



GOVERNOR'S OFFICE OF ENERGY
DAVID BOBZIEN, DIRECTOR
600 E William Street, Suite 200
Carson City, Nevada 89701
(775) 687-7180

**ANNUAL COMPLIANCE REPORT
FOR RENEWABLE ENERGY TAX ABATEMENT PARTICIPANTS**

INSTRUCTIONS

1. All information to be provided in this Annual Compliance Report shall be from either the date of approval of the partial tax abatement(s) by the Director or the date of the last filed Annual Compliance Report, whichever is applicable.
2. The Annual Compliance Report and all accompanying documents must be received by 5:00 p.m. on or before the 12-month anniversary date on which the tax abatement(s) was originally granted.

A 30-day extension may be granted upon a request in writing and subject to approval by the Director. An Annual Compliance Report will not be deemed filed until all the questions and accompanying documents are received by the Director.

3. If any or all of the ownership of the project has been sold or transferred to a successor-in-interest, then the successor-in-interest must be identified in a statement attached to this Annual Compliance Report and information from the successor-in-interest must be provided as required per NAC 701A.640
4. Please provide the attached "Third Party Administrator Insurance Certification" to the third-party administrator(s) of any and all insurance plans (including to contractors and sub-contractors). This certification is to be completed and filed with the Annual Compliance Report. Other documentation may be required by the Director as per NAC 701A.590(5).
5. **Please provide copies of current State, City and/or County business licenses.**
6. Please print, sign, and return this Annual Compliance Report either electronically to lwickham@energy.nv.gov or via U.S. mail to the address above.
7. Please include the required compliance fee of **\$250 for any applications submitted before July 1, 2020 or \$500 for any applications submitted after July 1, 2020**, if applicable. Please call **(775) 687-7180** if clarification is needed.



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Project/Facility	AFN

Completed By (Name, Title)	Reporting Period

Mailing Address	Email Address

REQUIRED INFORMATION

(Please fill in or attach items as applicable)

1. At the time of filing this report, the facility:
 - Achieved commercial operation during the reporting period (**answer #2-10**)
 - Is under construction (answer #4-8 **and 10** only)
 - Was operational during the entire reporting period (answer #8-10 only)

2. The facility achieved commercial operation on _____, 20__.

3. Please provide the following information regarding the facility:
 - (a) Total capital investment (actual) \$ _____
 - (b) Nameplate capacity (actual) _____ MW
 - (c) Transmission line voltage and length (actual) _____ kV _____ miles

4. Please provide evidence that all employees who were engaged in the construction of the facility were provided with a health insurance plan as required by NRS 701A.365(1)(d)(4)(I) or 701A.365(1)(e)(4)(I) by submitting the required Third Party Insurance Certification(s).

5. The average hourly wage ("wage" having the meaning ascribed in NRS **701A.365(7)**) of the employees working on the construction of the facility, excluding management and administrative employees, during this reporting period is \$_____ per hour. The average hourly wage during the entire construction period was \$_____ (N/A if under construction) per hour.



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Please provide a **certified payroll report** along with a summary prepared by the applicant listing employee name and/or employee identification number, position, hourly wage, fringe benefit calculation and number of hours worked and any other pertinent documentation for the entire second quarter of construction for all full-time employees working on the construction of the facility that supports the average hourly wage calculation for construction employees. **The certified payroll report must be accompanied by a statement certifying the truthfulness and accuracy of the payroll report; and include the records required in NRS 701A.379. In addition, applications received after July 1, 2020 must submit required documentation to the Board of County Commissioners as stated in NRS 701A.379.**

A copy of the certified payroll report was provided to the appropriate county via _____, dated _____.

Please note: NRS 701A.365(7)(a)(b) has been revised effective July 1, 2020 – Any applications received after July 1, 2020 must adhere to definition of “wages” found in NRS 701A.365(7)(a)(b):

As used in this section, “wage” or “wages”:

(a) Means the basic hourly rate of pay.

(b) Does not include the amount of any health insurance plan, pension or other bona fide fringe benefits which are a benefit to the employee.

6. There were _____ full-time employees working on the construction of the facility during the second quarter of construction, including at least ____ who were residents of Nevada.
7. Please attach a separate list of (a) all contractors, subcontractors, or others who have been recognized as being entitled to claim the partial sales and use tax abatement, and (b) all contractors and subcontractors that engaged in construction activities at the site of the facility.
8. Please attach a separate sheet of paper identifying and describing any “significant change” to the project that has occurred since the execution of the abatement agreement regarding this project or since the last filed Annual Compliance Report. A “Significant Change” is defined in NAC 701A.545.
9. There were _____ employees engaged in the maintenance or operation of the facility, excluding management and administrative employees, the average hourly wage is \$_____ per hour.



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As used in this section, “wage” or “wages”:

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- (b) Does not include the amount of any health insurance plan, pension or other bona fide fringe benefits which are a benefit to the employee.**

10. Please include a copy of your last full year property tax bill, **and your current State, City and/or County business licenses** for GOE records.

CERTIFICATION

By signing below, each signor agrees, certifies, and acknowledges the following:

1. If the facility has achieved commercial operation, the capital investment as stated herein has been calculated in accordance with NAC 701A.590(1) and meets or exceeds the requirements set forth in NRS 701A.365(1)(d) and (e).
2. If the facility has achieved commercial operation, the average hourly wage paid by the facility to the employees in this State engaged in work that furthers the maintenance of operation of the facility, meets or exceeds the requirements set forth in NRS 701A.365 and calculated in accordance with NAC 701A.590.



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3. If the facility achieved commercial operation during this reporting period or is under construction, the average hourly wage paid to the employees engaged in the construction of the facility meets or exceeds the requirements set forth in NRS 701A.365 and calculated in accordance with NAC 701A.590.
4. The facility is registered pursuant to the laws of this State and holds a valid business license and all other permits required by the county, city, or town in which the facility operates are current.
5. No funding has been provided by any governmental entity in this State for the acquisition, design, or construction of the facility or for the acquisition of any land therefor, except any private activity bonds as defined in 26 U.S.C. § 141.

SIGNATURE AND ACKNOWLEDGEMENT

(Signatures on following page)



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SIGNATURE AND AFFIDAVIT

Project/Facility	AFN

STATE OF _____)
) ss.
 COUNTY OF _____)

The undersigned, _____ after first being duly sworn, deposes and affirms under penalty of perjury under the laws of this state that the forgoing information in the attached Annual Compliance Report is true and correct.

SIGNED this ____ day of _____, 20__.

Affiant

 By: _____
 Its: _____

Subscribed and sworn to before me
 this ____ day of _____, 20__

(seal)

 Notary Public