**Cost Share Reduction Request Form and Instructions**

**for**

**Applicants for Financial Assistance under Funding Opportunity Announcement (FOA)**

**DE-FOA-0002317**

In accordance with the Secretary’s and Deputy Secretary’s authorities, the Office of Indian Energy Policy and Programs (Office of Indian Energy) has been directed to find ways to provide any assistance within the Department of Energy’s statutory authority to alleviate the financial impacts of COVID-19. At the direction of the Deputy Secretary, the Office of Indian Energy is now implementing a formalized process to consider cost-share reduction requests from Indian tribes and other eligible tribal entities who have received financial assistance from the Office of Indian Energy. This document outlines the instructions for how to request a reduction of non-federal cost share for the remainder of your award.

As potential applicant for financial assistance through the Office of Indian Energy under FOA DE-FOA-0002317, you may request a reduction to the minimum cost share requirement for agreements awarded under the Energy Policy Act 2005. However, unless the DOE determines the requested reduction to be necessary and appropriate, all recipients are required to contribute the currently approved non-federal cost share per your Agreement. **Per statute, only reductions to the non-federal cost share can be considered, not the elimination of non-federal cost share in its entirety.**

Consistent with the Secretary’s and Deputy Secretary’s direction to find ways to provide assistance within the Department of Energy’s (DOE) statutory authority to alleviate the financial impacts of COVID-19, considerations for determining a reduction to be necessary and appropriate, may include the requesting Indian tribe or eligible tribal entity’s need for a cost-share reduction, and also the implications if a requested reduction is not received. Other considerations may also include:

1. Energy costs defined as the current price of electricity for the requesting Indian tribe or eligible tribal entity using the best currently available tribal data, as compared to average price of electricity in your state using the DOE’s Energy Information Administration’s (EIA) Table 5.6.A, Average Price of Electricity, Residential Rates as of July 2020, which can be found here: <https://www.eia.gov/electricity/monthly/epm_table_grapher.php?t=epmt_5_6_a>
2. Current unemployment rate of requesting Indian tribe or eligible tribal entity using the best currently available tribal data, as compared to the unemployment rate in your state using the U.S. Bureau of Labor Statistics (BLS) State Unemployment Summary, Table B., Rate as of July 2020, which can be found here on page 6: <https://www.bls.gov/news.release/archives/laus_08212020.pdf>
3. Loss of revenue due to COVID-19 as compared to the same quarter the previous year based on the best currently available tribal data.
4. Other factors as outlined by the requestor and accompanied by appropriate supporting documentation that demonstrates a reduction would be necessary and appropriate, including the implications if a requested reduction is not received.

NOTE: The use of the Cost Share Reduction Request Form is not required, however, it is recommended. If Indian tribes or eligible tribal entities so chose, they can submit a letter addressing the information included within the Cost Share Reduction Request Form. Using the form is up to each requesting Indian tribe or eligible tribal entity to decide, as well as which factors to include.

See instructions for completing the Cost share Reduction Request on the next page.

**Instructions for Determining Factors**

Use the instructions below to determine the criteria to be considered and any other factors to be considered in completing the Cost Share Reduction Request Form below. Once finished, remove pages 1 and 2 and these instructions and only submit the completed Cost Share Reduction Request Form itself.

The time required to complete the Cost Share Reduction Request Form is estimated to take between 60 to 120 minutes, depending on how many factors are used, excluding the required certification, and may take longer if other factors and a supplemental letter are being submitted for consideration.

**Step 1: Price of Electricity**

Provide the tribal community’s current residential price of electricity in cents per kilowatt-hour (e.g., $0.135 equals 13.5 cents per kilowatt-hour) using the best currently available tribal data. Record this residential price of electricity under **Question #1** of the Cost Share Reduction Request Form.

If your proposed project includes sites in multiple tribal communities (i.e., Reservations, Alaska Native Villages, Tribal Jurisdictional Areas), you will need to provide a separate electricity price for each tribal community and record the data for each community on the Cost Share Reduction Request Form.

**Step 2: Unemployment Rate**

Provide the tribal community’s unemployment rate (percentage) using the best currently available tribal data. Record this percentage under **Question #2** of the Cost Share Reduction Request Form.

If your proposed project includes sites in multiple tribal communities (i.e., Reservations, Alaska Native Villages, Tribal Jurisdictional Areas), you will need to provide the unemployment rate for each tribal community and record the data for each community on the Cost Share Reduction Request Form.

**Step 3: Loss of Revenue Due to COVID-19**

The loss of revenue due to COVID-19 as compared to the same quarter the previous year is an estimate of the amount funds lost due to COVID-19 from revenue generating operations. That dollar amount should be included under **Question #3** below. If the requesting tribe does not have any revenue generating operations, provide a statement to that effect under **Question #3** below.

Note that you will be asked to describe the source of the data and the requesting tribe or tribal entity’s authorized representative must certify to the loss of revenue due to COVID-19 as compared to the same quarter the previous year, attesting to the accuracy of the information on the Cost Share Reduction Request Form.

**If you wish DOE to consider only the factors completed above, skip to Step 6 below. If, however, you would like DOE to consider other factors, in addition to those above, continue to Step 4 below.**

**Step 4: Other Factors for Consideration**

Identify any other factors you would like DOE to consider in determining whether the requested cost share reduction is necessary and appropriate, including the implications if a requested reduction is not received.

List those factors under **Question #4** below and include rationale for considering those other factors in a supplemental letter (see Step 4 below and instructions on the Request Form).

**Step 5: Rationale for Other Factors for Consideration**

Attach a supplemental letter to the completed Cost Share Reduction Request Form below that includes rationale for the other factors identified under Step 4.

**Step 6: Certification**

To complete the Cost Share Reduction Request Form, have an authorized representative certify to the information by signing the completed Cost Share Reduction Request Form below, attach the supplemental letter from Step 5, if applicable, and submit to [TribalGrants@hq.doe.gov](mailto:TribalGrants@hq.doe.gov).

**Cost Share Reduction Request Form**

Please complete the questions below using the instructions in blue. Once complete, please delete the instructions.

1. Requesting entity **name and application identifier.**

Type requesting entity name and provide an application identifier (Exchange Control Number), if available, here.

1. Minimum **cost share percentage being requested**.

Specify the minimum cost share percentage being requested here.

Per statute, only reductions to the non-federal cost share can be considered, not the elimination of non-federal cost share in its entirety.

1. Identify the **location of the tribal community** or communities where the proposed project is located.

Identify the tribal community or communities where the proposed project is located. Specifically, provide the following:

|  |  |
| --- | --- |
| Location: | State the name of the tribal community (e.g., Reservation, Alaska Native Village, Tribal Jurisdictional Area, or other identifier) here. |
| Address: | Include the address here. |
| City, County, State: | Include the City, County, and State here. |
| Zip Code: | Include the Zip Code here. |

If multiple communities, copy the table above, paste here and provide the information above for the second tribal community. Repeat as needed.

1. What is the **tribal community’s current price of electricity**?

Provide the tribal community’s current residential price of electricity in cents per kilowatt-hour (e.g., $0.135 equals 13.5 cents per kilowatt-hour) using the best currently available tribal data.

By signing this form, the requestor’s authorized representative will be attesting to the accuracy of the information.

1. What is the **comparative unemployment rate of the tribal community** or tribal communities where the proposed project is located (see Step 2 for link)?

Provide the tribal community’s unemployment rate (percentage) using the best currently available tribal data.

By signing this form, the requestor’s authorized representative will be attesting to the accuracy of the information.

1. Identify the requestor’s **loss of revenue** due to COVID-19 (see Step 3 above).

Specify the amount of revenue lost due to COVID-19 as compared to the same quarter the previous year, and describe the source of the data. If the requestor does not have any revenue generating operations, provide a statement to that affect here.

By signing this form, the requestor’s authorized representative will be attesting to the accuracy of the information.

**If you wish DOE to consider only the factors above, indicate “Not Applicable” under Questions #4 and #5 below, and have an authorized representative certify to the information by signing the completed Cost Share Reduction Request Form and submit to** [**TribalGrants@hq.doe.gov**](mailto:TribalGrants@hq.doe.gov)**.**

**If, however, you would like DOE to consider other factors, in addition to those under Questions #1 through #3 above, continue on to Question #4.**

1. Identify any **other factors** you would like DOE to consider in determining whether the requested cost share reduction is necessary and appropriate, including the implications if a requested reduction is not received.

List any other factors you would like DOE to consider as determined by the tribe or tribal entity. The factors listed only need to be identified here as you will include the rationale for considering those other factors in a supplemental letter (see Question #5 below).

* 1. Other factor #1
  2. Other factor #2
  3. Other factor #3
  4. Other factor #4

If you are not proposing other factors, in addition to those under Questions #1 through #3 above, indicate “Not Applicable” here.

1. Provide a **supplemental letter** as an attachment which includes the rationale for considering the other factors identified under Question #4 above. The letter must be on the requesting Indian tribe or eligible tribal entity’s letterhead and signed by an authorized representative of the requesting entity. Please include this letter as an attachment to the completed and certified Cost Share Reduction Request Form.

If you are not proposing other factors, in addition to those under Questions #4, indicate “Not Applicable” here.

If, however, you would like DOE to consider other factors, state “See attached” here and attach a supplemental letter which includes the rationale for considering the other factors.

**Have an authorized representative certify to the information by signing the completed Cost Share Reduction Request Form below, attach the supplemental letter, if applicable, and submit to** [**TribalGrants@hq.doe.gov**](mailto:TribalGrants@hq.doe.gov)**.**

**Authorized Representative Certification**

I represent, by my signature below, that all the information provided herein is accurate and that I am authorized to certify this information on behalf of the requestor.

|  |  |
| --- | --- |
| Name: |  |
| Title: |  |
| Signature of Authorized Official: |  |
| Date: |  |