

Application Submittal Checklist

The following items are required for submittal of the grant application. Please verify and check off that the items have been included in the application packet.

- 1) Hawaii Compliance Express Certificate (If the Applicant is an Organization)
- 2) Declaration Statement
- 3) Verify that grant shall be used for a public purpose
- 4) Background and Summary
- 5) Service Summary and Outcomes
- 6) Budget
 - a) Budget request by source of funds ([Link](#))
 - b) Personnel salaries and wages ([Link](#))
 - c) Equipment and motor vehicles ([Link](#))
 - d) Capital project details ([Link](#))
 - e) Government contracts, grants, and grants in aid ([Link](#))
- 7) Experience and Capability
- 8) Personnel: Project Organization and Staffing



Digitally signed by Emily
Q Chung
Date: 2026.01.22
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Emily Q Chung, Chief Executive Officer

January 22, 2026

AUTHORIZED SIGNATURE

PRINT NAME AND TITLE

DATE



STATE OF HAWAII
STATE PROCUREMENT OFFICE

CERTIFICATE OF VENDOR COMPLIANCE

This document presents the compliance status of the vendor identified below on the issue date with respect to certificates required from the Hawaii Department of Taxation (DOTAX), the Internal Revenue Service, the Hawaii Department of Labor and Industrial Relations (DLIR), and the Hawaii Department of Commerce and Consumer Affairs (DCCA).

Vendor Name: HAWAII PRIMARY CARE ASSOCIATION

DBA/Trade Name: Hawaii Primary Care Association

Issue Date: 01/15/2026

Status: **Compliant**

Hawaii Tax#: [REDACTED]
New Hawaii Tax#: [REDACTED]
FEIN/SSN#: [REDACTED]
UI#: XXXXXX1052
DCCA FILE#: 73741

Status of Compliance for this Vendor on issue date:

Form	Department(s)	Status
A-6	Hawaii Department of Taxation	Compliant
8821	Internal Revenue Service	Waived
COGS	Hawaii Department of Commerce & Consumer Affairs	Exempt
LIR27	Hawaii Department of Labor & Industrial Relations	Compliant

Status Legend:

Status	Description
Exempt	The entity is exempt from this requirement
Compliant	The entity is compliant with this requirement or the entity is in agreement with agency and actively working towards compliance
Pending	A status determination has not yet been made
Submitted	The entity has applied for the certificate but it is awaiting approval
Not Compliant	The entity is not in compliance with the requirement and should contact the issuing agency for more information

**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS PURSUANT TO
CHAPTER 42F, HAWAII REVISIED STATUTES**

The undersigned authorized representative of the applicant certifies the following:

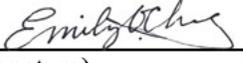
- 1) The applicant meets and will comply with all of the following standards for the award of grants pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant is awarded;
 - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
 - c) Agrees not to use state funds for entertainment or lobbying activities; and
 - d) Allows the state agency to which funds for the grant were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant.
- 2) If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is incorporated under the laws of the State; and
 - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided; and
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material conflict of interest and serve without compensation.
- 4) The use of grant-in-aid funding complies with all provisions of the Constitution of the State of Hawaii (for example, pursuant to Article X, section 1, of the Constitution, the State cannot provide "... public funds ... for the support or benefit of any sectarian or nonsectarian private educational institution...").

Pursuant to Section 42F-103, Hawai'i Revised Statutes, for grants used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Hawaii Primary Care Association

(Typed Name of Individual or Organization)

	<small>Digitally signed by Emily Q Chung Date: 2026.01.22 10:29:02 -10'00'</small>	January 22, 2026
(Signature)		(Date)
Emily Q Chung		Chief Executive Officer
(Typed Name)		(Title)



January 23, 2026

Grant-in-Aid Review Committee
c/o House Finance Committee /
Senate Ways & Means Committee

Re: Verification That Proposed Grant-in-Aid Project Serves a Public Purpose

To the Honorable Chairs and Committee Members:

On behalf of the Hawai'i Primary Care Association (HPCA), a 501(c)(3) organization representing Hawai'i's Federally Qualified Health Centers (FQHCs), I am writing to verify that the proposed Grant-in-Aid project is exclusively for a public purpose.

For more than thirty years, HPCA has worked to improve the health of communities in need by expanding and sustaining high-quality primary health care across Hawai'i. We support a statewide network of Community Health Centers that collectively serve more than 150,000 residents each year, providing integrated medical, dental, and behavioral health care regardless of ability to pay. These centers are critical access points for children, kūpuna, low-income individuals, rural communities, and medically underserved populations.

Public Purpose of the Proposed Project

Led by HPCA, in partnership with Collective Energy and mission-aligned funders, this initiative advances the deployment of solar and storage microgrids at nonprofit community health centers across the state. These systems strengthen energy resilience, reduce operational disruptions, and ensure that essential health services remain available to the public during grid failures.

Community Health Centers often serve as frontline hubs for health, safety, and recovery during emergencies. They are trusted, community-based sites that remain open to provide services, dispense medications, offer safe gathering points, and protect vulnerable populations when other infrastructure is compromised. Hawai'i's geographic isolation, heavy reliance on imported fossil fuels, and exposure to hurricanes, wildfires, tsunamis, and extreme weather events significantly heighten the risks of prolonged power disruptions. The implementation of Public Safety Power Shutoffs (PSPSs) by Hawaiian Electric in July 2024 further underscores the urgent need for reliable, decentralized, and clean energy sources for public-serving facilities. Traditional diesel generators—used by many health centers today—are expensive to operate, require frequent maintenance, rely on fragile fuel supply chains, and contribute to harmful emissions. The proposed project directly addresses these challenges by enabling resilient, sustainable, and cost-effective energy infrastructure that ensures health centers can continue providing essential public services before, during, and after emergencies.

This initiative:

- Protects public health and safety,
- Strengthens disaster resilience statewide,
- Ensures continuous access to health care for vulnerable and underserved populations, and
- Reduces environmental impacts while enhancing long-term financial sustainability.

Thank you for your consideration and for your continued support of Hawai'i's community health infrastructure.

Respectfully submitted,

Digitally signed by Emily Q
Chung
Date: 2026.01.22 10:31:57 -10'00'

Emily Q. Chung, MPH MCHES
Chief Executive Officer

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
2 CUPANIA CIRCLE
MONTEREY PARK, CA 91754

DEPARTMENT OF THE TREASURY

Date: **APR 21 1993**

HAWAII STATE PRIMARY CARE
ASSOCIATION
3442 WAIALAE
HONOLULU, HI 96816-2653

Employer Identification Number:
99-0268275
Contact Person:
TYRONE THOMAS
Contact Telephone Number:
(213) 894-2289

Our Letter Dated:
November 30, 1988
Addendum Applies:
No

Dear Applicant:

This modifies our letter of the above date in which we stated that you would be treated as an organization that is not a private foundation until the expiration of your advance ruling period.

Your exempt status under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3) is still in effect. Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Code because you are an organization of the type described in section 509(a)(1) and 170(b)(1)(A)(vi).

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(1) organization.

If we have indicated in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours,



Michael J. Quinn
District Director

Application for Grants

If any item is not applicable to the request, the applicant should enter “not applicable”.

I. Certification – Please attach immediately after cover page

Hawaii Compliance Express Certificate (If the Applicant is an Organization)

If the applicant is an organization, the applicant shall submit one (1) copy of a Hawaii Compliance Express Certificate from the Comptroller of the Department of Accounting and General Services that is dated no earlier than December 1, 2025.

See attached “Hawaii Compliance Express Certificate”

Declaration Statement

The applicant shall submit a declaration statement affirming its compliance with [Section 42F-103, Hawaii Revised Statutes](#).

See attached “Declaration Statement of Applicants for Grants”

Public Purpose

The applicant shall specify whether the grant will be used for a public purpose pursuant to [Section 42F-102, Hawaii Revised Statutes](#).

See attached letter of verification

II. Background and Summary

This section shall clearly and concisely summarize and highlight the contents of the request in such a way as to provide the State Legislature with a broad understanding of the request. Please include the following:

The Hawai'i Primary Care Association (HPCA), in partnership with Collective Energy and catalytic funders, is empowering Federally Qualified Health Centers (FQHCs) across Hawai'i to claim clean energy independence. The Local Energy Initiative (LEI) – Health Centers project will develop solar-plus-storage microgrids that reduce fossil fuel dependence and keep essential health services accessible during emergencies, while saving community health centers thousands of dollars in electricity costs each year. This initiative protects critical public health infrastructure, advances energy equity, and allows

community health centers to serve as resilient hubs for Hawai'i's most vulnerable populations during times of crisis.

The Hawai'i Primary Care Association (HPCA) improves the health of communities in need by advocating for, expanding access to, and sustaining high-quality health care through our statewide network of federally qualified health centers (FQHCs). HPCA believes in nurturing vibrant and healthy communities that work together, and is committed to partnerships, innovation, and teamwork that transform our healthcare system and improve the lives of all Hawai'i's people.

For over thirty years, HPCA has worked on behalf of vulnerable populations throughout Hawai'i, helping to establish access to comprehensive primary health care services regardless of ability to pay. HPCA has developed strong, productive partnerships with providers, health care organizations, lawmakers, policy officials, and public advocates to improve quality and access for over 154,000 people. As a trusted statewide intermediary, HPCA is well-positioned to steward public funds, coordinate multi-site initiatives, and scale programs that strengthen the long-term sustainability and resilience of Hawai'i's community health centers.

To advance the LEI – Health Centers project, HPCA has partnered with Collective Energy, a mission-driven social benefit company specializing in clean energy and resilience solutions for community health centers. The founders and leadership of Collective Energy bring a combined 36 years of experience working directly with health centers and possess a deep understanding of operational, financial, and regulatory challenges these organizations face. Unlike traditional energy developers, Collective Energy is built to work with health centers through collaborative partnerships that integrate technical development, education, financing strategy, fundraising, and advocacy.

To date, Collective Energy has engaged more than 400 health centers in 38 states and has built or is currently building more than 60 clean energy systems nationwide — more than any other organization focused on this sector. Its work focuses on ensuring that health centers remain operational during power outages and climate-related disruptions, particularly in communities disproportionately impacted by chronic disease, poverty, and climate risks.

Through this Grant-in-Aid (GIA) request for \$2.5 million in Capital Improvement Project (CIP) expenses and the separate Operational Project (OP) application request, HPCA seeks to leverage its statewide network and fiscal stewardship capacity, in partnership with Collective Energy's specialized expertise, to advance scalable renewable energy and resilience solutions that reduce long-term operating costs, protect vulnerable populations, and improve island-wide and state-wide community resilience, ultimately equipping nine

health center sites with solar microgrids under the *Local Energy Initiative (LEI) – Health Centers* project.

The Local Energy Initiative (LEI) – Health Centers project will deliver **solar microgrids at nine sites** operated by **five nonprofit community health centers** across **four islands**—O‘ahu, Moloka‘i, Maui, and Hawai‘i Island—serving medically underserved urban, rural, and remote communities statewide.

The timing for this work is urgent, as changes to the Inflation Reduction Act (IRA) in July 2025 initiated a phase-out of key solar incentives, making it essential to preserve the 30% rebate. Acknowledging this, HPCA worked with Collective Energy to “safe harbor” these projects in the summer of 2025 to protect the 30% rebate they are eligible for by securing grant funding for each project. This GIA request will leverage private grant funding, the 30% federal rebate, and the state of Hawai‘i’s rebate to allow these projects to be built without the health centers having to use their own money. This will not only save them hundreds of thousands of dollars in upfront capital costs but will also lower their electricity costs over the life of the systems, generating significant savings over a 25-year period and freeing operating dollars that can be reinvested into patient care, staffing, and essential community health services.

The goals and objectives related to the request;

The goal of this request is to advance energy equity, disaster readiness, and community resilience by supporting the development of solar-powered microgrids at essential community health facilities. This initiative will establish a scalable model for a statewide network of community resilience hubs at community health centers, with future cohorts envisioned to include other critical community-serving nonprofit facilities.

The projects seek a total of \$2.5 million in a CIP GIA and \$196,000 in a separate OP GIA.

The CIP GIA funding, leveraged with federal and state solar and energy storage incentives, will enable the development of up to nine solar-plus-storage microgrid systems, totaling approximately \$6.2 million in capital investment. The OP GIA funding represents programmatic, project management, contract management, reporting and fiscal stewardship responsibilities, as well as developing future scalability plans.

Key goals and objectives include:

- Saving participating health centers an estimated \$16 million in electricity costs over 25 years, allowing them to repurpose scarce funds into patient care, delivery, staffing, and essential community health services.
- Adding battery energy storage to increase resiliency during outages and reduce service disruptions, materially improving project return on investment (ROI) by avoiding an estimated \$11.9 million in power-outage losses across all sites over the system life.*

- Ensuring continuity of critical health center services during disasters and grid outages.
- Advancing energy equity for medically underserved, low-income, and rural communities.
- Enabling health centers to function as community resilience hubs.
- Supporting local workforce development and clean energy development by collaborating with Hawai'i-based partners.
- Establishing a replicable and scalable model for future cohorts.

** Avoided loss estimates are based on modeled outage duration, system resiliency hours, and historic average costs of power interruptions at health center facilities.*

The public purpose and need to be served;

The LEI – Health Centers project serves a clear public purpose by supporting essential public-serving nonprofit community health centers, strengthening disaster preparedness, and reducing operating costs for critical statewide healthcare infrastructure. These centers are designated FQHCs and provide safety-net health care services, often being the only source of health care in their communities. The initiative directly supports the most vulnerable residents and rural communities by ensuring continuity of primary and preventative healthcare services during emergencies and periods of grid disruption.

Led by the HPCA, in partnership with Collective Energy and mission-aligned supporters, this initiative advances the deployment of solar and storage microgrids at nonprofit community health centers across Hawai'i. These health centers provide care regardless of ability to pay and serve as critical access points for children, the elderly, and medically underserved populations. During natural disasters and power outages, they often function as frontline community locations for health, safety, and recovery.

Hawai'i's geographic isolation, reliance on imported fossil fuels, and exposure to hurricanes, wildfires, tsunamis, and other extreme weather events heighten vulnerability to energy disruptions. In July 2024, Hawaiian Electric began implementing Public Safety Power Shutoffs (PSPSs) in high-risk areas, underscoring the need for decentralized, resilient energy amid an increasingly unreliable, aging grid. Traditional diesel generators are costly to operate, require frequent maintenance, and depend on fuel supply chains that may fail during emergencies, thereby contributing to emissions and pollution.

The LEI – Health Centers project addresses these challenges by enabling community health centers to install resilient, clean-energy microgrids that provide reliable backup power, reduce dependence on fossil fuels, and stabilize long-term energy costs.

Across participating sites, the projects are projected to generate approximately **\$16 million in electricity cost savings over 25 years (or ~\$641,000 annually across the first**

cohort), allowing them to redirect limited resources toward patient care, staffing, and community health programs rather than utility expenses. Adding battery energy storage to increase resiliency during outages, materially improving project ROI by avoiding an estimated \$11.9 million in power-outage losses across all sites over the life of the systems.

This initiative also responds to a shifting federal landscape. As federal clean energy incentives and climate resilience funding face phase-outs and additional uncertainty, the need for state leadership has become more acute. Grant-in-Aid support represents a timely opportunity for the State of Hawai'i to sustain progress toward its clean energy, climate resilience, and public health goals by filling critical financing gaps for nonprofit organizations that lack access to capital but deliver essential public services.

By supporting the LEI – Health Centers project, the State advances multiple statutory and policy objectives, including:

- Protection of essential health services during disasters and emergencies
- Promotion of public health and safety for underserved populations
- Reduction of long-term operating costs for nonprofit service providers
- Advancement of state energy independence and emissions reduction goals
- Investment in resilient infrastructure without creating ongoing state financial obligations
- Saving money for health centers' mission to provide low-income patient care

The LEI – Health Centers project initial phase aims to support five nonprofit community health center organizations serving low-income communities across four islands, with nine solar-plus-storage microgrid systems deployed by the end of 2028.

These clean energy systems are projected to offset more than 700 tons of carbon emissions annually—equivalent to planting over 11,575 trees or displacing the equivalent of 78,624 gallons of burned gasoline—while generating enough energy to power approximately 850 homes each year and providing reliable, on-site power that enables health centers to remain operational when they are needed most. Each site could save up to \$40,000 in the first year, allowing reinvestment into care delivery and other operational costs.

Grant-in-Aid funding will leverage additional local private, philanthropic, and incentive-based capital, maximizing public return on investment while delivering durable, statewide public benefit to the five health centers and nine projects across the islands, each located in a medically underserved community.

Below is a breakdown of the systems and financing for each proposed project. For reference:

Usage Offset:

The percentage of each site’s annual electricity demand met by on-site solar generation.

Total Project Cost:

The total cost of the system, inclusive of design, engineering, permitting, solar panels, battery energy storage systems, inverters, wiring and related materials, construction labor, and commissioning.

Less Federal IRA Rebate (30%):

The federal Investment Tax Credit (ITC) authorized under the Inflation Reduction Act, allowing 30% of eligible project costs to be recovered as a rebate for nonprofit organizations. This rebate has been preserved for each project through previously secured private grant funding.

Less State Renewable Energy Technologies Income Tax Credit (RETITC):

The Hawai’i Renewable Energy Technologies Income Tax Credit authorized under Hawai’i Revised Statutes §235-12.5, which provides state tax incentives for qualifying renewable energy projects.

Less private philanthropic grant funding:

Grant funding received from California-based nonprofit Direct Relief and applied toward project costs to preserve, or “safe harbor,” eligibility for the federal IRA rebate.

Average Annual Energy Savings (from solar and battery)

The estimated reduction in annual electricity expenses resulting from on-site solar generation and battery storage, based on projected system output, utility rates, and historical site energy usage.

Estimated 25-yr Energy Savings (from solar and battery)

The cumulative electricity cost savings expected over the assumed 25-year useful life of the solar and battery systems, reflecting long-term reductions in grid electricity purchases.

Estimated Annual Avoided Losses (from battery)

The estimated annual financial losses avoided during power outages due to continued facility operation enabled by battery energy storage systems, based on modeled outage duration and historical costs of service disruption.

Outage-Event Resilience (from battery)

The estimated number of hours each site can maintain critical operations during a grid outage using on-site battery energy storage, with or without solar contribution depending on outage conditions.

Wahiawā Community Health Center (one site)

Project Details + Cost

Proposed System	(solar) 146 kW + (battery) 125 kW / 313 kWh
Usage Offset	96%
Total Project Cost	\$1,030,000
Less Federal IRA Rebate (30%)	\$309,000
Less State of Hawai'i RETITC (24.5%)	\$252,000
Less private philanthropic grant funding for safe harbor	\$49,000
NET COST REQUEST	\$420,000

Project Impact

Avg. Annual Energy Savings	\$113,000
Est. 25-yr Energy Savings	\$2,826,000
Est. Annual Avoided Losses	\$80,000
Est. Lifetime Avoided Losses	\$2 million
Outage-Event Resilience (hours)	+19
Annual Carbon Offset (metric tons)	136
Equivalent Miles Driven	346,256
Equivalent Trees Planted	2,249
Equivalent Gallons of Gasoline Burned	15,276

Hawai'i Island Community Health Center (three sites – Hilo, Ka'u, Kea'au)

Project Details + Cost: Combined

Proposed Systems	Hilo: (solar) 147 kW + (battery) 120 kW/369 kWh Ka'u: (solar) 53 kW DC + (battery) 60 kW/144 kWh Kea'au: (solar) 89 kW DC + (battery) 125 kW/261 kWh
Usage Offset	92%
Total Project Cost:	\$2.2 million
Less Federal IRA Rebate (30%)	\$671,000
Less State of Hawai'i RETITC (24.5%)	\$548,000
Less private philanthropic grant funding for safe harbor	\$113,000
NET COST REQUEST	\$910,000

Project Impact: Combined

Avg. Annual Energy Savings	\$210,000
Est. 25-yr Energy Savings	\$5,243,000
Est. Annual Avoided Losses	\$263,000
Est. Lifetime Avoided Losses	\$6.1 million
Outage-Event Resilience (hours)	58
Annual Carbon Offset (metric tons)	267
Equivalent Miles Driven	679,782
Equivalent Trees Planted	4,415
Equivalent Gallons of Gasoline Burned	29,989

Project Details + Cost: Hilo

Proposed Systems	Hilo: (solar) 147 kW + (battery) 120 kW/369 kWh
Usage Offset	93%
Total Project Cost:	\$1 million
Less Federal IRA Rebate (30%)	\$307,000
Less State of Hawai'i RETITC (24.5%)	\$251,000
Less private philanthropic grant funding for safe harbor	\$52,000
NET COST REQUEST	\$415,000

Project Impact: Hilo

Avg. Annual Energy Savings	\$109,000
Est. 25-yr Energy Savings	\$2,737,000
Est. Annual Avoided Losses	\$155,000
Est. Lifetime Avoided Losses	\$3.9 million
Outage-Event Resilience (hours)	+21
Annual Carbon Offset (metric tons)	137
Equivalent Miles Driven	348,802
Equivalent Trees Planted	2,265
Equivalent Gallons of Gasoline Burned	15,388

Project Details + Cost: Ka'u

Proposed Systems	Ka'u: (solar) 53 kW DC + (battery) 60 kW/144 kWh
Usage Offset	92%
Total Project Cost:	\$437,000
Less Federal IRA Rebate (30%)	\$131,000
Less State of Hawai'i RETITC (24.5%)	\$107,000

Less private philanthropic grant funding for safe harbor	\$25,000
NET COST REQUEST	\$415,000

Project Impact: Ka‘u

Avg. Annual Energy Savings	\$37,000
Est. 25-yr Energy Savings	\$942,000
Est. Annual Avoided Losses	\$13,000
Est. Lifetime Avoided Losses	\$317,000
Outage-Event Resilience (hours)	+19
Annual Carbon Offset (metric tons)	49
Equivalent Miles Driven	124,754
Equivalent Trees Planted	810
Equivalent Gallons of Gasoline Burned	5,504

Project Details + Cost: Kea‘au

Proposed Systems	Kea‘au: (solar) 89 kW DC + (battery) 125 kW/261 kWh
Usage Offset	92%
Total Project Cost:	\$775,000
Less Federal IRA Rebate (30%)	\$233,000
Less State of Hawai‘i RETITC (24.5%)	\$190,000
Less private philanthropic grant funding for safe harbor	\$36,000
NET COST REQUEST	\$317,000

Project Impact: Kea‘au

Avg. Annual Energy Savings	\$63,000
Est. 25-yr Energy Savings	\$1,564,000
Est. Annual Avoided Losses	\$96,000
Est. Lifetime Avoided Losses	\$2.4 million
Outage-Event Resilience (hours)	+18
Annual Carbon Offset (metric tons)	81
Equivalent Miles Driven	206,226
Equivalent Trees Planted	1,339
Equivalent Gallons of Gasoline Burned	9,098

Waimānalo Health Center (two sites)

Project Details + Cost: Combined

Proposed Systems:	'Alua – 41-1295 Kalaniana'ole Hwy: (solar) 114 kW DC + (battery) 125 kW / 313 kWh 'Akahi – 41-1347 Kalaniana'ole Hwy: (solar) 44kW
Usage Offset	48%
Total Project Cost	\$1.1 million
Less Federal IRA Rebate (30%)	\$346,000
Less State of Hawai'i RETITC (24.5%)	\$282,000
Less private philanthropic grant funding for safe harbor	\$64,000
NET COST REQUEST	\$459,000

Project Impact: Combined

Avg. Annual Energy Savings	\$200,000
Est. 25-yr Energy Savings	\$4,991,000
Est. Annual Avoided Losses	\$37,000
Est. Lifetime Avoided Losses	\$913,000
Outage-Event Resilience (hours)	+10
Annual Carbon Offset (metric tons)	144
Equivalent Miles Driven	366,624
Equivalent Trees Planted	2,381
Equivalent Gallons of Gasoline Burned	16,174

Project Details + Cost: 'Alua

Proposed Systems:	'Alua – 41-1295 Kalaniana'ole Hwy: (solar) 114 kW DC + (battery) 125 kW / 313 kWh
Usage Offset	56%
Total Project Cost	\$1.1 million
Less Federal IRA Rebate (30%)	\$346,000
Less State of Hawai'i RETITC (24.5%)	\$282,000
Less private philanthropic grant funding for safe harbor	\$64,000
NET COST REQUEST	\$459,000

Project Impact: 'Alua

Avg. Annual Energy Savings	\$161,000
Est. 25-yr Energy Savings	\$4,013,000
Est. Annual Avoided Losses	\$26,000

Est. Lifetime Avoided Losses	\$640,000
Outage-Event Resilience (hours)	+10
Annual Carbon Offset (metric tons)	99
Equivalent Miles Driven	252,054
Equivalent Trees Planted	1,637
Equivalent Gallons of Gasoline Burned	11,120

Project Details + Cost: 'Akahi

Proposed Systems:	'Akahi – 41-1347 Kalaniana'ole Hwy: (solar) 44kW
Usage Offset	39%
Total Project Cost	\$150,000
Less Federal IRA Rebate (30%)	\$45,000
Less State of Hawai'i RETITC (24.5%)	\$37,000
Less private philanthropic grant funding for safe harbor	\$18,000
NET COST REQUEST	\$51,000

Project Impact: 'Akahi

Avg. Annual Energy Savings	\$39,000
Est. 25-yr Energy Savings	\$978,000
Est. Annual Avoided Losses	\$11,000
Est. Lifetime Avoided Losses	\$272,000
Outage-Event Resilience (hours)	0 (no battery)
Annual Carbon Offset (metric tons)	45
Equivalent Miles Driven	114,570
Equivalent Trees Planted	744
Equivalent Gallons of Gasoline Burned	5,054

Hana Health (two sites)

Project Details + Cost: Combined

Proposed Systems	Main Clinic: (solar) 33 kW DC + (battery) 60 kW / 144 kWh Hale Ku'ola & Kitchen: (solar) 34 kW DC + (battery) 60 kW / 187 kWh
Usage Offset	51%
Total Project Cost:	\$886,000
Less Federal IRA Rebate (30%)	\$266,000
Less State of Hawai'i RETITC (24.5%)	\$217,000
Less private philanthropic grant funding for safe harbor	\$65,000
NET COST REQUEST	\$338,000

Project Impact: Combined

Avg. Annual Energy Savings	\$31,000
Est. 25-yr Energy Savings	\$785,000
Est. Annual Avoided Losses	\$70,000
Est. Lifetime Avoided Losses	\$1.8 million
Outage-Event Resilience (hours)	+34
Annual Carbon Offset (metric tons)	60
Equivalent Miles Driven	152,760
Equivalent Trees Planted	992
Equivalent Gallons of Gasoline Burned	6,739

Project Details + Cost: Main Clinic

Proposed Systems	Main Clinic: (solar) 33 kW DC + (battery) 60 kW / 144 kWh
Usage Offset	48%
Total Project Cost:	\$431,000
Less Federal IRA Rebate (30%)	\$129,000
Less State of Hawai'i RETITC (24.5%)	\$106,000
Less private philanthropic grant funding for safe harbor	\$35,000
NET COST REQUEST	\$162,000

Project Impact: Main Clinic

Avg. Annual Energy Savings	\$15,000
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Est. 25-yr Energy Savings	\$367,000
Est. Annual Avoided Losses	\$35,000
Est. Lifetime Avoided Losses	\$877,000
Outage-Event Resilience (hours)	+15
Annual Carbon Offset (metric tons)	29
Equivalent Miles Driven	73,834
Equivalent Trees Planted	480
Equivalent Gallons of Gasoline Burned	3,257

Project Details + Cost: Hale Ku'ola & Kitchen

Proposed System	Hale Ku'ola & Kitchen: (solar) 34 kW DC + (battery) 60 kW / 187 kWh
Usage Offset	53%
Total Project Cost:	\$455,000
Less Federal IRA Rebate (30%)	\$136,000
Less State of Hawai'i RETITC (24.5%)	\$111,000
Less private philanthropic grant funding for safe harbor	\$31,000
NET COST REQUEST	\$177,000

Project Impact: Hale Ku'ola & Kitchen

Avg. Annual Energy Savings	\$17,000
Est. 25-yr Energy Savings	\$418,000
Est. Annual Avoided Losses	\$35,000
Est. Lifetime Avoided Losses	\$877,000
Outage-Event Resilience (hours)	+19
Annual Carbon Offset (metric tons)	31
Equivalent Miles Driven	78,926
Equivalent Trees Planted	513
Equivalent Gallons of Gasoline Burned	3,482

Moloka'i Community Health Center (one site)

Project Details + Cost

Proposed Systems	(solar) 75 kW DC + (battery) 125 kW / 313 kWh
Usage Offset	97%
Total Project Cost	\$919,000
Less Federal IRA Rebate (30%)	\$276,000
Less State of Hawai'i RETITC (24.5%)	\$225,000
Less private philanthropic grant funding for safe harbor	\$38,000
NET COST REQUEST	\$380,000

Project Impact

Avg. Annual Energy Savings	\$87,000
Est. 25-yr Energy Savings	\$2,177,000
Est. Annual Avoided Losses	\$27,000
Est. Lifetime Avoided Losses	\$665,000
Outage-Event Resilience (hours)	+20
Annual Carbon Offset (metric tons)	80
Equivalent Miles Driven	203,680
Equivalent Trees Planted	1,323
Equivalent Gallons of Gasoline Burned	8,986

Describe the target population to be served; and

Each participating health center is located in a medically underserved community as defined by the Health Resources & Services Administration (HRSA).

For reference:

- **Site Address:** The address of the health center site(s) that will receive the solar microgrid.
- **Patients Served:** Total patient population of the health center.
- **% ≤200% Poverty:** Percentage of patients that are at or below 200% of the Federal Poverty Level.
- **FEMA Risk Rating:** The FEMA Natural Disaster Risk Percentile indicates how a specific area compares to others in terms of risk from natural disasters, with higher percentiles representing greater risk. This information helps in understanding the vulnerability of communities to various hazards.
- **Rural:** Whether the clinical site is located in a U.S. Department of Energy-defined rural area.

Wahiawā Community Health Center (one site)

Site Address	302 California Ave, Wahiawa, HI 96786
Patients Served	4,937
% ≤200% Poverty	73%
FEMA Risk Rating:	10%
Rural	No

Hawai'i Island Community Health Center (three sites)

Site Address	Hilo: 450 Kilauea Ave., Hilo, HI 96720 Kea'au: 16-192 Pili Mua Street, Keaau, HI 96749 Ka'u: 95-5583 Mamalahoa Highway, Naalehu, HI 96772
Patients Served	37,299
% of patients at or below 200% of poverty level	93%
FEMA Risk Rating	96% (average for all sites)
Rural	Hilo: No Keaau: Yes Naalehu: Yes

Waimānalo Health Center (two sites)

Site Address	'Alua: 41-1295 Kalaniana'ole Hwy Waimānalo, HI 96795 'Akahi: 41-1347 Kalaniana'ole Hwy Waimānalo, HI 96795
Patients Served	6,484
% of patients at or below 200% of poverty level	88%
FEMA Risk Rating	26% (same for both sites)
Rural	41-1295 Kalaniana'ole Hwy: No 41-1347 Kalaniana'ole Hwy: No

Hana Health (two sites)

Site Address	4590 Hāna Highway Haiku, HI 96713 (Main Clinic) 4590 Hāna Highway Haiku, HI 96713 (Hale Ku'ola & Kitchen)
Patients Served	1,844
% of patients at or below 200% of poverty level	89%
FEMA Risk Rating	40%
Rural	Yes

Moloka'i Community Health Center (one site)

Site Address	30 Oki Pl, Kaunakakai, HI 96748, USA
Patients Served	2,806
% of patients at or below 200% of poverty level	78%
FEMA Risk Rating	70%
Rural	Yes

Describe the geographic coverage.

The community health centers across four islands include urban, rural, and remote areas designated as medically underserved areas and health professional shortage areas. Several clinics serve as the only providers of low-income primary care in their regions (e.g., Hāna, Moloka'i, Waimānalo, and Wahiawā).

Climate & Energy Vulnerability

Many health center sites are in high climate-vulnerability areas, including coastal, wildfire-prone, and storm-exposed regions.

Hawai'i experiences power outages approximately 50% more frequently than the national average, and these outages are becoming increasingly severe due to climate change.

Solar microgrid projects will be built across the islands, including:

- Central and East O'ahu
- East Maui (Hāna)
- Moloka'i
- Hawai'i Island (Hilo, Kea'au, and Ka'ū)

III. Service Summary and Outcomes

The Service Summary shall include a detailed discussion of the applicant's approach to the request. The applicant shall clearly and concisely specify the results, outcomes, and measures of effectiveness from this request. The applicant shall:

Describe the scope of work, tasks and responsibilities;

Overview of Approach

The approach emphasizes efficient, turnkey delivery of solar microgrids while situating this request in a broader, phased initiative led by HPCA. While the LEI – Health Centers project also includes programmatic elements such as health center convening, resilience hub planning, education, and grant administration, those activities are outside the scope of this Capital Improvement Project (CIP) application. This application is limited solely to the capital scope required to design, procure, construct, commission, and place into operation solar photovoltaic (PV) and battery energy storage systems (BESS) at participating health center sites. A separate Operational Project (OP) application is also submitted to ensure programmatic oversight and success.

Program Structure and Roles

HPCA will serve as the applicant and fiscal agent, providing overall program oversight and coordination with participating community health centers. (see OP application)

Collective Energy will support implementation as the technical delivery partner, responsible for managing the capital delivery process, including issuing Requests for Proposals (RFPs), vetting and evaluating bids, and assisting participating health centers with the selection of qualified Engineering, Procurement, and Construction (EPC) or installation partners. (see OP application)

The selected EPC will be responsible for the execution of the turnkey capital scope, including final design, construction, commissioning, and utility Permission to Operate (PTO). Collective Energy will serve as the Owner's Representative during construction, overseeing schedule, budget, and quality, and will support coordination of the project's financial stack and facilitate health center engagement with specialized service providers, such as tax and incentive professionals, as needed.

Scope of Work, Tasks, and Responsibilities

GIA funding will support the turnkey delivery of solar-plus-storage microgrid systems, inclusive of all labor, equipment, materials, and services required to bring each system to operational status.

Turnkey Scope Includes:

1. Final Design and Engineering

- Completion of site-specific system design for solar PV arrays and battery energy storage systems
- Electrical and structural engineering
- Integration with existing electrical infrastructure and backup power systems

2. Procurement of Equipment

- Solar PV modules (already purchased and safe harbored with private grant funding)
- Battery energy storage systems
- Carport steel structure
- Inverters, racking, wiring, switchgear, and control systems
- All balance-of-system (BOS) components required for a fully functional microgrid

3. Permitting and Approvals

- Preparation and submission of building and electrical permits
- Utility interconnection applications
- Coordination with Authorities Having Jurisdiction (AHJs)

4. Construction and Installation

- On-site construction and installation of PV and BESS
- Electrical interconnection and integration with facility
- Site management, safety compliance, and quality control

5. Commissioning and Testing

- System testing and validation
- Performance verification of PV and BESS
- Microgrid controls configurations and functional testing

6. Permission to Operate

- Utility witness testing
- Final approvals and authorization for system operation

Responsibilities

- **HPCA (Applicant / Fiscal Sponsor)**
 - GIA Fiscal and Contract management
 - Health center and partner convenings and relationships (via OP GIA)
 - Program oversight and compliance (via OP GIA)

- Reporting to the State on progress and completion (via OP GIA)
- Support scaling efforts of the LEI – Health Centers project to additional community health centers across Hawai'i (via OP GIA)

- **Collective Energy (Capital Implementation Partner)**
 - Technical project development and delivery
 - Coordination with vendors (EPCs, AHJs, partners)
 - Shepherding of projects to construction readiness
 - Owner's Representative during construction
 - Reporting to HPCA on schedule, budget, and completion milestones
 - Financial modeling and fundraising

Outcomes

- The installation of nine solar-plus-storage microgrid systems at community health center sites.
- Total aggregate utility cost savings of approximately \$16 million over 25 years (or ~\$641,000 annually)
- Increased resiliency during outages, materially improving project ROI by avoiding an estimated \$11.9 million aggregate system lifetime losses across all sites.
- Improved energy resilience for essential healthcare infrastructure

Provide a projected annual timeline for accomplishing the results or outcomes of the service;

This project is structured to deliver near-term, measurable outcomes through this first cohort (Cohort 1) of five health centers while establishing a foundation for a scalable network of resilient community health hubs. The success of the CIP GIA timeline aligns with the accompanying OP GIA request for effective project management and assurance of deliverables.

Q1 – Q2 2026

- Issue RFP for installers, finalize system designs, and site-specific funding plans.

Upon GIA approval for FY2027

Q3 – Q4 2026

- Complete detailed engineering and final system design for Cohort 1 sites.
- Prepare and submit building, electrical, and zoning permits.
- Initiate utility interconnection applications.

- This phase accounts for Hawai'i's extended permitting and review timelines.

Q1 – Q2 2027

- Upon permit approvals, procure major equipment including solar photovoltaic systems, battery storage, inverters, and balance-of-system components.
- Mobilize construction teams and begin site construction.

Q3 – Q4 2027:

- Complete construction, installation, testing, and commissioning of all systems.
- Achieve Permission to Operate (PTO) for all Cohort 1 sites and complete project closeout.

Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and

To ensure the microgrid system is not only installed and operational but also sustainable and resilient, the following evaluation and project plan will keep the projects organized and provide the data needed to assess progress against the proposed timelines.

1. Installation of Energy Meters:

- Install advanced energy meters at all nine sites of the five health centers to accurately monitor and manage energy consumption, generation, and storage.
- Ensure meters are integrated with the microgrid controller for real-time data acquisition and analytics.

2. Final System Design:

- Finalize the detailed design of the microgrid system, incorporating any modifications identified during the Feasibility & Design Phase.
- Ensure all components, including batteries, solar PV panels, inverters, and the microgrid controller, are specified and sourced.

3. Vendor and Equipment Selection:

- Select reliable vendors and high-quality equipment based on performance, cost, and compatibility with the overall system design.
- Engage in rigorous vendor vetting processes, including reviewing past performance, warranties, and support services.

4. Contract Management:

- Draft and negotiate contracts with selected vendors and contractors, clearly outlining the scope of work, deliverables, timelines, and payment terms.
- Manage contracts throughout the installation process to ensure compliance with terms and conditions.

5. Permits and Interconnection Applications:

- Obtain all necessary permits from local authorities, ensuring adherence to zoning, building codes, and environmental regulations.
- Submit interconnection applications to the local utility company, detailing the technical specifications and safety measures of the microgrid system.

6. Installation and Commissioning:

- Installation of solar PV panels, battery storage systems, inverters, and the microgrid controller at each site.
- Ensure all components are installed according to the final system design and manufacturer guidelines.
- Commission the microgrid system, conducting thorough testing and validation to ensure all components function correctly and efficiently.

7. Configuration of Controls:

- Configure the microgrid controller to optimize energy management, including load balancing, energy storage, and generation dispatch.
- Implement advanced control algorithms to enhance system resilience and responsiveness to changing energy demands and conditions.

8. Design Control Validation:

- Perform comprehensive validation of the system design, ensuring all components and configurations meet the specified performance criteria.
- Conduct performance testing under various scenarios to validate the system's reliability, efficiency, and resilience.

9. Training and Handover:

- Provide detailed training to the operations and maintenance personnel, ensuring they have the knowledge and skills to manage the microgrid system effectively.

- Develop comprehensive operation manuals, maintenance schedules, and troubleshooting guides to support ongoing system management.

10. Ongoing Operations and Maintenance:

- Vet and select appropriate vendors for the ongoing operations and maintenance of the microgrid system.
- Establish long-term maintenance contracts to ensure the system remains in optimal condition, with regular inspections, preventive maintenance, and prompt repairs.

Deliverables Produced:

- **Permit Submittals:** All necessary permits and approvals from local authorities.
- **Interconnection Applications:** Approved applications for connecting the microgrid to the local utility grid.
- **Vendor Selection Agreements:** Contracts with vendors and contractors for the supply and installation of equipment.
- **Installed and Commissioned Microgrid:** Fully operational microgrid system, including solar PV, battery storage, inverters, and microgrid controller, installed at all three sites.
- **Operation and Maintenance Plan:** Detailed plan for the ongoing operation and maintenance of the microgrid, including training materials and support documentation.

In addition, for overall project management, quarterly progress reviews with accompanying reporting for each health center's project will be held with HPCA and Collective Energy to ensure timelines are on track and milestones are met in accordance with the GIA application.

List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.

The project will report the following measures to the expending agency to assess completion and outcomes:

- Number of community health center sites completed and achieving Permission to Operate (PTO)
- Installed solar photovoltaic capacity (kW) and battery storage capacity (kWh)
- Total capital cost per site
- Estimated annual energy cost savings per site
- Estimated backup power (resilience) hours provided per site
- Estimated greenhouse gas emissions reductions (CO₂e)

IV. Financial

Budget

1. *The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.*
 - a. *Budget request by source of funds ([Link](#)) See Attached*
 - b. *Personnel salaries and wages ([Link](#)) Not Applicable*
 - c. *Equipment and motor vehicles ([Link](#)) Not Applicable*
 - d. *Capital project details ([Link](#)) See Attached*
 - e. *Government contracts, grants, and grants in aid ([Link](#)) See Attached*
2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2027.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	TOTAL
\$378,450	\$378,450	\$883,050	\$883,050	\$2,523,000

3. *The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2027.*

All other sources of funding that HPCA is seeking for fiscal year 2027

Funder	Period	Purpose
HRSA, Bureau of Primary Health Care	7/2026-6/2027	Primary Care Association
HRSA, Bureau of Primary Health Care	8/2026-7/2027	Health Center Controlled Network
Department of Health	6/2026-6/2027	2320 - Diabetes and Cardiovascular Disease Prevention
Department of Health	3/2026-12/2026	REACH - Produce Prescription Project

University of Hawaii, JABSOM	7/2026-6/2027	Geriatrics Workforce Enhancement Program
National Association of Chronic Disease Directors	7/2026-6/2027	Umbrella Hub Expansion

The LEI – Health Centers project is currently actively fundraising, but no additional funding sources have been formally secured or submitted for the fiscal year 2027 at this time. However, the project has secured funding in 2025 from foundations local and nonprofits supporters. For future cohorts, the initiative anticipates pursuing a diversified mix of public and private funding sources, including foundation grants and philanthropic contributions, to complement State support.

4. *The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable.*

HPCA has not been granted any state or federal tax credits within the past three years and does not anticipate applying for any for this project.

5. *The applicant shall provide a listing of all federal, state, and county government contracts, grants, and grants in aid it has been granted within the prior three years and will be receiving for fiscal year 2027 for program funding.*

See attached worksheet “Government Contracts, Grants, and/or Grants in Aid”

6. *The applicant shall provide the balance of its unrestricted current assets as of December 31, 2025.*

HPCA’s unrestricted current assets as of December 31, 2025, are \$2,187,275.

V. Experience and Capability

Necessary Skills and Experience

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the request. State your experience and appropriateness for providing the service proposed in this application. The applicant shall also provide a listing of verifiable experience of related projects or contracts for the most recent three years that are pertinent to the request.

The Hawai'i Primary Care Association (HPCA) has the skills, knowledge, and experience necessary to provide programmatic and administrative oversight for the proposed Local Energy Initiative (LEI) – Health Centers project. As the federally designated Primary Care Association (PCA) for the FQHCs in the State of Hawai'i, HPCA is charged with supporting the capacity, sustainability, and performance of the state's Community Health Centers. In this role, HPCA routinely provides systems-level coordination, fiscal and contract oversight, reporting, and compliance support for multi-site initiatives delivered through FQHCs. This experience directly aligns with the proposed scope of work, which includes structured oversight, coordination among participating health centers and vendors, and consistent administrative management.

Within the past three years, HPCA has served as the administrative lead and contracting entity for multiple statewide initiatives involving Community Health Centers and public and private partners. This includes work with the Hawai'i Department of Health on the School Health Partnership and COVID-19 Vaccination response projects, for which HPCA managed agreements, coordinated implementation, and provided oversight for services delivered statewide. HPCA also serves as the administrative hub for the Umbrella Hub Organization (UHO), supporting the National Diabetes Prevention Program (NDPP) across Hawai'i's FQHCs, providing shared infrastructure, financial oversight, reporting, and technical assistance across Hawai'i's FQHCs. These projects demonstrate HPCA's established capacity to manage funded initiatives, oversee contracts, support subrecipients, and ensure accountability, and they reflect HPCA's appropriateness to serve as the program and contract oversight entity for the LEI – Health Centers project.

Collective Energy provides the technical expertise required to deliver the proposed renewable energy infrastructure. Collective Energy designs and develops solar-plus-storage microgrids for community health centers, enabling continued operations during power outages while reducing energy costs and greenhouse gas emissions. The organization manages all stages of project development, including system design, permitting, installation, and commissioning, and offers flexible project structures to accommodate health centers with varying financial capacities.

Collective Energy has developed more solar microgrids for community health centers than any other organization. Through its partnership with the National Association of Community Health Centers (NACHC), Collective Energy has designed more than 400 microgrids and is actively managing nearly 70 health center microgrid installations nationwide.

Here is the list of active projects:

Name	Project Location
0286 - Petaluma HC - 1179 North McDowell	1179 N McDowell Blvd, Petaluma, CA 94954, USA
0296 - HICHC - 95-5583 Mamalahoa Hwy, Ka'u	95-5583 Mamalahoa Hwy, Captain Cook, HI 96704, USA

0297 - HICHC - 450 Kilauea, Hilo	450 Kilauea Ave, Hilo, HI 96720, USA
0295 - HICHC - 16-192 Pili Mua St, Kea'au	16-192 Pili Mua St, Keaau, HI 96749, USA
0277 - Wahiawa CHC - 302 California Ave	302 California Ave suite 106, Wahiawa, HI 96786, USA
0200 - Little Rivers HC - 65 Main St	65 Main Street, Wells River, VT 05081, USA
0191 - Pueblo CHC	1301 E 7th Street, Pueblo, CO 81001
0190 - Pueblo CHC	300 Colorado Ave, Pueblo, CO 81004
0305 - Migrant Health Center - Main Clinic 491 Calle Ramon	491 C. Ramón Emeterio Betances, Mayagüez, 00680, PR
0332 - Migrant Health - San Sebastian	San Sebastián, Bo, San Sebastián, 00685, PR
0330 - Migrant Health - Guanica Pharmacy	23 Calle La Montalva, Guánica, PR 00653
0331 - Migrant Health - Guanica Clinic	Carr. #324 Km. 0.1 Bo. Ensenada, Guánica, PR 00653
0233 - Cornerstone Care - 140 Church St	140 Church ST. Rogersville, PA 15359
0234 - Cornerstone Care - 120 Locust Ave	120 Locust Ave. Mt Morris, PA 15349
0224 - Cornerstone Care - 1227 Smith Township	1227 Smith Township State Rd, Burgettstown, PA 15021, USA
0089 - CHC - Timpany - 529 Timpany	529 Timpany Boulevard, Gardner, MA, USA
0336 - PP Pasadena and San Gabriel Valley	620 North Lake Avenue, Pasadena, CA, USA
0210 - Pueblo CHC - SOLAR 110 E Routt	110 E Routt Ave, Pueblo, CO 81004, USA
0210 - Pueblo CHC - STORAGE 110 E Routt	110 E Routt Ave, Pueblo, CO 81004, USA
0192 - Pueblo CHC - SOLAR 328 Avondale Boulevard	328 Avondale Blvd Avondale, CO 81022, USA
0192 - Pueblo CHC - STORAGE 328 Avondale Boulevard	328 Avondale Blvd Avondale, CO 81022, USA
0193 - Pueblo CHC - SOLAR O'Rourke Dental Clinic	2030 Lake Ave, Pueblo, CO 81004
0193 - Pueblo CHC - STORAGE O'Rourke Dental Clinic	2030 Lake Ave, Pueblo, CO 81004
0143 - Urban Health Plan - 345 Soundview Avenue	345 Soundview Avenue, Bronx, NY 10473
0300 - Lynn CHC - 269 Union	269 Union St, Lynn, MA 01901, USA
0303 - Lynn CHC - 270 Union	270 Union St, Lynn, MA 01901, USA
0301 - Lynn CHC - 273 Union	273 Union St, Lynn, MA 01901, USA
0302 - Lynn CHC - 280 Union	280 Union St, Lynn, MA 01901, USA
0153 - Redwood Coast Medical Services - 46900 Ocean Drive	46900 Ocean Drive, Gualala, CA 95445
0252 - CHC of Cape Cod - Mashpee - 107 Commercial	107 Commercial St Mashpee, MA 02649
0251 - CHC of Cape Cod - 85 MA-6A	85 MA-6A, Sandwich, MA, USA
0287 - OCH Sacramento - 3540 Kings Way	3540 Kings Way, Sacramento, CA, USA
0239 - TVHC - 22331 Mission Blvd	22331 Mission Boulevard, Hayward, CA, USA
0240 - TVHC - 16110 E. 14th St	16110 E. 14th Street San Leandro, CA 94578
0292 - UHC - Fresno - 2630 Tuolumne	2630 Tuolumne Street, Fresno, CA, USA
0293 - UHC - Fresno - 2610 Tuolumne	2610 Tuolumne Street, Fresno, CA, USA
0275 - UHC Fresno - 429 Manning	429 Manning Avenue, Parlier, CA, USA
0276 - UHC Fresno - 2848 W Ashlan	2848 West Ashlan Avenue, Fresno, CA, USA
0088 - CHASS - 5635 W Fort St	5635 W Fort St, Detroit, MI, USA
0289 - HealthFirst MA - 387 Quarry St	387 Quarry St, Fall River, MA 02723, USA
0130 - Harvard Street Neighborhood Health Clinic	8 Old Road, Dorchester, MA, USA
0117 - Optimus Healthcare - 982 East Main Street	982 E Main St, Bridgeport, CT, USA
0067 - EMK - Framingham - 354 Waverley Pl	354 Waverley Place, Framingham, MA, USA

0133 - EMK - 605 Lincoln	605 Lincoln St, Worcester, MA 01605
0140 - Northside Christian Health Center - 816 Middle Street	816 Middle Street, Pittsburgh, PA, USA
0100 – A Fair Haven Community Health Care - 374 Grand Ave	374 Grand Ave, New Haven, CT 06513
0100 – B Fair Haven Community Health Care - 374 Grand Ave	374 Grand Ave, New Haven, CT 06513
0085 - La Clinica - Monument - 2000 Sierra Road	2000 Sierra Road, Concord, CA, USA
0113 - Mountain Park Health Center - 325 Baseline Rd	325 East Baseline Road, Phoenix, AZ, USA
0103 - Kōkua Kalihi Valley CFS - 2239 N School St	2239 N School St, Honolulu, Hawaii 96819,
0135 - MPCA - Center for Excellence - 3450 Edgewood Dr	3450 Edgewood Drive, Jefferson City, MO, USA
0199 - Mesa Farm - 400 Gorham	400 Gorham Rd. Ojai CA 93023
0052 - PP Central Coast - Oxnard - 2651 S C St	2651 South C Street, Oxnard, CA, USA
0124 - PP OSB - 1873 Commercenter W	1873 Commercenter W, San Bernardino, CA 92408
0125 - PP OSB - 700 S Tustin	700 S Tustin St, Orange, CA 92866
0003 - Mendocino - Little Lake - 45 Hazel Street	45 Hazel Street, Willits, CA, USA
0127 - Cherokee HS - 5500 Creekwood Dr	5500 Creekwood Park Blvd, Lenoir City, TN 37772, USA
0054 - Family Health Centers - Omak - 1003 Koala	1003 Koala Drive, Omak, WA, USA
0033 - Search Dog Foundation STORAGE - 6800 Wheeler Cyn	6800 Wheeler Canyon Road, Santa Paula, CA, USA
0019 - OLE - West Fairfield - 470 Chadbourne Rd	470 Chadbourne Road, Fairfield, CA, USA
0044- Chiricahua - PCE - 839 E 15th Street	839 East 15th Street, Douglas, AZ, USA
0046 - Chiricahua - GRC - 1100 N F Avenue	1100 F Ave, Douglas, AZ, USA
0045 - Chiricahua - Douglas Pharmacy - 1111 N F Avenue	1111 F Ave, Douglas, AZ, USA
0043 - Chiricahua - Admin - 1205 F Avenue	1205 F Avenue, Douglas, AZ, USA
0004 - Mendocino - Lakeview SOLAR - 5335 Lakeshore	5335 Lakeshore Boulevard, Lakeport, CA, USA
0004 - Mendocino - Lakeview STORAGE 5335 Lakeshore	5335 Lakeshore Boulevard, Lakeport, CA, USA
0048- La Clinica Fruitvale Transit - 3451 E 12th Street	3451 East 12th Street, Oakland, CA, USA
0051 - Capay Valley - 17340 Yolo Avenue	17340 Yolo Avenue, Esparto, CA, USA
0049- La Clinica - Vallejo - 415 Georgia Street	415 Georgia Street, Vallejo, CA, USA
0101 - Venice Family Clinics - 604 Rose Ave	604 Rose Avenue, Venice, CA, USA
0217 - UCHC - 15921 Ajo Way	15921 W Ajo Way, Tucson, AZ 85735, USA

Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities.

In conjunction with the OP GIA request for the Local Energy Initiative (LEI) - Health Centers project, HPCA has adequate facilities to support all programmatic oversight and meeting functions required. The team operates in a hybrid model, using both remote work systems and professional co-working spaces equipped with conference rooms and meeting areas suitable for staff collaboration, stakeholder coordination, and project convenings.

Because this project involves oversight, planning, and partner meetings rather than clinical or specialized operational activities, existing facility capacity is fully sufficient. When larger gatherings are needed, HPCA also has access to partner meeting spaces through the statewide network of community health centers.

These combined resources ensure the necessary facilities are in place to successfully carry out all grant activities.

VI. Personnel: Project Organization and Staffing

Proposed Staffing, Staff Qualifications, Supervision and Training

The applicant shall describe the proposed staffing pattern and proposed service capacity appropriate for the viability of the request. The applicant shall provide the qualifications and experience of personnel for the request and shall describe its ability to supervise, train and provide administrative direction relative to the request.

Through the separate Operational GIA request for the Local Energy Initiative (LEI) - Health Centers project, HPCA will provide the staffing to ensure strong leadership, effective day-to-day management, and reliable administrative oversight for all program activities under this project. The combination of executive oversight and dedicated project management ensures that implementation, reporting, partner coordination, and vendor/subrecipient interactions are carried out efficiently and in alignment with project goals. HPCA's long-standing experience providing program oversight, training, and administrative coordination across Hawai'i's statewide community health center network positions the organization to supervise personnel effectively and maintain a high standard of performance.

Position Justification and Qualifications (requested in the separate OP GIA application):

Chief Executive Officer

The CEO will provide high-level oversight, strategic direction, and executive accountability for the project. This role ensures that the initiative aligns with HPCA's mission and systemwide priorities, while maintaining compliance with state requirements, partner expectations, and grant conditions.

Program Manager

The Program Manager will provide day-to-day oversight of the project and is the primary staff person responsible for ensuring successful execution. Key duties include managing project timelines, deliverables, and reporting requirements, serving as the liaison between HPCA, Collective Energy, and subrecipient health centers, and overseeing contracting, vendor coordination, and documentation. This position is essential because the initiative requires consistent coordination, clear communication flows, and detailed tracking of

project activities. The Program Manager will have demonstrated experience in project coordination, stakeholder engagement, and administrative management, ensuring HPCA can supervise, train, and direct the work effectively.

Capacity to Supervise, Train, and Direct the Work

HPCA has established internal systems for staff supervision, program oversight, contractor management, and administrative support. The CEO provides strategic leadership, while the Program Manager will carry out operational responsibilities with access to HPCA’s broader administrative, fiscal, and compliance teams. This structure ensures effective supervision, routine check-ins, performance monitoring, and ongoing professional support. HPCA’s proven ability to lead statewide initiatives and coordinate with multiple partners confirms its capacity to manage the staffing, training, and oversight needed to fulfill the grant’s objectives.

Organization Chart

The applicant shall illustrate the position of each staff and line of responsibility/supervision. If the request is part of a large, multi-purpose organization, include an organization chart that illustrates the placement of this request.

HPCA is governed by a Board of Directors, made up of representatives from contributing members of Hawai’i’s Community Health Centers. The Chief Executive Officer oversees all functions of the organization and is ultimately responsible for all consultants and contractors. See attached “HPCA Organizational Chart.”

Compensation

The applicant shall provide an annual salary range paid by the applicant to the three highest paid officers, directors, or employees of the organization by position title, not employee name.

Position Title	Annual Salary Range
Chief Executive Officer	\$192,341 - \$227,245
Chief Financial Officer	\$144,707 - \$162,106
Chief Strategy Officer	\$144,707 - \$162,106

VII. Other

Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgement. If applicable, please explain.

Not applicable. No pending litigation or outstanding judgments.

Licensure or Accreditation

The applicant shall specify any special qualifications, including but not limited to licensure or accreditation that the applicant possesses relevant to this request.

Not applicable.

3. Private Educational Institutions

The applicant shall specify whether the grant will be used to support or benefit a sectarian or non-sectarian private educational institution. Please see [Article X, Section 1, of the State Constitution](#) for the relevance of this question.

Not applicable.

Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2027 the activity funded by the grant if the grant of this application is:

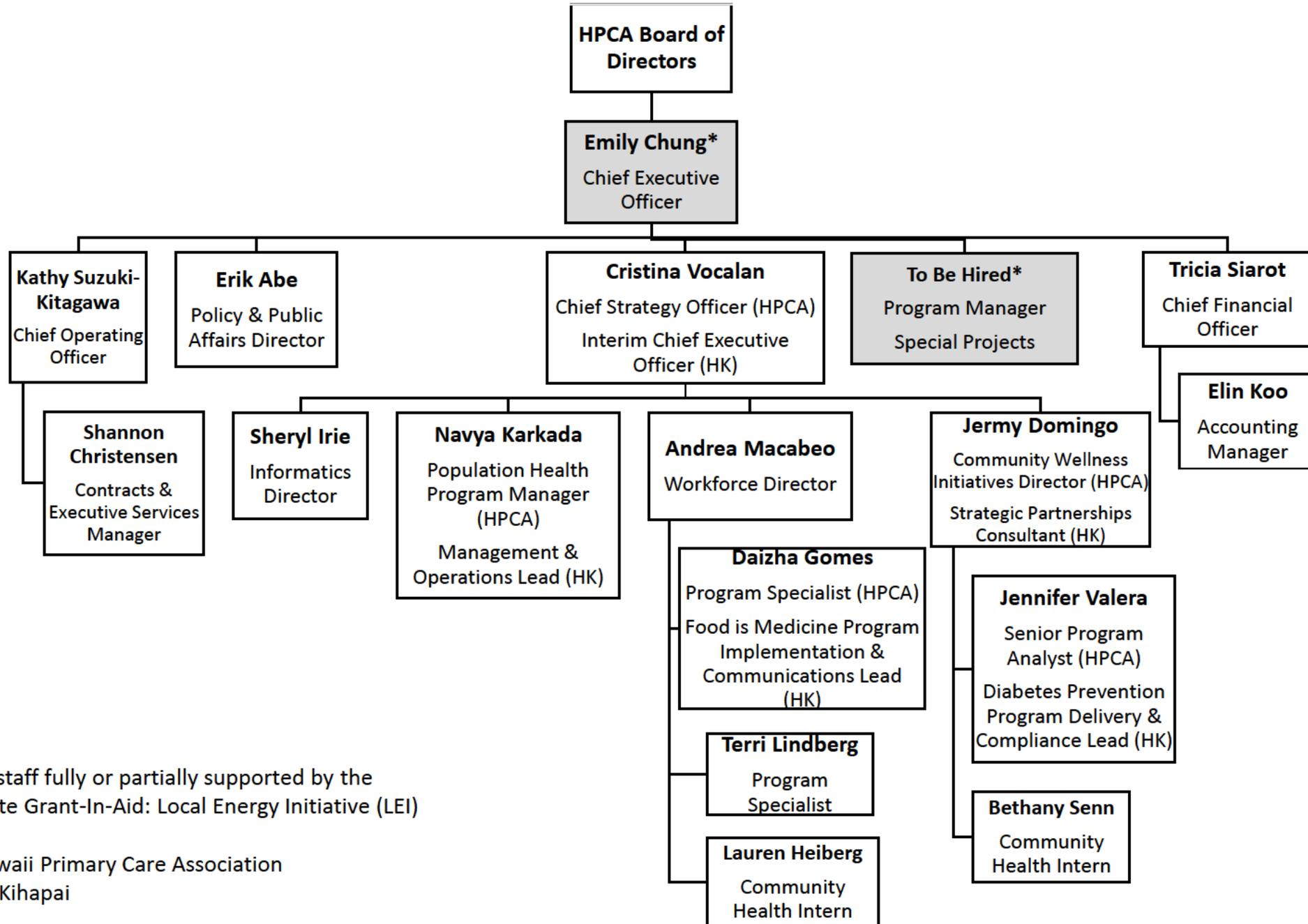
- (a) Received by the applicant for fiscal year 2027, but*
- (b) Not received by the applicant thereafter.*

The GIA funds, combined with secured private philanthropic support and available federal and state rebates, will allow all proposed projects to be fully constructed. Ongoing sustainability, specifically the Operations and Maintenance (O&M) of the installed microgrids, will be absorbed by each health center. These contracts are typically only a few thousand dollars annually and will be covered by the significant cost-savings each of the health centers will realize through reduced utility costs resulting from the microgrids.

Collective Energy, as part of its services will assist in vetting and selecting qualified O&M providers, so each health center has confidence in a service provider and in the long-term performance and reliability of the systems. Outside of these O&M contracts, there will be no additional costs that will require funding to ensure the CIP GIA portion of the project's sustainability.

Outside of these nine sites, the LEI – Health Center project is committed to sustaining and replicating the project beyond fiscal year 2027. The aim is to develop additional future cohorts of health centers — as well as other community-serving nonprofits — both across the islands and in other states across the country. The support of this application will allow a model to be demonstrated, on that leverages private philanthropy alongside state and federal funding and incentive programs to deliver cost-effective, resilient, and reliable renewable energy infrastructure for essential community services.

HPCA Organizational Chart (as of January 22, 2026)



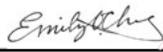
*Denotes staff fully or partially supported by the Hawaii State Grant-In-Aid: Local Energy Initiative (LEI)

HPCA=Hawaii Primary Care Association
HK=Hana Kihapai

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2026 to June 30, 2027

Applicant: Hawaii Primary Care Association

BUDGET CATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)
A. PERSONNEL COST				
1. Salaries				
2. Payroll Taxes & Assessments				
3. Fringe Benefits				
TOTAL PERSONNEL COST				
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island				
2. Insurance				
3. Lease/Rental of Equipment				
4. Lease/Rental of Space				
5. Staff Training				
6. Supplies				
7. Telecommunication				
8. Utilities				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES				
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL	2,523,000			
TOTAL (A+B+C+D+E)	2,523,000			
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	2,523,000	Tricia Siarot (808) 791-7827		
(b) Total Federal Funds Requested		Name (Please type or print) Phone		
(c) Total County Funds Requested		 <small>Digitally signed by Emily Q. Chung Date: 2026.01.23 13:53:29 -10'00'</small>		
(d) Total Private/Other Funds Requested		Signature of Authorized Official Date		
TOTAL BUDGET	2,523,000	Emily Q. Chung, Chief Executive Officer Name and Title (Please type or print)		

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2026 to June 30, 2027

Applicant: Hawaii Primary Care Association

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OTHER SOURCES OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY:2024-2025	FY:2025-2026	FY:2026-2027	FY:2026-2027	FY:2027-2028	FY:2028-2029
PLANS						
LAND ACQUISITION						
DESIGN			\$ 358,000			
CONSTRUCTION			\$ 692,000			
EQUIPMENT			\$ 1,473,000			
TOTAL:			\$ 2,523,000			
JUSTIFICATION/COMMENTS:						

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2026 to June 30, 2027

Disclosures: 1) All amounts are pre-RFP 2) HPCA holds contracts with each health center; 3) Due to rounding to 1000s, totals below are off by 3000.

Wahiawā Health: Design (\$60,000), Construction (\$120,000), Equipment (\$240,000)

Hawai'i Island Community Health Center–Kilauea Ave – Hilo: \$236,000 ~~\$118,000~~ ~~\$59,000~~

Hawai'i Island Community Health Center–Mamalahoa Hwy – Ka'ū: \$100,000 ~~\$49,000~~ ~~\$24,000~~

Hawai'i Island Community Health Center–Pili Mua St – Kea'au: \$187,000 ~~\$86,000~~ ~~\$43,000~~

Waimānalo Health Center – 'Alua: \$251,000 ~~\$100,000~~ ~~\$62,000~~

Waimānalo Health Center – 'Akahi: \$20,000 ~~\$20,000~~ ~~\$10,000~~

Hāna Health Front Lot – Main Clinic: \$98,000 ~~\$42,000~~ ~~\$21,000~~

Hāna Health Front Lot – Hale Ku'ola & Kitchen: \$107,000 ~~\$46,000~~ ~~\$23,000~~

Moloka'i Community Health Center: \$232,000 ~~\$110,000~~ ~~\$55,000~~

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

Applicant: Hawaii Primary Care Association

Contracts Total: \$ 15,118,024

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S./State/Hawaii/ Honolulu/ Kauai/ Maui County)	CONTRACT VALUE
1	Primary Care Association Base Funding	7/2022-6/2023	Dept. of Health & Human Services	U.S.	1,049,485
2	Primary Care Association Base Funding	7/2023-6/2024	Dept. of Health & Human Services	U.S.	1,084,716
3	Primary Care Association Base Funding	7/2024-6/2025	Dept. of Health & Human Services	U.S.	1,103,954
4	Primary Care Association Base Funding	7/2025-6/2026	Dept. of Health & Human Services	U.S.	1,103,954
5	COVID vaccination-related activities	5/2021-4/2023	Dept. of Health & Human Services	U.S.	262,371
6	Health IT & data to enhance COVID activities	5/2021-4/2023	Dept. of Health & Human Services	U.S.	130,000
7	Health Center Controlled Network	8/2022-7/2023	Dept. of Health & Human Services	U.S.	540,817
8	Health Center Controlled Network	8/2023-7/2024	Dept. of Health & Human Services	U.S.	540,817
9	Health Center Controlled Network	8/2024-7/2025	Dept. of Health & Human Services	U.S.	540,817
10	Health Center Controlled Network	8/2025-7/2026	Dept. of Health & Human Services	U.S.	705,000
11	1815 project	6/2022-6/2023	Dept. of Health	State	205,740
12	School health partnership project	11/2021-11/2023	Dept. of Health	State	4,775,239
13	School health partnership project	12/2023-11/2024	Dept. of Health	State	1,500,000
14	2320 - Diabetes and Cardiovascular Disease Prevention	10/2023-6/2025	Dept. of Health	State	325,000
15	2320 - Diabetes and Cardiovascular Disease Prevention	6/2024-6/2025	Dept. of Health	State	350,000
16	2320 - Diabetes and Cardiovascular Disease Prevention	6/2025-6/2026	Dept. of Health	State	400,000

17	Pediatric Mental Health	6/2024-9/2025	Dept. of Health	State	75,000
18	Pediatric Mental Health	1/2026-9/2026	Dept. of Health	State	70,000
19	REACH - Produce Prescription Project	6/2024-9/2025	Dept. of Health	State	69,000
20	REACH - Produce Prescription Project	5/2025-7/2026	Dept. of Health	State	69,000
21	Geriatrics Workforce Enhancement Program	7/2022-6/2023	University of Hawaii, JABSOM	State	62,114
22	Geriatrics Workforce Enhancement Program	7/2023-6/2024	University of Hawaii, JABSOM	State	55,000
23	Geriatrics Workforce Enhancement Program	7/2024-6/2025	University of Hawaii, JABSOM	State	50,000
24	Geriatrics Workforce Enhancement Program	7/2025-6/2026	University of Hawaii, JABSOM	State	50,000
25					
26					
27					
28					
29					
30					



CONFIDENTIAL

March 18, 2024
Hāna Health
4590 Hāna Highway
Haiku, HI 96713
Attn: Cheryl Vasconcellos

Re: *Letter of Intent –Solar + Storage Project*

Dear Cheryl,

I am pleased to provide you with this letter of intent (“LOI”) confirming the interest of Collective Energy Company LLC, a Delaware limited liability company (“**Collective Energy**”) and Hāna Health, a Federally Qualified Health Center (“**Customer**”) in a transaction (the “**Proposed Transaction**”) involving the development, installation, ownership and operation of a solar energy and battery energy storage facility (the “**System**”) at the real, improved property owned or leased by Customer with a street address of 4590 Hāna Highway Haiku, HI 96713 (the “**Site**”). The Proposed Transaction may be structured as a third party energy services agreement (“**ESA**”) under which a Collective Energy project company will, at its expense, arrange for the development and installation of the System and will then own and operate the System, and Customer will purchase energy services over the term of the ESA. Alternatively, the Proposed Transaction may be structured as a consulting services agreement under which Collective Energy will assist Customer in arranging for the development, installation and financing of the System and where the Customer will own the System.

This letter will allow Collective Energy to conduct a preliminary evaluation of the Site for the installation and operation of the System together with a preliminary evaluation of the financial and technical feasibility of the proposed project and potential System ownership models (collectively, the “**Preliminary Analysis**”).

In connection with the Proposed Transaction, Collective Energy and Customer (each a “**Party**” and together the “**Parties**”) hereby agree as follows:

1. Good Faith Negotiations. Upon execution of this LOI, Collective Energy will commence and conduct its Preliminary Analysis. Upon completion of the Preliminary Analysis and decision by the Parties to move forward, the Parties will commence and use good faith

efforts to negotiate either an ESA or project consulting services agreement (a “**Definitive Agreement**”).

2. Access to Information/Due Diligence. Customer shall continue up to the Expiration Date (as defined below) to provide Collective Energy with access to its personnel, the Site, energy usage information, information relating to the Site and the building(s) at the Site, permits, plans and other documents related to the Site, and any other information reasonably requested by Collective Energy, subject to the other provisions of this LOI.

3. Confidentiality. Neither Party shall, without the prior written consent of the other Party, disclose or permit the disclosure of Confidential Information (as defined below), or use Confidential Information except in connection with the transaction proposed in this LOI. For purposes hereof, “**Confidential Information**” shall mean confidential or proprietary information provided by one Party to the other Party, including without limitation, this LOI, proposed transaction terms and documents, and information regarding the financing, design, operation or maintenance of the System. Notwithstanding the above, a Party may disclose or provide Confidential Information to its officers, directors, members, managers, employees, agents, contractors, consultants, attorneys and accountants (collectively, “**Representatives**”), as well as to financing parties and potential financing parties, provided in each case, that such disclosure to such person is reasonably necessary. Each such recipient of Confidential Information shall be informed by the Party disclosing Confidential Information of its confidential nature and shall be directed to treat such information confidentially and shall agree to abide by provisions that are substantially similar to these (except where the Representative is bound by professional ethical duties of confidentiality). In any event, each Party shall be liable (with respect to the other Party) for any breach of this provision by any entity to whom that Party improperly discloses Confidential Information. All Confidential Information shall remain the property of the disclosing Party and shall be returned to the disclosing Party or destroyed after the receiving party’s need for it has expired or upon the request of the disclosing Party. Notwithstanding any other provision herein, neither Party shall be required to hold confidential any information that: (i) becomes publicly available other than through the receiving party; (ii) is required to be disclosed by a governmental authority, under applicable law or pursuant to a validly issued subpoena or required filing, but a receiving party subject to any such requirement shall promptly notify the disclosing Party of such requirement; (iii) is independently developed by the receiving party; or (iv) becomes available to the receiving party without restriction from a third party under no obligation of confidentiality. Each Party agrees that the disclosing Party would be irreparably injured by a breach of this Section by the receiving party or its Representatives or other person to whom the receiving party discloses Confidential Information of the disclosing Party and that the disclosing Party may be entitled to equitable relief, including injunctive relief and specific performance, in the event of any breach of the provisions of this Section.

4. Costs. Each Party shall be responsible for its own costs and expenses incurred in

connection with this LOI and the negotiation and execution of the Definitive Agreement.

5. Termination. Unless extended by mutual written agreement of the parties, the provisions of this LOI will expire on February 7, 2025 (the “**Expiration Date**”), without further recourse to either Party and the Parties shall have no further obligations hereunder, except as stated in Sections 3 and 4 which shall survive expiration or termination of this LOI. Notwithstanding the foregoing, if a Definitive Agreement has not been fully negotiated and executed by the Expiration Date, the provisions of this LOI will continue indefinitely until a mutual written agreement to terminate the LOI is executed.

6. Exclusivity. In consideration of Collective Energy’s willingness to devote the substantial time, effort and resources required to engage in the Preliminary Analysis, the discussions with Customer and other initial development activities with respect to the System and to otherwise evaluate the Proposed Transaction, during the period from the date of this LOI set forth above to and including the Expiration Date (the “**Exclusivity Period**”), neither Customer, nor any of Customer’s employees, representatives or agents, will, directly or indirectly, (i) solicit or engage in discussions or negotiations with any party other than Collective Energy relating to a power purchase or energy services agreement or the generation of renewable energy, or the installation or operation of a renewable energy or battery energy storage facility; (ii) provide information or assistance to, or otherwise encourage or facilitate, any party other than Collective Energy relating to such a transaction; or (iii) enter into any arrangement, agreement or commitment relating to such a transaction, in each case with any party other than Collective Energy.

7. Brokers. Each Party represents and warrants to the other Party that it has not employed or dealt with a broker or agent in connection with the Proposed Transaction contemplated under this LOI and each Party agrees to indemnify the other Party against any loss, liability, costs, claims, demands, damages, actions, causes of action, and suits arising out of, or in any manner related to, the alleged employment, engagement or use by the indemnifying party of any broker or agent. The foregoing indemnification obligation will survive the expiration or termination of this LOI.

8. Notices. All notices given in connection with this LOI shall be given in writing and shall be delivered by email (with confirmation of receipt), nationally recognized overnight courier or in person to the addresses for the Parties under their signatures below. Any Party may change its address for notice purposes by giving written notice of such change to the other party in the manner provided in this Section.

9. Entire Agreement. This LOI constitutes the entire agreement between the Parties and supersedes all prior oral or written agreements and understandings between the parties as to the subject matter hereof. This LOI may be amended or modified only by a writing executed by both Parties.

Cheryl Vasconcellos

March 18, 2024

Page 4

10. Counterparts. This LOI may be executed in one or more counterparts each of which will be deemed to be an original and all of which, together, shall constitute one and the same agreement.

11. Legal Effect. For avoidance of doubt, this LOI is an expression of the current intent of the Parties and is not a final agreement as to the terms of any Definitive Agreement. The Parties understand and agree that, except for the obligations to negotiate in good faith set forth in Section 1, and the obligations set forth in Sections 2 through 11, neither Party shall incur any other legal obligation to the other Party unless and until a definitive written agreement is duly executed. To the extent intended to be binding, this LOI shall be governed by and construed in accordance with the laws of the State of California without reference to choice of law provisions.

If you are in agreement with the terms of this LOI, please indicate by executing below and returning a signed copy of this LOI to me.

Cheryl Vasconcellos

March 18, 2024

Page 5

Sincerely yours,

Andrew MacCalla

Andrew MacCalla
CEO

Address for notice:

Collective Energy Company, LLC
605 Pope Lane
Ojai, California 93023
Email: maccalla@collectiveenergyco.com

Accepted and Agreed:

Hāna Health

By: *cheryl vasconcellos*
Name: Cheryl Vasconcellos
Title: Executive Director

Date: 03/18/2024

Address for notice:

Hāna Health
4590 Hāna Highway
Haiku, HI 96713

Collective Energy Letter of Intent - Hana Health

Final Audit Report

2024-03-19

Created:	2024-03-18
By:	Daniel Ettelson (dettelson@collectiveenergyco.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAACMNAf_YkLAvCZcWNI7sp9D-rrLMm-X1s

"Collective Energy Letter of Intent - Hana Health" History

-  Document created by Daniel Ettelson (dettelson@collectiveenergyco.com)
2024-03-18 - 11:46:58 PM GMT
-  Document emailed to Cheryl Vasconcellos (cvasconcellos@hanahealth.org) for signature
2024-03-18 - 11:47:02 PM GMT
-  Document emailed to Andrew MacCalla (maccalla@collectiveenergyco.com) for signature
2024-03-18 - 11:47:02 PM GMT
-  Email viewed by Andrew MacCalla (maccalla@collectiveenergyco.com)
2024-03-19 - 0:02:59 AM GMT
-  Document e-signed by Andrew MacCalla (maccalla@collectiveenergyco.com)
Signature Date: 2024-03-19 - 0:03:11 AM GMT - Time Source: server
-  Email viewed by Cheryl Vasconcellos (cvasconcellos@hanahealth.org)
2024-03-19 - 1:57:09 AM GMT
-  Document e-signed by Cheryl Vasconcellos (cvasconcellos@hanahealth.org)
Signature Date: 2024-03-19 - 1:57:37 AM GMT - Time Source: server
-  Agreement completed.
2024-03-19 - 1:57:37 AM GMT



At Collective Energy Company, we care about health centers, because we've worked with health centers for over 20 years. We know how important you are! And we care about your patients. Our job is to support you through every stage of your clean energy development process so that you can spend your valuable time providing critical health services in your communities.

Collective Energy serves as your partner, ally, project manager, and owner's representative throughout the process. We'll be with you at every step, from initially designing a clean and resilient energy system to meet your goals, all the way through funding, installation, interconnection, and submitting your rebates.

This is a partnership, and we are happy to be in it with you! We've helped hundreds of health centers across the country through this process and are grateful for the opportunity to work with you. We are all connected, and it's going to take the collective!

OUR SERVICES

Design

+ Preliminary through final system design and engineering based on your site-specific needs and goals related to financial savings, energy usage, resiliency, and environmental sustainability. This includes coordinating with and advising existing architects or engineers for sites undergoing new construction or remodeling.

Budgeting

- + Vetting local installation providers, drafting Request for Proposals (RFPs), and obtaining up to three competitive bids for installation within the contract terms, timelines, milestones, and warranties.
- + Ensuring the lowest cost and/or highest value quote from installation provider is achieved, and that the contract terms, timelines, milestones, and parts and labor warranties are acceptable.

Project Management

- + Creation of project implementation plan, timeline, and financial proforma and milestones.
- + Oversight of contracts, permits, installation, and system commissioning.

Application Support

+ Supporting applications for grants, credits, reimbursements, renewable energy credits (RECs), and rebates at utility, local, state, and federal levels.

Training & Handover

+ Ensuring key staff are trained on the system's operations and monitoring and all documents and warranties are handed over at completion.

Maintenance

+ Ensuring Operations and Maintenance (O&M) agreements are in place at project completion.



LET'S CONNECT





FEES + TERMS

Prior to any payment, the Collective Energy team invests many hours in your project, from our initial call(s) and data collection to preliminary and revised screenings to our proposed final design. When you decide to execute your project, Collective Energy will charge a total fee of 8 – 12% of the final installed cost. This will be estimated for Payment #1, then updated and reconciled when the installer contract is finalized and final costs are known. The fees are distributed in milestone payments, so you'll never pay in advance of completed progress. *Note: if the estimated System Installation Cost is less than \$150,000, a minimum total fee of \$12,000 will be applied to the same milestone schedule below.*

Payment #1: 5% of estimated System Installation Cost, paid upon execution of Development Manager Services Agreement.

Payment #2: Reimbursement of any 3rd party expenses and travel (billed at cost) plus any amount owed to reach 5% of final project costs, due upon selection of Installer and Final Project Cost determination.

Payment #3: Remaining balance of Consulting Fee, upon receiving Permission to Operate.

Note: Executing this Letter of Intent (LOI) does not commit you to paying any fees. This LOI is intended to reflect our respective commitments to working towards your clean energy system together, allowing us to confidently invest in your project. You will not pay anything unless you decide to move the project forward.

By signing this letter, you agree:

- + To provide Collective Energy with the necessary information and/or access to staff and the site(s) needed to understand the system designs, including energy usage, building documents & plans, and key staff.
- + Not to disclose or permit the disclosure of confidential information except in connection with the transaction proposed in this LOI without written consent. This includes confidential or proprietary information provided between you and Collective Energy, including this LOI, the proposed transaction terms, documents, and information regarding the system's financing, design, operation, or maintenance.
- + In consideration of Collective Energy's willingness to devote the substantial time, effort, and resources required for the discussions and other development activities concerning the system and to otherwise evaluate the proposed transaction, not to solicit or engage in discussions or negotiations relating to power purchase agreements, energy services agreements, or the installation of a renewable energy or battery energy storage with any party other than Collective Energy for up to one year after signing this LOI. This includes any employees, representatives, or agents, directly or indirectly related to the project.
- + To use reasonable faith efforts to negotiate a Development Management Agreement (DMS) or an Energy Services Agreement (ESA) upon finalizing your proposed system to move forward with Collective Energy.

Your commitment will allow Collective Energy to advance through our design and evaluation process and, if agreed to, the installation of the system. To agree with the terms of this LOI, please indicate by executing and returning a signed copy.

In partnership,

Andrew MacCalla
Founder + CEO, Collective Energy Management, LLC

Hawaii Island Community Health Center

Site Address

Richard J Taaffe (Aug 1, 2025 11:26:43 HST)

Name: Richard J Taaffe

Title: CEO

LET'S CONNECT



Collective Energy Letter of Intent

Final Audit Report

2025-08-01

Created:	2025-08-01
By:	Daniel Ettelson (dettelson@collectiveenergyco.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAxDGh2ooC_HL2xQ07x3XSn31ptWF77Xhu

"Collective Energy Letter of Intent" History

-  Web Form created by Daniel Ettelson (dettelson@collectiveenergyco.com)
2025-07-17 - 11:06:10 PM GMT
-  Web Form filled in by Richard J Taaffe (rtaaffe@hichc.org)
2025-08-01 - 9:26:43 PM GMT
-  Email verification link emailed to Richard J Taaffe (rtaaffe@hichc.org)
2025-08-01 - 9:26:44 PM GMT
-  Email viewed by Richard J Taaffe (rtaaffe@hichc.org)
2025-08-01 - 9:27:25 PM GMT
-  E-signature verified by Richard J Taaffe (rtaaffe@hichc.org)
2025-08-01 - 9:27:25 PM GMT
-  Agreement completed.
2025-08-01 - 9:27:25 PM GMT



At Collective Energy Company, we care about health centers, because we've worked with health centers for over 20 years. We know how important you are! And we care about your patients. Our job is to support you through every stage of your clean energy development process so that you can spend your valuable time providing critical health services in your communities.

Collective Energy serves as your partner, ally, project manager, and owner's representative throughout the process. We'll be with you at every step, from initially designing a clean and resilient energy system to meet your goals, all the way through funding, installation, interconnection, and submitting your rebates.

This is a partnership, and we are happy to be in it with you! We've helped hundreds of health centers across the country through this process and are grateful for the opportunity to work with you. We are all connected, and it's going to take the collective!

OUR SERVICES

Design

+ Preliminary through final system design and engineering based on your site-specific needs and goals related to financial savings, energy usage, resiliency, and environmental sustainability. This includes coordinating with and advising existing architects or engineers for sites undergoing new construction or remodeling.

Budgeting

+ Vetting local installation providers, drafting Request for Proposals (RFPs), and obtaining up to three competitive bids for installation within the contract terms, timelines, milestones, and warranties.
+ Ensuring the lowest cost and/or highest value quote from installation provider is achieved, and that the contract terms, timelines, milestones, and parts and labor warranties are acceptable.

Project Management

+ Creation of project implementation plan, timeline, and financial proforma and milestones.
+ Oversight of contracts, permits, installation, and system commissioning.

Application Support

+ Supporting applications for grants, credits, reimbursements, renewable energy credits (RECs), and rebates at utility, local, state, and federal levels.

Training & Handover

+ Ensuring key staff are trained on the system's operations and monitoring and all documents and warranties are handed over at completion.

Maintenance

+ Ensuring Operations and Maintenance (O&M) agreements are in place at project completion.



LET'S CONNECT





FEES + TERMS

Prior to any payment, the Collective Energy team invests many hours in your project, from our initial call(s) and data collection to preliminary and revised screenings to our proposed final design. When you decide to execute your project, Collective Energy will charge a total fee of 8 – 12% of the final installed cost. This will be estimated for Payment #1, then updated and reconciled when the installer contract is finalized and final costs are known. The fees are distributed in milestone payments, so you'll never pay in advance of completed progress. *Note: if the estimated System Installation Cost is less than \$150,000, a minimum total fee of \$12,000 will be applied to the same milestone schedule below.*

Payment #1: 5% of estimated System Installation Cost, paid upon execution of Development Manager Services Agreement.

Payment #2: Reimbursement of any 3rd party expenses and travel (billed at cost) plus any amount owed to reach 5% of final project costs, due upon selection of Installer and Final Project Cost determination.

Payment #3: Remaining balance of Consulting Fee, upon receiving Permission to Operate.

Note: Executing this Letter of Intent (LOI) does not commit you to paying any fees. This LOI is intended to reflect our respective commitments to working towards your clean energy system together, allowing us to confidently invest in your project. You will not pay anything unless you decide to move the project forward. If opting for an Energy Service Agreement, you won't pay any of these fees up front; they will be wrapped into the ESA payments once the system is operational.

By signing this letter, you agree:

- + To provide Collective Energy with the necessary information and/or access to staff and the site(s) needed to understand the system designs, including energy usage, building documents & plans, and key staff.
- + Not to disclose or permit the disclosure of confidential information except in connection with the transaction proposed in this LOI without written consent. This includes confidential or proprietary information provided between you and Collective Energy, including this LOI, the proposed transaction terms, documents, and information regarding the system's financing, design, operation, or maintenance.
- + In consideration of Collective Energy's willingness to devote the substantial time, effort, and resources required for the discussions and other development activities concerning the system and to otherwise evaluate the proposed transaction, not to solicit or engage in discussions or negotiations relating to power purchase agreements, energy services agreements, or the installation of a renewable energy or battery energy storage with any party other than Collective Energy for up to one year after signing this LOI. This includes any employees, representatives, or agents, directly or indirectly related to the project.
- + To use reasonable faith efforts to negotiate a Development Management Agreement (DMS) or an Energy Services Agreement (ESA) upon finalizing your proposed system to move forward with Collective Energy.

Your commitment will allow Collective Energy to advance through our design and evaluation process and, if agreed to, the installation of the system. To agree with the terms of this LOI, please indicate by executing and returning a signed copy.

In partnership,

Andrew MacCalla
Founder + CEO, Collective Energy Management, LLC

Milton Cortez

Site Address

Milton Cortez (Sep 10, 2025 12:55:36 HST)

Name: Milton Cortez
Title: CEO

LET'S CONNECT

New LOI Template (updated 81425)

Final Audit Report

2025-09-10

Created:	2025-09-10
By:	Daniel Ettelson (dettelson@collectiveenergyco.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAR3F_yK9XpiZHyXiDV1rfBm1VXcVnjL1n

"New LOI Template (updated 81425)" History

-  Web Form created by Daniel Ettelson (dettelson@collectiveenergyco.com)
2025-08-14 - 6:08:52 PM GMT
-  Web Form filled in by Milton Cortez (mcortez@molokaichc.org)
2025-09-10 - 10:55:39 PM GMT
-  Email verification link emailed to Milton Cortez (mcortez@molokaichc.org)
2025-09-10 - 10:55:40 PM GMT
-  Email viewed by Milton Cortez (mcortez@molokaichc.org)
2025-09-10 - 10:58:20 PM GMT
-  E-signature verified by Milton Cortez (mcortez@molokaichc.org)
2025-09-10 - 10:58:21 PM GMT
-  Agreement completed.
2025-09-10 - 10:58:21 PM GMT



At Collective Energy Company, we care about health centers, because we've worked with health centers for over 20 years. We know how important you are! And we care about your patients. Our job is to support you through every stage of your clean energy development process so that you can spend your valuable time providing critical health services in your communities.

Collective Energy serves as your partner, ally, project manager, and owner's representative throughout the process. We'll be with you at every step, from initially designing a clean and resilient energy system to meet your goals, all the way through funding, installation, interconnection, and submitting your rebates.

This is a partnership, and we are happy to be in it with you! We've helped hundreds of health centers across the country through this process and are grateful for the opportunity to work with you. We are all connected, and it's going to take the collective!

OUR SERVICES

Design

+ Preliminary through final system design and engineering based on your site-specific needs and goals related to financial savings, energy usage, resiliency, and environmental sustainability. This includes coordinating with and advising existing architects or engineers for sites undergoing new construction or remodeling.

Budgeting

- + Vetting local installation providers, drafting Request for Proposals (RFPs), and obtaining up to three competitive bids for installation within the contract terms, timelines, milestones, and warranties.
- + Ensuring the lowest cost and/or highest value quote from installation provider is achieved, and that the contract terms, timelines, milestones, and parts and labor warranties are acceptable.

Project Management

- + Creation of project implementation plan, timeline, and financial proforma and milestones.
- + Oversight of contracts, permits, installation, and system commissioning.

Application Support

+ Supporting applications for grants, credits, reimbursements, renewable energy credits (RECs), and rebates at utility, local, state, and federal levels.

Training & Handover

+ Ensuring key staff are trained on the system's operations and monitoring and all documents and warranties are handed over at completion.

Maintenance

+ Ensuring Operations and Maintenance (O&M) agreements are in place at project completion.



LET'S CONNECT





FEES + TERMS

Prior to any payment, the Collective Energy team invests many hours in your project, from our initial call(s) and data collection to preliminary and revised screenings to our proposed final design. When you decide to execute your project, Collective Energy will charge a total fee of 7.5 – 12% of the final installed cost. This will be estimated for Payment #1, then updated and reconciled when the installer contract is finalized and final costs are known. The fees are distributed in milestone payments, so you'll never pay in advance of completed progress.

Payment #1: 5% of estimated System Installation Cost, paid upon execution of Development Manager Services Agreement.

Payment #2: Reimbursement of any 3rd party expenses and travel (billed at cost) plus any amount owed to reach 5% of final project costs, due upon selection of Installer and Final Project Cost determination.

Payment #3: Remaining balance of Consulting Fee, upon receiving Permission to Operate.

Note: Executing this Letter of Intent (LOI) does not commit you to paying any fees. This LOI is intended to reflect our respective commitments to working towards your clean energy system together, allowing us to confidently invest in your project. You will not pay anything unless you decide to move the project forward.

By signing this letter, you agree:

- + To provide Collective Energy with the necessary information and/or access to staff and the site(s) needed to understand the system designs, including energy usage, building documents & plans, and key staff.
- + Not to disclose or permit the disclosure of confidential information except in connection with the transaction proposed in this LOI without written consent. This includes confidential or proprietary information provided between you and Collective Energy, including this LOI, the proposed transaction terms, documents, and information regarding the system's financing, design, operation, or maintenance.
- + In consideration of Collective Energy's willingness to devote the substantial time, effort, and resources required for the discussions and other development activities concerning the system and to otherwise evaluate the proposed transaction, not to solicit or engage in discussions or negotiations relating to power purchase agreements, energy services agreements, or the installation of a renewable energy or battery energy storage with any party other than Collective Energy for up to one year after signing this LOI. This includes any employees, representatives, or agents, directly or indirectly related to the project.
- + To use reasonable faith efforts to negotiate a Development Management Agreement (DMS) or an Energy Services Agreement (ESA) upon finalizing your proposed system to move forward with Collective Energy.

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In partnership,

Andrew MacCalla
Founder + CEO, Collective Energy Management, LLC

302 California Ave Wahiawa, HI 96786

Site Address

Bev Harbin (Jun 26, 2025 07:15 HST)

Name: Bev Harbin
Title: CEO

LET'S CONNECT



Collective Energy Letter of Intent - Wahiawa CHC

Final Audit Report

2025-06-26

Created:	2025-06-26
By:	Daniel Ettelson (dettelson@collectiveenergyco.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAASA9NFTzfeD5rjxXxUSKM_0-ER9xZw2ZE

"Collective Energy Letter of Intent - Wahiawa CHC" History

-  Document created by Daniel Ettelson (dettelson@collectiveenergyco.com)
2025-06-26 - 3:54:04 PM GMT
-  Document emailed to Bev Harbin (bharbin@wahiawahealth.com) for signature
2025-06-26 - 3:54:08 PM GMT
-  Email viewed by Bev Harbin (bharbin@wahiawahealth.com)
2025-06-26 - 5:11:50 PM GMT
-  Document e-signed by Bev Harbin (bharbin@wahiawahealth.com)
Signature Date: 2025-06-26 - 5:15:01 PM GMT - Time Source: server
-  Agreement completed.
2025-06-26 - 5:15:01 PM GMT



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+ Preliminary through final system design and engineering based on your site-specific needs and goals related to financial savings, energy usage, resiliency, and environmental sustainability. This includes coordinating with and advising existing architects or engineers for sites undergoing new construction or remodeling.

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+ Vetting local installation providers, drafting Request for Proposals (RFPs), and obtaining up to three competitive bids for installation within the contract terms, timelines, milestones, and warranties.
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+ Ensuring key staff are trained on the system's operations and monitoring and all documents and warranties are handed over at completion.

Maintenance

+ Ensuring Operations and Maintenance (O&M) agreements are in place at project completion.



LET'S CONNECT





FEES + TERMS

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Payment #1: 5% of estimated System Installation Cost, paid upon execution of Development Manager Services Agreement.

Payment #2: Reimbursement of any 3rd party expenses and travel (billed at cost) plus any amount owed to reach 5% of final project costs, due upon selection of Installer and Final Project Cost determination.

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In partnership,

Andrew MacCalla
Founder + CEO, Collective Energy Management, LLC

41-1295 Kalaniana'ole Hwy

Site Address

Mary Frances Oneha (Nov 6, 2025 12:20:35 HST)

Name: Mary Frances Oneha

Title: CEO

LET'S CONNECT



Collective Energy Letter of Intent

Final Audit Report

2025-11-06

Created:	2025-11-06
By:	Daniel Ettelson (dettelson@collectiveenergyco.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAphNKcyGgl79zWRLVy6M9rvRNXExe_IJp

"Collective Energy Letter of Intent" History

-  Web Form created by Daniel Ettelson (dettelson@collectiveenergyco.com)
2025-10-16 - 8:59:49 PM GMT
-  Web Form filled in by Mary Frances Oneha (moneha@waimanalohealth.org)
2025-11-06 - 10:20:36 PM GMT
-  Email verification link emailed to Mary Frances Oneha (moneha@waimanalohealth.org)
2025-11-06 - 10:20:37 PM GMT
-  Email viewed by Mary Frances Oneha (moneha@waimanalohealth.org)
2025-11-06 - 10:21:25 PM GMT
-  E-signature verified by Mary Frances Oneha (moneha@waimanalohealth.org)
2025-11-06 - 10:21:25 PM GMT
-  Agreement completed.
2025-11-06 - 10:21:25 PM GMT



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LET'S CONNECT





FEES + TERMS

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In partnership,

Andrew MacCalla
Founder + CEO, Collective Energy Management, LLC

41-1347 Kalaniana'ole Hwy

Site Address

Mary Frances Oneha (Nov 6, 2025 12:18:40 HST)

Name: Mary Frances Oneha

Title: CEO

LET'S CONNECT



Collective Energy Letter of Intent

Final Audit Report

2025-11-06

Created:	2025-11-06
By:	Daniel Ettelson (dettelson@collectiveenergyco.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAA_DO43GobpsNpl0mrwxqi3XS8I3kli5eh

"Collective Energy Letter of Intent" History

-  Web Form created by Daniel Ettelson (dettelson@collectiveenergyco.com)
2025-10-16 - 8:59:49 PM GMT
-  Web Form filled in by Mary Frances Oneha (moneha@waimanalohealth.org)
2025-11-06 - 10:18:41 PM GMT
-  Email verification link emailed to Mary Frances Oneha (moneha@waimanalohealth.org)
2025-11-06 - 10:18:42 PM GMT
-  Email viewed by Mary Frances Oneha (moneha@waimanalohealth.org)
2025-11-06 - 10:19:26 PM GMT
-  E-signature verified by Mary Frances Oneha (moneha@waimanalohealth.org)
2025-11-06 - 10:19:26 PM GMT
-  Agreement completed.
2025-11-06 - 10:19:26 PM GMT