Annual Certification for Renewable Energy Registration

Docket No. SP - 8	5152 Sub 0 Facility	Owner: ESA Henderson 2, LLC
		itial compliance with all federal and state laws,
		ection of the environment and conservation of
YES X NO	natural resources.	
		e requirements of G.S. 62-133.8(a)(5) or (7)
	as a (select one):	
	New Renewable	e Energy Facility
	and that the facility will be operated	d as a (select one):
	New Renewable	e Energy Facility
YES X NO	hydroelectric power facility with a megawatts, that generates electric and power using a renewable ener "new renewable energy facility" med and was placed into service on or a your facility meets either of these dorder or consult your legal counsel	
YES X 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.	
YES X 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.	
		enewable energy facility or am duly authorized
YES X NO	to act on behalf of the owner for the	
1/	22 12 -	
	1182	Manager
(Signature)		(Title)
Lindsay Latre		02/19/19
(Name - Prin	ted or Typed)	(Date)

VERIFICATION

STATE OF Florida	COUNTY OF Seminole
Lindsay Latve , personal sworn, says that the facts stated in the statements thereto attached are true as	sonally appeared before me this day and, being first duly he foregoing application and any exhibits, documents he or she believes.
WITNESS my hand and notarial seal, th	is 19 th day of February, 20 <u>19.</u> My Commission Expires: <u>January 09, 20</u> 21
	My Commission Expires. Marthary 64, 2021
Signature of Notary Public	MEGAN STEVENS Commission # GG 60660 My Commission Expires January 09, 2021
Megan Stevens Name of Notary Public – Typed o	r Printed