Assign Payment

Existing Multifamily | Standard Incentive Applications | Form 320A



To be completed by Participant

TRC is a Program Management Contractor for Energy Trust of Oregon.

To authorize payment of the Energy Trust incentive to your contractor or another designated payee, both the Participant and Payee must sign and submit this *Form 320A: Assign Payment* along with the applicable Existing Multifamily standard incentive application (*Form 320APP, 320F, 320HVAC, 320WH, or 320WX*).

Option to Assign Incentive Payment

PLEASE NOTE: The Energy Trust incentive payment will be made to Participant unless Participant and its designated Payee complete the section below to assign the payment to Payee. A complete, accurate and verifiable *IRS Form W-9* (Request for Taxpayer Identification Number and Certification) for the Payee named below must be provided if this option is selected.

SITE ADDRESS					
Street Address	City	State	Zip		

PARTICIPANT NAME AND SIGNATURE

Both Participant and Payee understand and agree that if this Option to Assign Incentive Payment is selected the incentive check will be issued to the Payee named below at the address listed below and Energy Trust is not responsible for any tax liabilities that may be associated with the incentive payment. In addition, Participant understands that, notwithstanding this assignment, responsibility for complying with the terms and conditions of this incentive agreement shall continue to be the obligation of Participant, and Energy Trust's sole responsibility under this incentive agreement shall be to Participant. Accordingly, Payee understands that it shall have no rights against Energy Trust or the PMC with respect to such assignment or the payment of the incentive, and in the event that Energy Trust does not pay the incentive as a result of Participant's failure to comply with this agreement, Payee's sole recourse shall be against Participant. Participant directs Energy Trust to pay any incentive to which it is entitled to the Payee named below and waives all rights to directly receive the Energy Trust incentives for the identified energy-efficiency project.

SIGNATURES: By my signature below, I represent to Energy Trust that I have read this agreement and am duly authorized to sign this Option to Assign Incentive Payment on behalf of the party for whom I am signing.

Participant			
Authorized Representative	(printed)	(signature)	Date

Participant Name

(must match legal name of Property Owner listed as the "Participant" on associated incentive application)

PAYEE NAME AND SIGNATURE (Check Recipient)						
Payee Authorized Representative (printed)	(signature)		Date			
Payee Name (must match submitted IRS form W9)						
Mailing Address for Check	City	State	Zip			
Phone 🗌 ce	ell 🗌 home 🗌 work	Email				