New Mexico Energy, Minerals, and Natural Resources Department
1220 South St. Francis Dr. Santa Fe, NM 87505
www.emnrd.state.nm.us/ecmd/
Telephone: (505)476-3310

e m n r d

FORM 1 RESIDENTIAL SOLAR NMAC 3.3.14
SOLAR SYSTEM CERTIFICATION APPLICATION
New Solar Market Development Tax Credit Form 1 Version 073120

Clear All Entries
Clear Client Entries

For ECMD USE Only

*Asterisk indicates required information
EIN numbers are accepted NM CRS numbers are not accepted Report only one Primary SSN *unless you will* file separately.

NM Taxpayer Information CONFIDENTIAL (when Social Security Number entered) 14* Individual/Joint ☐ Married, Filing Separately ☐ Business/LLC/LLP ☐

1* Name	Title First Name MI Last Name	*SSN	
2 Name	Title First Name MI Last Name	SSN	
3* Mailing Address	Street Number Street Name or HWY Number or PO Box # Town or City NM State	*ZIP (+ 4)	
4* System Location	Street Number Street Name or HWY Number or PO Box # Town or City NM State County	*ZIP (+4)	
5 *Contact Info	Phone Number with Area Code Email Address	Other Contact	Phone Number with Area Code Email Address

6 Applicant installed the system without a contractor. Check ☐

Contractor(s) Information

7 *Contractor #1	Firm Name Town or City NM State	Contact Info	Phone Number with Area Code Email Address
8 Contractor #2	Firm Name Town or City NM State	Contact Info	Phone Number with Area Code Email Address

Solar System Information (Specify 9 and/or 10)

9* ☐ PV System Size in kW DC ☐ Inverter total AC kW ☐ Roof ◯ Ground Mount: Rack ◯ Pole ◯ Tracking ☐

◯ Off Grid ◯ On Grid Utility Public Service Company of New Mexico

10* ☐ Solar Thermal System Number of Collectors ☐ Roof Top ◯ Ground Mount ◯ Hot Water ☐ Space Heating ☐

11 Solar System Costs for NM Tax Credit

a. *Contractor #1 invoice $_____

b. Contractor #2 invoice $_____

c. Other Costs (w invoice) $_____

d. *Total System Cost (basis) $ 0.00

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12 Applicant Agreement

The applicant named above and signing this statement agrees that all information provided in this application package is true and correct to the best of the applicant's knowledge. The applicant has read the certification requirements of 3.3.14 NMAC. The applicant understands that there are annual aggregate state tax credit limits in place for solar thermal systems and photovoltaic systems and that the department must certify the solar energy system documented in this application package before the applicant is eligible for a state tax credit. Furthermore, the applicant agrees to:

a) make any changes the department requires to the solar energy system for compliance with 3.3.14 NMAC;
b) operate the solar energy system for a minimum of five years after department certification or, if the residential, business, or agricultural enterprise where the solar energy system is located is sold or transferred to another party within five years after the department's certification of the solar energy system, the sale or transfer agreement shall require the solar energy system's continued operation or maintenance for energy production for no less than the balance of the five-year period remaining;
c) provide for the solar energy system's regular maintenance for a minimum of five years with the applicant's own resources or through a contractor;
d) and allow the division or its authorized representative to inspect the solar energy system that is described in the application package, from the application package's submittal to three years after the department has certified the solar energy system, upon the division providing a minimum of five days notice to the applicant.

Date System was placed in Operation _____

_____ APPLICANT'S SIGNATURE DATE

_____ APPLICANT'S SIGNATURE DATE

_____ * APPLICANT'S PRINTED NAME

_____ *APPLICANT'S PRINTED NAME

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Form 2 Residential Solar NMAC 3.3.14
Solar PV System Installation Form
New Solar Market Development Tax Credit Form 3 Version 073120

For ECMD USE Only

*Asterisk indicates required information

NM Taxpayer Information

1* Name	First Name MI Last Name	Contact Info	Phone Number with Area Code
2*System Location	Street Number Street Name or HWY Town or City County	*ZIP(+ 4)	

Contractor Information

3 * Business	Firm Name	License Number	XXXXX	License Class	GB98, EE98, MM98
*Contractor Representative	Name Street Address or PO Box Town	Contact Info	Phone Number with Area Code or Email		

4 * Photovoltaic System List Information

Module Tilt _____ deg. Azimuth Ang. _____ deg. Module Mfr. _____

Inverter Size kW _____ Inv. Mfr._____ Battery kW _____ kWhrs _____

*Solar System Costs Reference Contractor Invoice(s) _____ _____

a. *Module model number _____ Quantity _____ Unit list $_____

b. Battery model _____ Quantity _____ Unit list $_____

c. *Labor Costs _____ $_____

d. *System Cost _____ $_____

5 * BUILDING CODE AUTHORITY (BCA)

Include inspection printout from BCA with application

*Permit # _____ NMCID ☐ City _____ County _____

Date permit issued: _____ * Date when the final inspection was complete: _____

6 Applicant installed the system without a contractor and is signing as the contractor in the representation below. Check ☐

7* *CONTRACTOR REPRESENTATION

The contractor named above agrees:

a) That the solar energy system was installed in full compliance with all applicable federal, state, and local government laws, regulations, codes and standards that are in effect at the time of installation.
b) The contractor has read the certification requirements of 3.3.14 NMAC.
c) The installed solar energy system will work properly with regular maintenance.
d) The contractor provided written operations and maintenance instructions to the above named taxpayer and posted a one-page summary of these instructions in a sheltered accessible location acceptable to the taxpayer and which is near or at the solar energy system's array or balance of system components.

Date when the solar system was complete and ready to operate: _____

_____ _____

*CONTRACTOR SIGNATURE *DATE *CONTRACTOR PRINTED NAME

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Form 3 Residential Solar NMAC 3.3.14
Solar Thermal System Installation Form
New Solar Market Development Tax Credit Form 3 Version 073120

For ECMD USE Only

NM Taxpayer Information
*Asterisk indicates required information

1*Name	First Name MI Last Name	Contact Info	Phone Number with Area Code
2*System Location	Street Number or HWY or Street Name Town or City County	*ZIP(+ 4)	

3* Contractor Information

Business Name	Firm Name	* License Number	XXXXX	* License Class	GB98, EE98, MM98
4* Contractor Representative	Name Street Address or PO Box Town	Contact Info	Phone Number with Area Code or Email		

5* Solar Thermal List Information

SRCC ID _____ Collector Tilt _____deg. Azimuth Ang. _____ deg.

Collector Mfr. _____ Collector Aperture _____in. X_____ in.

Thermal Storage Fluid _____ Volume _____

Freeze Protect: Glycol ◯ Controller ◯ Drainback ◯

Overheat Protect: TPR valve ◯ Radiator ◯ Dump ◯

6* Solar System Costs
Reference Contractor Invoice(s) _____

a. *Collector model number _____ Quantity _____ unit list $ _____

b. Storage tank model _____ Quantity _____ unit list $ _____

c. *Labor Cost _____ $_____

d. *System Cost _____ $_____

7* BUILDING CODE AUTHORITY (BCA)
Include inspection printout from BCA with application

*Permit # _____ NMCID ☐ City _____ County _____

Date permit issued_____ *Date when the final inspection was complete _____

8* Applicant installed the system without a contractor and is signing as the contractor in the representation below. Check ☐

9* CONTRACTOR REPRESENTATION
The contractor named above agrees:

a) That the solar energy system was installed in full compliance with all applicable federal, state, and local government laws, regulations, codes and standards that are in effect at the time of installation.
b) The contractor has read the certification requirements of 3.3.14 NMAC.
c) The installed solar energy system will work properly with regular maintenance.
d) The contractor provided written operations and maintenance instructions to the above named taxpayer and posted a one-page summary of these instructions in a sheltered accessible location acceptable to the taxpayer and which is near or at the solar energy system's array or balance of system components.

Date when the solar system was complete and ready to operate: _____

_____ _____

*CONTRACTOR SIGNATURE *DATE *CONTRACTOR PRINTED NAME

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Form BCA Residential Solar NMAC 3.3.14
Solar System Installation Form- BCA
New Solar Market Development Tax Credit Form BCA Version 073120A

		For ECMD USE Only				

***Asterisk indicates required information**

NM Taxpayer Information

1 ***Name**	First Name MI Last Name	**Contact Info**	Phone Number with Area Code

2 *BUILDING CODE AUTHORITY (BCA)

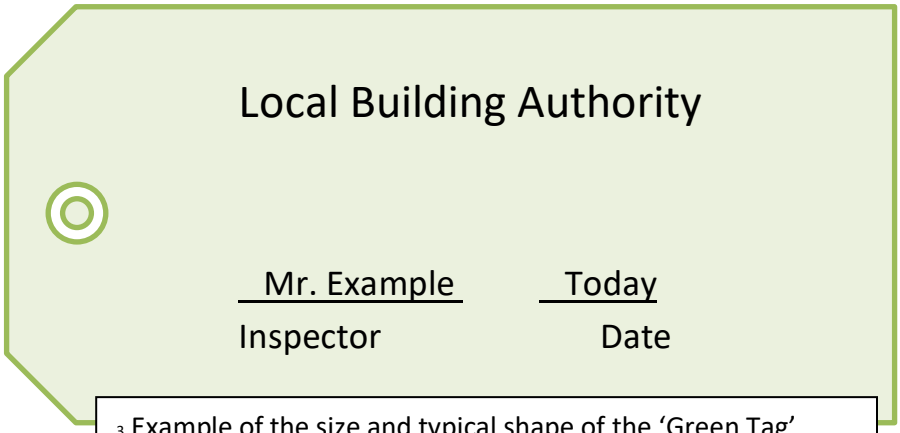
☐ NMCID ☐ City _____ ☐ County _____

*Permit # _____

Date **permit issued** _____ *Date when the final inspection was complete _____

***AUTHORITY HAVING JURISDICTION SIGNATURE** ***DATE** ***AHJ PRINTED NAME** **PHONE NUMBER**

The application for the Solar Market Development Tax Credit requires evidence of the system being inspected and being approved by the local building official. By having the official or inspector sign the Building Code Authority (BCA) block above, the requirement can be satisfied. Other ways of approval are having a **copy** of the 'Green Tag' approval (example shown below) attached to the application, or attaching a printout issued by the local building inspection authority of the inspection report showing the permit number, date and a pass result.



3 Example of the size and typical shape of the 'Green Tag' showing system approval by the local Building Inspector.

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Form 4 Residential Solar NMAC 3.3.14
Taxpayer and Contractor Statement of Understanding (SOU)
New Solar Market Development Tax Credit Form 4 Version 073120

		For ECMD USE Only					

1 Applicant	Name	**Contact Info**	Phone Number with Area Code
2 Contractor	Firm Name	**Contact Info**	Phone Number with Area Code

[3] TAXPAYER AND CONTRACTOR STATEMENT OF UNDERSTANDING

A. If a contractor installs the solar energy system, the contractor shall inform the taxpayer about system design, installation, performance, operation and maintenance by providing the following:

(1) prior to system installation, a summary of the specific system type that meets all 3.3.14 NMAC's requirements, the system's capacity or size, and the system's estimated annual energy production;

(2) upon completion of system installation, written operation and maintenance instructions, including how to conduct simple diagnostic observations and tests to determine if the solar energy system is working properly to produce energy;

(3) upon completion of system installation, a written summary of operation and maintenance instructions on one page, posted at an accessible location acceptable to the taxpayer and that is near or at the solar energy system's array or balance of system components; and

(4) upon completion of system installation, written warranties in effect for equipment and contractor's labor, including their start and end dates and telephone, address and website contact information, as applicable, for honoring or extending warranties.

B. If the solar energy system is a solar thermal system, the following information shall be displayed:

(1) pump or fan status by a visual indicator, as applicable;

(2) outlet temperature of the collector loop;

(3) if a liquid collector, the collector loop's pressure; and

(4) the solar storage tank's temperature, if applicable.

C. If the solar energy system is a photovoltaic system, the following information shall be displayed:

(1) for all photovoltaic systems, a visual indicator for operating status;

(2) for an electric utility interconnected system without batteries

(a) daily and cumulative energy production in kilowatt-hours alternating current of the inverter output; and

(b) instantaneous power output in kilowatts alternating current of the inverter output;

(3) for an electric utility interconnected system with batteries, a method to enable real-time evaluation of system power or energy production; and

(4) for a stand-alone system with battery storage

(a) voltage and amperes of module array; and

(b) battery storage level.

D. If the system is installed by a contractor, have a written minimum two year warranty provided by the contractor on parts, equipment and labor with the following exceptions;

(a) the warranty provided by the contractor on each specific piece of equipment shall not exceed the duration and conditions of the warranty provided by the manufacturer of the equipment against defects in materials and workmanship;

(b) in the case of an expansion of an existing system, the warranty provided by the contractor shall be limited to cover only parts, equipment and labor directly related to the upgrade or expansion; and

*Contractor's Signature	*Date	Contractor's Printed Name
*Applicant's Signature	*Date	Applicant's Printed Name
Applicant's Signature	Date	Applicant's Printed Name

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Form 5 Residential Solar NMAC 3.3.14
Business/LLC/LLP Form

New Solar Market Development Tax Credit Form 5 Version 073120

For ECMD USE Only

Contact Information

1 LLC/LLP	Firm Name	*FEIN	
2 Authorized Representative	Name	Contact Info	Phone Number with Area Code
3* Mailing Address	Street Number and Street Name or HWY Number or PO Box # Town or City State	*ZIP (+ 4)	

Signature

*Authorized Representative Signature *Date

Authorized Representative Printed Name

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Form 0 Residential Solar NMAC 3.3.14
Solar System Certification Application Checklist

New Solar Market Development Tax Credit Form 0 Version 073120

		For ECMD USE Only				

NM Taxpayer Information

1 Name:	First Name MI Last Name	Contact Info:	Phone Number with Area Code

Use this Checklist to ensure you have a complete application package. Forms 1 through 3 are available from the Solar Market Development section of the website above or may be provided as completed documents if you employed a contractor. Attachments (A-1 to A-5) are supporting documents from the tax assessor, contractor, or the utility.

Application completed date: Month Day Year

Document Order in Application Package	Form	Form Name	Complete Criteria √		Part of Application Package? √	For ECMD USE
1	0	Application Checklist				
2	1	Solar System Certification Application	Signed ? Dated ? SSN/EIN filled in?	☐ ☐ ☐	☐	
3	2	Solar PV System Installation Form	Signed ? Dated ?	☐ ☐	☐	
4	BCA	Solar System BCA / Inspection Report	Optional if Form 2 is complete in BCA block Signed ? / Dated?	☐ ☐	☐	
5	3	Solar Thermal Installation Form	Signed ? Dated ?	☐ ☐	☐	
6	BCA	Solar System BCA / Inspection Report	Optional if Form 3 is complete in BCA block Signed ? / Dated?	☐ ☐	☐	
7	4	Taxpayer and PV Contractor SOU	Signed ? Dated ?	☐ ☐	☐	
8	4	Taxpayer & Thermal Contractor SOU	Signed ? Dated ?	☐ ☐	☐	
9	5	Business/LLC/LLP Form	FEIN? Signed ? Dated ?	☐ ☐ ☐	☐	
10	A-1	Property Tax Bill, or Notice of Valuation	Appl' name listed? LLC / LLP / Co. ?	☐ ☐	☐	
11	A-2	Invoice(s)			☐	
12a	A-3	Solar System Design or Schematic			☐	
12b	A-4a	For PhotoVoltaic – Utility Interconnect Agreement	Contract Number? Signed ? Dated ?	☐ ☐ ☐	☐	
13	A-4b	For Solar Thermal – SRCC Certification Form	Not Required for PV System		☐	
14	A-5	Building Code Inspection Report, or Copy of Inspection tag	Required by Form 2 or Form 3		☐	