

Made in Minnesota Solar Incentive Program Notice of Assignment

The undersigned System Owner hereby requests that the payments made by the Minnesota Department of Commerce under the Made in Minnesota (MiM) Solar Incentive Program to which he/she/it is entitled for the MiM Application Number listed below be assigned to the Payee listed below. By signing below, the Payee acknowledges and agrees to this assignment. This assignment is effective from the Effective Date listed below. You may also download a copy of this form from the front page of MNCommerce.powerclerk.com

This assignment is only for the MiM Application Number listed below.

Effective Date: _____

MiM Application Number: _____

Host Customer

Name: _____

Address: _____

Email: _____

Phone: _____

Signature: _____ Date: _____

System Owner

Name: _____

Company Name: _____

Address: _____

Email: _____

Phone: _____

Signature: _____ Date: _____

Payee

Name: _____

Company Name: _____

Address: _____

Email: _____

Phone: _____

Signature: _____ Date: _____

State of MN Vendor ID: _____

The Vendor ID must be that of the payee or payments will not be made. If necessary, cross out the auto filled vendor ID and write in the correct one.