Network Provider Intake Form



CALeVIP incentive projects with application windows require that all Network Providers submit an intake form. The information on this intake form will be used to review compliance with minimum incentive project requirements and begin the data sharing agreement drafting process. Minimum requirements can be found on the Eligible Vendors List's Eligibility Requirements tab: https://calevip.org/calevip-eligible-equipment

Please submit this form to <u>evcharging@energycenter.org</u> and one of our team members will respond with a copy of the data sharing agreement after review of the form.

Business Information		
Legal Entity Name:		
Preferred Entity Name:		
Employer Identification Number (EIN):		
Associated Place of Incorporation:		
Business Address:		
Technical Discussion Information		
First & Last Name of Technical Discussion	First & Last Name of Technical Discussion Contact:	
Email of Technical Discussion Contact:		
Business Information		
Preferred Public Network Name:		
First & Last Name of Preferred Public Contact:		
Email of Preferred Public Contact:		
Preferred Public Website Link:		
Attestations		
I attest that I am an authorized represen	tative of the entity	identified in this form.
I attest that the network identified in thi remotely initiate a charging session for o		ayments through a toll-free number and can a service under the network.
I attest under penalty of perjury, under t statements are true and correct.	the laws of the State	te of California, that all the foregoing
Signature: Prin	ted name:	Date:

