Third Party Payment Addendum

For work completed in Pacific Power's Service Territory



Instructions

This form must be completed and signed if you are a property owner, landlord, property management company or homeowners association (HOA) 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 the account holder) or a contractor.

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

Need help completing this form? Call 1-855-805-7231 for assistance.

OPTION 1: FOR PROPERTY OWNERS, LANDLORDS AND HOMEOWNERS NOT LISTED ON THE 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 property tax report
- Property's physical address (must match the installation address below and on the 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 (https://www.irs.gov/pub/irs-pdf/fw9.pdf) must also be submitted.

(<u>ntips://www.irs.gov/pub/irs-pai/iwy.pai</u>) must also be sub	milled.						
Installation address(es) (Attach a list of additional ind	ividual account holde	ers and ins	tallation	address	es, if applicable)		
Name on account:						_	
Installation address:				State: _	Zip:		
Property owner or landlord information							
Individual or business name:							
Business representative (if applicable):							
Mailing address:							
E-mail address:	Daytime phone nu	ımber:					
Completed W-9 attached (if payment is to be made payable)	ole to a business):	Yes □	No □				
(Optional) I would like to make the incentive payable to the	ne homeowner listed	below:	Yes □	No			
Homeowner information (if different than the property owner, such as some mobile homes)							
Individual or business name:							
Business representative (if applicable):							
Mailing address:					Zip:		
E-mail address:							
Completed W-9 attached (if payment is to be made payable)	ole to a business):	Yes 🗖	No 🗖				
Property owner or landlord certification							
I hereby certify that all the information provided herein is accurate, including the customer and equipment information and claims of property ownership. I have read all of the terms and conditions on the applicable Home Energy Savings program incentive application and acknowledge that Pacific Power may verify all of 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's customer service team 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 from the current Pacific Power account holder authorizing incentive payment to the property management company. A completed and signed W-9 (https://www.irs.gov/pub/irs-pdf/fw9.pdf) must also be submitted.

(https://www.irs.gov/pub/irs-pdf/tw9.pdf) must also be	e submitted.		
Installation address(es) (Attach a list of additional	l individual account holders and ins	stallation addresses, if	applicable)
Name on account:			
Property name:			
Installation address:	City:	State:	Zip:
Property management company information			
Property management company name:			
Representative name:			
Mailing address:		State:	Zip:
E-mail address:			
Completed W-9 attached: Yes ☐ No ☐			
Signed letter from account holder attached: Yes	□ No □		
Property owner or landlord certification			
I hereby certify that all the information provided here property ownership. I have read all of the terms and a and acknowledge that Pacific Power may verify all of t	conditions on the applicable Home E		
Signature:		Date:	
OPTION 3: FOR	HOMEOWNERS ASSOCIATIO	VS (HOAs)	
Instructions			
Homeowners association representatives must complete homeowners association with the state, along with a	·	• *	0
Installation address(es) (Attach a list of additional	l individual account holders and ins	stallation addresses, if	applicable)
Name on account:			
Installation address:	City:	State:	Zip:
Homeowners association information			
Homeowners association name:			
Representative name:	Homeowners association nur	mber:	
Mailing address:	City:	State:	Zip:
E-mail address:	Daytime phone number:		
Completed W-9 attached: Yes ☐ No ☐			
Property owner or landlord certification			
I hereby certify that all the information provided here property ownership. I have read all of the terms and a and acknowledge that Pacific Power may verify all of t	conditions on the applicable Home E	nergy Savings program	
Signature:		Date:	

OPTION 4: FOR ASSIGNING PAYMENTS TO A 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 any incentive payment and the contractor must submit a completed and signed W-9, unless already submitted during trade ally enrollment (https://www.irs.gov/pub/irs-pdf/fw9.pdf).

Installation address(es) (Attach a list of additional individual account holders and installation addresses, if applicable)							
Name on account:							
Property name (if applicable):							
Installation address:	City:	State:	Zip:				
Contractor Information							
Contractor name (must match contractor's submitted IRS Form W-9)							
Mailing address:	City:	State:	Zip:				
E-mail address:	Daytime phone number:						
Completed W-9 attached: Yes ☐ No ☐							
Authorized Representative Certification							
I hereby certify that all the information provided herein is accurate, including the customer and equipment information and claims of property ownership. I have read all of the terms and conditions on the applicable Home Energy Savings program incentive application and acknowledge that Pacific Power may verify all of the information provided.							
Account Holder Printed Name:	Signature:						
Contractor Printed Name:	Signature:		_Date:				