation numb	per		
Mailing address	_ City	_State	Zip		
E-mail address	Day time phone number _				
Completed W-9 attached: Yes No Homeowner association certification					
I hereby certify that all information is accurate, including the claims of customer and equipment information and property ownership. I have read all terms and conditions on the applicable Home Energy Savings program incentive application and acknowledge that Pacific Power may verify all the information provided.					
Signature		_ Date			

$Option\,4: For assigning\,payments\,to\,contractor$

Instructions

Account holders have the option of completing the Third Party Payment Addendum for assigning payments to a contractor by completing the information below. The account holder and the contractor must both authorize incentive payment and the contractor must submit a completed and signed W-9, unless already submitted during trade ally enrollment (www.irs.gov/pub/irs-pdf/fw9.pdf).

pdf/fw9.pdf).						
Installation Address						
Name on account						
Property name (if applicable)						
Installation address	City	_State	_ Zip			
Contractor Information						
Contractor name (must match contractor's submitted l	IRS Form W-9)					
Mailing address	City	_ State	_ Zip			
E-mail address	Day time phone number _					
Completed W-9 attached: ☐ Yes ☐ No						
Authorized Representative Certification						
I hereby certify that all information is accurate, including the claims of customer and equipment information and property ownership. I have read all terms and conditions on the applicable Home Energy Savings program incentive application and acknowledge that Pacific Power may verify all the information provided.						
Account Holder Printed Name	Signature		Date			
Contractor Printed Name	Signature		Date			