## Annual Certification for Renewable Energy Facility Registration

Docket No:

SP-5152 Sub 0

Facility Owner:

ESA Henderson 2, LLC

(Name - Printed or Typ	ed)	(Date)			
Lindsay H		05/27/2016			
Signature)		Manager			
X YES	NO	I certify that I am the owner of the renewable energy facility or am duly authorized to act on behalf of the owner for the purpose of this filing.			
XYES	NO	I certify that the information provided is true and correct for all years that the facility has earned RECs for compliance with G.S. 62-133.8.			
XYES	NO	I certify that I consent to the auditing of my organization's books and records by the Public Staff insofar as those records relate to transactions with North Carolina electric power suppliers, and agree to provide the Public Staff and the Commission access to our books and records, wherever they are located, and to the facility.			
XYES	NO	I certify that 1) my organization is not simultaneously under contract with NC GreenPower to sell our RECs emanating from the same electricity production being tracked in NC-RETS; and 2) any renewable energy certificates (whether or not bundled with electric power) sold to an electric power supplier to comply with G.S. 62-133.8 have not, and will not, be remarketed or otherwise resold for any other purpose, including another renewable energy portfolio standard or voluntary purchase of renewable energy certificates in North Carolina (such as NC GreenPower) or any other state or country, and that the electric power associated with the certificates will not be offered or sold with any representation that the power is bundled with renewable energy certificates.			
XYES	NO	and rules for the protection of the environment and conservation of natural resources  I certify that the facility satisfies the requirements of G.S. 62-133.8(a)(5) or (7) as a  Renewable Energy Facility X or New Renewable Energy Facility  and that the facility will be operated as a:  Renewable Energy Facility X or New Renewable Energy Facility			
X YES	NO	I certify that the facility is in substantial compliance with all federal and state laws, regulations,			

## **VERIFICATION**

STATE OF Florida	COUNTY OF	Seminole			
Lindsay Herold , per	rsonally appeared b	pefore me this day a	and, being first		
duly sworn, says that the facts stated in the foregoing application and any exhibits, documents,					
and statements thereto attached are true as he or she believes.					
WITNESS my hand and notarial seal, this	<u>27</u> day of	May	, 20 <u>16</u> .		
VERONICA VALENCIA Commission # FF 964128 My Commission Expires February 24, 2020 Signature of Notary Public	ly Commission Exp	pires: <u>Feb 24</u>	,2020		

The name of the person who completes and signs the annual certification must be typed or printed by the notary in the space provided in the verification. The notary's name must be typed or printed below the notary's seal. This original verification must be affixed to the original annual certification, and a copy of this verification must be affixed to each of the 15 copies that are also submitted to the Commission at:

Veronica Valencia

Name of Notary Public - Typed or Printed

Chief Clerk North Carolina Utilities Commission 4325 Mail Service Center Raleigh, North Carolina 27699-4325