

# DC PACE Eligibility Screening Form

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## Applicant Primary Contact

Name:

Email:

Phone:

I am a:  Building Owner  Property Manager  Contractor/Service Provider  Other:

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## Property Ownership

Property Owner Legal Name(s) (as they appear on property title): Ownership

Type:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Corporation               | <input type="checkbox"/> Trust         | <input type="checkbox"/> Common Property (Not in Trust) |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> 501(c)(3)     | <input type="checkbox"/> Other:                         |
| <input type="checkbox"/> Partnership               | <input type="checkbox"/> Individual(s) |   |
|  | <input type="checkbox"/> Joint Tenants |   |

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## Property Physical Address

Street:

City:

State:

Zip:

DC Property ID: Square:

Suffix:

Lot:

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## Property Profile

Type:

- |                                      |                                 |   |
|--------------------------------------|---------------------------------|---|
| <input type="checkbox"/> Office      | <input type="checkbox"/> Retail | <input type="checkbox"/> Education        |
| <input type="checkbox"/> Multifamily | <input type="checkbox"/> Hotel  | <input type="checkbox"/> House of Worship |
|                                      |                                 | <input type="checkbox"/> Other:           |

General condition:

Who pays the utility bill(s)?

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## Financial Information

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Do you have a primary mortgage / lien? Yes  No

- Mortgage Lender Name:
- Mortgage Closing Date:
- Principal Outstanding:
- Interest rate(%): Fixed or variable:
- Term of Mortgage (years): Amortization (years):

Do you have any other *debt on the property?* (If so, please provide details):

What is the estimated property value?

Appraisal or  Assessment Value: \_\_\_\_\_ Year: \_\_\_\_\_

Tenancy:  Owner occupied  Leased: Single-Tenant  Leased: Multi-tenant

Property Net Operating Income (Op Revenue - OpEx):

Is the property current on all property taxes, assessments, and the mortgage? Yes  No

Have there been any notices of default or foreclosure on the property in the past three years? Yes  No

Are there any outstanding involuntary liens on the property? Yes  No

## Project Information

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Total project cost:

Planned renovation date:

Have you completed an energy audit? If yes, what level of audit?

Project description: Please describe the types of improvements planned for this project. If available, please attach additional project information such as a scope of work or energy audit.

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APPLICANT SIGNATURE

Title:

Date:

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