



It Pay\$ to Plug In: NJ's Electric Vehicle Charging Grant Program Application Form

	APPLICA	ANT INFORMATION		48
NJ Vendor ID Number: (Obtain from NJSTART)	Required to begin processing this application Application Date: 6/1/2020			
Applicant: Greencore Services LLC.				
Employer Name for workplace	charging projects (If di	fferent): Frank Baumar	nn	
Applicant Type** (Check only or	ne):			
Government	Corporation	Limited Liabilit	у	Other
State County Municipal	New Jersey Corp Out-of-State Cor	р.	Sole	ership Proprietorship
**If the Grantee is outside of N and file a copy with the Gran	lew Jersey, the Grantee mus t Officer.	t submit their business registrat	ion certificate from	the <u>Department of Treasury</u>
Mailing Address Line 1: 195	557 East Mainstreet			
Mailing Address Line 2: Sui	te 102			
City: Parker		State: CO	Zip: 80138	
Contact Person: Eric Johnson		Phone: 7204080318	F(Mail)	s.johnson@greenc global
Application Preparer (If different than applicant): Sam Thomson		Phone: 7209408410	Email: sam.h.thomson@gree	
DUNS Number: (Obtain from here)				
Financial Officer's Name: Bra	in Thomson	Title: CEO		
Grant Executor's Name: Bria (Person authorized to sign the grant		Title: CEO applicant)		
Resolution Certifier's Name: F		Title: COO		
(Person that will sign to certify that t		funding was passed. This persor	cannot be the sam	e as the Grant Executor.)
Type of Governing Body (Check Mayor and Council Board of Freeholders	Township Committe	ee Board of Comm	issioners	
Accounting Method: Cash Modified Accrual Accrual Other Date Fiscal Year Ends:				







	Comprehensive general liability	3. Worker's compensation
	Insurance	(Note that the second s
Insurance:	Self-insurance	Self-insurance
The Grantee maintains and must continue to maintain the	Not required	Not required
required insurance coverages as	2. Automotive liability	4. Employer's liability
follows: (Check your coverage)	Insurance	(Insurance
(0,00001	Self-insurance	Self-insurance
	Not required	Not required
Certificates of insurance or	Are on file with the Department.	
		er the effective date of the agreement.
insurance:	Other (explain)	
		/ /
BriAN VII	tomson	06/03/2020
Name		Date
Brom) T.	homson	
Signature		





	Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 1409 Broad Street				
corridor location):	Street Address Line 2:				
	_{City:} Bloomfield _{State:} NJ	CountyEssex			
	State: NJ	Zip Code: 07003			
Location Description: Shop Rite Bro	ookdale				
Is the location on government-owned Which eligible roadway would this loc	property? Yes No	o			
Is this location within one (1) mile from	m an exit or intersection?	Yes No			
Name of electric service provider:	SEG				
	rging stations being installed				
Please provide the number of each type and model or other relevant information					
DC Fast Charging Stations	Description	\			
Number: 9 (2 port minimum)	Make: ChargePoint				
(2 port minimum)	Model: See Attached Models				
	Power: 150 kW (minimur	n of 150kW required)			
Name Date					
Signature					
Grant Requested: \$ 200,000					
Lease? Yes ✓ No 🔲					









Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 59 Outwater Lane			
corridor location):	Street Address Line 2:			
	City: Garfield	County: Bergen		
	State: NJ	Zip Code: 07026		
Location Description: Shop Rite Ga	arfield			
Is the location on government-owned	property? Yes V	0		
Which eligible roadway would this loo	ation serve? Yes	No		
Is this location within one (1) mile fro	m an exit or intersection?	✓ Yes No		
Name of electric service provider:	SEG			
	rging stations being installe			
Please provide the number of each type and model or other relevant information				
DC Fast Charging Stations	Description	\		
Number: - (2	Make: ChargePoint			
Number: 2 (2 port minimum)	Model: See Attached M	lodels		
	Power: 150 kW (minim	um of 150kW required)		
Name				
Bum I Jun				
Signature				
Grant Re	quested: \$ 200,000			
	Lease? Yes V No	 -		









Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: Hackensack Plaza and S. River			
corridor location):	Street Address Line 2:			
	City: Hackensack	County: Bergen		
	State: NJ	Zip Code: 07601		
Location Description: Shop Rite Ha	ickensack			
Is the location on government-owned Which eligible roadway would this loc		<u></u>		
Is this location within one (1) mile from	m an exit or intersection?	Yes No		
Name of electric service provider:	SEG			
	rging stations being instal			
Please provide the number of each type and model or other relevant information		-		
DC Fast Charging Stations	Description			
Number	Make: ChargePoint			
Number: 2 (2 port minimum)	Model: See Attached	Models		
	Power: 150 kW (min	imum of 150kW required)		
Name Signature	Date			
Grant Requested: \$ 200,000				
S. alic Ne	Lease? Yes No			









Project Information			
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 171 Browerton Road		
corridor location):	Street Address Line 2:		
	_{City:} Little Falls _{State:} NJ	County: Passaic	
	State: NJ	Zip Code: 07424	
Location Description: Shop Rite Lit	tle Falls		
Is the location on government-owned			
Which eligible roadway would this loo	cation serve? Yes 🗸 N	0	
Is this location within one (1) mile fro	m an exit or intersection?	Yes No	
Name of electric service provider:	SEG		
	rging stations being installed	e to install as well as the make	
Please provide the number of each type and model or other relevant information			
DC Fast Charging Stations	Description		
Number: 9 (2 port minimum)	Make: ChargePoint		
(2 port minimum)	Model: See Attached Models		
	Power: 150 kW (minimu	m of 150kW required)	
Name //	 Date		
Brum J. Jun	Bute		
Signature			
Grant Requested: \$ 200,000			
	Lease? Yes V No	-	









Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 175 Main Street			
corridor location):	Street Address Line 2:			
	City: Lodi	County: Bergen		
	State: NJ	Zip Code: 07664		
Location Description: Shop Rite Lo	di			
Is the location on government-owned	property? Yes	No		
Which eligible roadway would this loo	ation serve? Yes	No		
Is this location within one (1) mile from	m an exit or intersection?	Yes No		
Name of electric service provider:	SEG			
	rging stations being insta			
Please provide the number of each type and model or other relevant information		-		
DC Fast Charging Stations	Description	` '		
Number: 2 (2 port minimum)	Make: ChargePoint			
(2 port minimum)	Model: See Attached Models			
	Power: 150 kW (mir	nimum of 150kW required)		
Name BMm I Lu	Date	е		
Signature				
	guested: \$ 200,000			
Grant Re	, , ,			
Lease? Yes ✓ No 🔲				









	Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 400 Marin Blvd				
corridor location):	Street Address Line 2:				
	_{City:} Jersey City	County: Hudson			
	State: NJ	Zip Code: 07302			
Location Description: Shop Rite Me	etro Plaza				
Is the location on government-owned	property? Yes No				
Which eligible roadway would this loo	cation serve? Yes	lo			
Is this location within one (1) mile fro	m an exit or intersection?	Yes No			
Name of electric service provider:	SEG				
	rging stations being installed				
Please provide the number of each type and model or other relevant information					
DC Fast Charging Stations	Description Description				
Number (2)	Make: ChargePoint				
Number: 2 (2 port minimum)	Model: See Attached Mo	odels			
	Power: 150 kW (minimu	m of 150kW required)			
Name	Date				
Bum I Su	Date				
Signature					
Grant Requested: \$ 200,000					
Lease? Yes No					









Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 437 Franklin Avenue			
corridor location):	Street Address Lin	e 2:		
	City: Nutley	County:Essex		
	State: NJ	Zip Code: 07110		
Location Description: Shop Rite Nu	ıtley			
Is the location on government-owned Which eligible roadway would this loc	property?	<u> </u>		
Is this location within one (1) mile from	m an exit or interse	ection? Yes No		
Name of electric service provider:				
	rging stations being			
Please provide the number of each type and model or other relevant information		you propose to install as well as the make arging station(s).		
DC Fast Charging Stations Description				
Number	Make: ChargePoint			
Number: 2 (2 port minimum)	Model: See Attached Models			
	Power: k	W (minimum of 150kW required)		
Name Bulm J. Lin				
Signature				
Grant Re	quested: \$ 200	,000		
Lease? Yes ✓ No				









Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 224 RT 4 East at Forest Ave			
corridor location):	Street Address Line 2:			
	_{City:} Paramus	County: Bergen		
	State: NJ	Zip Code: 07662		
Location Description: Shop Rite Pa	ıramus			
Is the location on government-owned	property? Yes No			
Which eligible roadway would this loo	cation serve? Yes	o		
Is this location within one (1) mile fro	m an exit or intersection?	Yes No		
Name of electric service provider:	SEG			
	rging stations being installed			
Please provide the number of each type and model or other relevant information				
DC Fast Charging Stations	Description			
Number: (2)	Make: ChargePoint			
Number: 2 (2 port minimum)	Model: See Attached Mo	dels		
	Power: 150 kW (minimu	m of 150kW required)		
Name 2 //	Date			
Bum I Am	Date			
Signature	<u> </u>			
Grant Requested: \$ 200,000				
Grant Re	1	_		
	Lease? Yes V No	-		









Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 301 Main Street			
corridor location):	Street Address Line 2:			
	City: Paterson	County: Passaic		
	State: NJ	Zip Code: 07505		
Location Description: Shop Rite Pa	aterson			
Is the location on government-owned Which eligible roadway would this loc		lo.		
Is this location within one (1) mile fro	m an exit or intersection?	Yes No		
Name of electric service provider:	SEG			
	rging stations being installed			
Please provide the number of each typ and model or other relevant information				
DC Fast Charging Stations				
Number	Make: ChargePoint			
Number: 2 (2 port minimum)	Model: See Attached Mo	dels		
	Power: 150 kW (minimu	m of 150kW required)		
Name h a e 1				
Name Date				
Signature				
	1	_		
Grant Re	equested: \$ 200,000			
Lease? Yes ✓ No				









Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 364 Convery Blvd			
corridor location):	Street Address Line 2:			
	City: Perth Amboy NJ State:	County:Middlesex		
	State: NJ	Zip Code: 08861		
Location Description: Shop Rite Pe	erth Amboy			
Is the location on government-owned Which eligible roadway would this loc				
Is this location within one (1) mile from				
Name of electric service provider:	SEG			
	rging stations being installed			
Please provide the number of each type and model or other relevant information				
DC Fast Charging Stations	Description			
Number	Make: ChargePoint			
Number: 2 (2 port minimum)	Model: See Attached Models			
	Power: 150 kW (minim	um of 150kW required)		
Name Date				
Signature				
Grant Requested: \$ 200,000				









Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 2 Interstate Plaza			
corridor location):	Street Address Line 2:			
	City: Ramsey	County: Bergen		
	State: NJ	Zip Code: 07446		
Location Description: Shop Rite Ramsey				
Is the location on government-owned property?				
Which eligible roadway would this location serve? Yes Vo				
Is this location within one (1) mile from an exit or intersection?				
Name of electric service provider: PSEG				
Charging stations being installed				
Please provide the number of each type and model or other relevant information				
DC Fast Charging Stations	Description	(-)-		
Number: 2 (2 port minimum)	Make: ChargePoint			
	Model: See Attached Models			
	Power: 150 kW (minim	um of 150kW required)		
Name Date				
Bulm & Am				
Signature				
Grant Requested: \$ 200,000				
Lease? Yes V No				









Project Information				
Proposed Charging Station(s) Location (at least one form per	Street Address Line 1: 220 Passaic Street			
corridor location):	Street Address Line 2:			
	City: Rochelle Park	County: Bergen		
	State: NJ	Zip Code: 07762		
Location Description: Shop Rite Rochelle Park				
Is the location on government-owned property? Yes No Which eligible roadway would this location serve? Yes No				
Is this location within one (1) mile from an exit or intersection?				
Name of electric service provider: PSEG				
	rging stations being installed	a to install as well as the make		
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).				
DC Fast Charging Stations	Description			
Number: 2 (2 port minimum)	Make: ChargePoint			
	Model: See Attached Models			
	Power: 150 kW (minimum	n of 150kW required)		
Name Date				
Signature				
Grant Requested: \$ 200,000				
Lease? Yes ✓ No 🔽				



