

Charge Ahead — EV Charging Station Incentives Program

Incentive Payment Reassignment Form

Payment Release Authorization

Complete this form ONLY if the incentive is to be paid to a person or company other than the site owner qualifying for the incentive.

I am authorizing the payment of the incentive to the third party named below, and I understand that I will not be receiving the incentive payment. I also understand that my release of the payment to a third party does not exempt me from the applicable program requirements.

Authorized by:

Customer Contact Name		Date
Company Name		
Company Address		
City	State	Zip Code
Account Holder Signature		

Check Should Be Made Payable to:

Payee Name/Company		
Mailing Address		
City	State	Zip Code
Contact Phone Number/Extension ()	Contact Email Address	