



CONTRACTOR REGISTRATION FOR THE MD-PACE PROGRAM

PROCESS:

1. Registration for the MD-PACE program requires submission of this form to the MD-PACE program administrator: info@md-pace.com.
2. Following submission and review of this form, the interested party will be required to attend a webinar on C-PACE and the specifics of the MD-PACE program.
3. After completion of the webinar, the interested party will be considered a Registered Contractor with the MD-PACE program. The MD-PACE program will list this Registered Contractor on the program's website and will provide a digital "badge" indicating program registration for professional use.

All information is required for this form to be considered complete:

The following information will be used for internal purposes only:

1. Primary contact for internal program communications:	
Name	Title
<input type="text"/>	<input type="text"/>
Email	Phone
<input type="text"/>	<input type="text"/>

The following information may be made publicly available:

2. Company Name	Company Website		
<input type="text"/>	<input type="text"/>		
3. Primary contact to be listed on website:			
Name	Title		
<input type="text"/>	<input type="text"/>		
Email	Phone		
<input type="text"/>	<input type="text"/>		
4. What services do you offer? (check all that apply)			
<input type="checkbox"/> Energy audit	<input type="checkbox"/> Energy benchmarking	<input type="checkbox"/> Energy modeling & analysis	<input type="checkbox"/> Installation
<input type="checkbox"/> Measurement & verification	<input type="checkbox"/> Retro-commissioning	<input type="checkbox"/> Project design	<input type="checkbox"/> Project integration & management
Other (please describe):			
<input type="text"/>			

5. Which of the following building improvements does your company offer? (check all that apply)

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Air compressors | <input type="checkbox"/> Building envelope | <input type="checkbox"/> Building/EMS | <input type="checkbox"/> Cogeneration |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Geothermal | <input type="checkbox"/> HVAC | <input type="checkbox"/> Lighting |
| <input type="checkbox"/> Motors & drives | <input type="checkbox"/> Roofs | <input type="checkbox"/> Solar PV | <input type="checkbox"/> Solar thermal |
| <input type="checkbox"/> Environmental remediation | <input type="checkbox"/> Resiliency | <input type="checkbox"/> Water conservation | |

Other (please describe):

Please check the box below and sign.

I certify that I am duly authorized to sign this document on behalf of my firm.

Signature: _____

Date: _____

If you wish to cease being a registered contractor with the MD-PACE program, please email us at info@md-pace.com and we will remove your company from our directory.