

APPLICATION HOTEL CHARGING PROGRAM

Name of hotel	
Chugach member number (see top of bill)	Chugach member account number
Contact person for this application	
Work phone	Cell phone
Email	
Business name	
Address of the hotel	
Number of rooms	Months the hotel is open
service area of Chugach Electric Association.	ment installed to charge electric vehicles at hotels in the Chugach will reimburse up to \$2,500 of the installed cost or two connectors for electric vehicles. Do you agree to ging station?
Yes	
	Level 2, 240-volt charger with universal J1772 electric , install, own, maintain, and make available to guests for at
Yes	
Do you agree to share observations about gues	sts' use of the charging equipment with Chugach?
Yes	
Has your EV charging equipment already been	installed?



Signed on bel	half of the applicant	Date
application ded obligation to m	nat if this application is selected by Chugach for participations to proceed with the installation and receive paymentake available to hotel guests, maintain and pay the more charging station(s) for the 36 months.	ent from Chugach, there will be an
Agreement		. C 1 26 (b
Agroomont		
Is there any ot	her information you would like Chugach to consider?	
Does your cha explain.	in provide any financial support for electric vehicle char	ging at properties? If so, please
	d by the brand or a franchisee, can you indicate here a charging at this hotel or others in the chain?	statement of corporate support for
If yes to the ab	ove, please explain.	
Do you plan to	charge a fee for the use of the charger(s)? Yes	No
How will you n	otify drivers of the location and availability of a charger	funded under this program?
Yes	No	
	ing installation also be available to the public at large?	
Yes	No	

Please sign and email this application and any attachments to sean_skaling@chugachelectric.com