



It Pay\$ to Plug In:
NJ's Electric Vehicle Charging Grant Program
Project Information Form (Level 1 & Level 2)

Project Information

Proposed Charging Station(s) Location (one form per facility or parking lot):	Street Address Line 1:
	Street Address Line 2:
	City: County:
	State: Zip Code:

The responses to the following questions **must** apply to all the charging station equipment entered on this form. Use a separate Project Information Form for each set of unique responses. For example, if a project involves installing chargers at both a public parking lot and an employee only parking lot at the same location, then separate Project Information Forms are required.

Location's Primary Category (Check only one):

Workplace
 Public Place
 Multi-Unit Dwelling

Is the location on government-owned property? Yes No

Are the charging station(s) listed below open to the general public? Yes No

Location's Primary Usage (Check only one):

Employee Use
 Fleet Use
 Public Use
 Private Use

Location's Primary Type (Check only one):

Leisure Destination
 College / University
 Public Park
 Downtown Area
 Hotel / Motel
 Public Parking Lot or Garage
 Retail Area – Not Downtown
 Transit Center
 Residential / Apartments / Condos
 Other



Charging stations being installed

Please provide the number of each type of charging station you propose to install as well as the make and model or other relevant information to describe the charging station(s).

Level 1 Charging Stations	Description
Number: (5 port minimum)	Make: Model:
Level 2 Charging Stations, single-port	Description
Number: (2 port minimum)	Make: Model:
Level 2 Charging Stations, dual-port	Description
Number: (2 port minimum)	Make: Model:

Name

Date

Signature

Grant Requested:	\$ _____
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Lease? Yes ___ No ___