

## EVITP, DIR, AND INSURANCE COMPLIANCE AFFIDAVIT

Incentive Recipient Name or Organization:	
Printed Name of Incentive Recipient's Authorized Representative (first and last):	
Title of Incentive Recipient / Authorized Representative:	

By signing this affidavit, I {Name \_\_\_\_\_} with respect to {Application Number \_\_\_\_\_}, {Project Site Address \_\_\_\_\_}, affirm that I am authorized to attest under penalty of perjury under the laws of the State of California, that each of the statements in the paragraphs below are complete, true, and correct. I understand and agree that applications and projects that do not meet the following requirements may not receive an incentive and any falsification or misrepresentation of information relating to the Project could result in disqualification from EnergIIZE.

1. The project shall comply with all Electric Vehicle Infrastructure Training Program (EVITP) requirements listed in Assembly Bill (AB) 841 (2020). (For EVITP details, reference Section 4, [Bill Text - AB-841 Energy: transportation electrification: energy efficiency programs: School Energy Efficiency Stimulus Program](#)).
2. The project shall comply with all California Department of Industrial Relations (DIR) registration requirements and California Public Works requirements (Lab. Code § 1720 et seq. and 8 CCR 16000 et seq.).
3. Incentive Recipient hereby warrants that it carries Worker's Compensation Insurance for all of its employees who will be engaged in the performance of this Agreement, and agrees to furnish to CALSTART satisfactory evidence of this insurance at any time CALSTART may request. If Incentive Recipient is self-insured for worker's compensation, it hereby warrants such self-insurance is permissible under the laws of the State of California and agrees to furnish to CALSTART satisfactory evidence of this insurance at any time CALSTART may request.

## INCENTIVE RECIPIENT SIGNATURE

I declare under penalty of perjury, under the laws of the State of California, that all the information provided above is true and correct. I further acknowledge that I have read, understand, and agree to be bound by the terms and conditions as outlined.

Incentive Recipient Name or Organization:	
Printed Name of Incentive Recipient's Authorized Representative (first and last):	
Title of Incentive Recipient / Authorized Representative:	
Signature:	
Date:	