

***HELP-New Mexico, Inc. is Seeking
Interested and Eligible Non-profit Organizations to Participate in
Solar Demonstration Projects***

HELP-New Mexico, Inc. a statewide community based organization, is seeking to partner with non-profit organizations to provide **Solar Panel Design and Installation Demonstration Projects** in Las Vegas, Santa Fe, Espanola, Albuquerque, Bernalillo and Las Cruces. **HELP-New Mexico, Inc.**, via the Community Services Block Grant Stimulus funding, will provide 150 eligible adults with classroom and hands on solar panel installation training by photovoltaic certified instructors and licensed electricians. Interested non-profit organizations will partner with HELP-NM to provide an Installation Demonstration Project Site for the class participants.

Eligible organizations must have current 501 (c)(3) non-profit status and have ownership of the proposed demonstration project site. Prospective organizations will be required to contribute some of the costs for the solar panel equipment and installation. Non-profit agencies that are interested in requesting an application may access the application at www.helpnm.com or by contacting Noelia McNew at (505-766-4942) or Rita Garcia-McManus (505-766-4950) no later than March 31, 2010.

APPLICATION INSTRUCTIONS

- 1) Download the Non-Profit Application form and complete all sections.**
- 2) Attach evidence of building ownership. (This may be supplied at a later date if preferred by the organization)**
- 3) Indicate level of commitment based on the estimated size of the system to be installed or the square footage of the building.**
- 4) Attach the organization's 501 (c)(3) certification.**
- 5) Provide a written justification for the level of assistance the organization is requesting. Use additional pages if needed.**
- 6) E-mail the Non-Profit Application form to noelia@helpnm.com or mail to:**

**HELP-NM
5105 Copper NE
Albuquerque NM, 87108
Attn: Noelia McNew**

HELP-New Mexico, Inc.
Non Profit Application
For
Solar Demonstration Project

Organization's Name: _____

Phone: _____ Tax ID: _____

Address: _____

City: _____ State: _____ Zip: _____

Building Ownership: _____ (Please attach evidence)

Estimated System Size: _____ Building Square Footage: _____

Level of Commitment: \$ _____ Assistance Requested: _____

Date Submitted: _____ 501(c)(3) Status _____
(Please attach)

Organizational Contact Person:

Name: _____

Title _____

Person Authorized to Approve Demonstration Project:

Name: _____

Title: _____

Justification for assistance request: (attach additional pages if needed)
