Call for Services:
MICATool Pilot Cities

MICAT

Multiple Impacts Calculation Tool

Instructions

Please complete and send pages 1-3 of the Signature Form to **niklas.mischkowski@iclei.org** to finalize your application.

1. Applicant Information

Please provide the following information for your organization**.**

Contact Name (First and Last)	
Position or Title	
Organization	
City	
Country	
City Population	
Email	
Phone Number	

☐ I am representing a municipality / planning authority on behalf of a local consortium and have a signed Memorandum of Understanding (MOU) with the municipality represented that stipulates my authority to take the actions necessary to meet the project requirements on their behalf.

Open Call for MICATool Pilot Cities: Signature Form
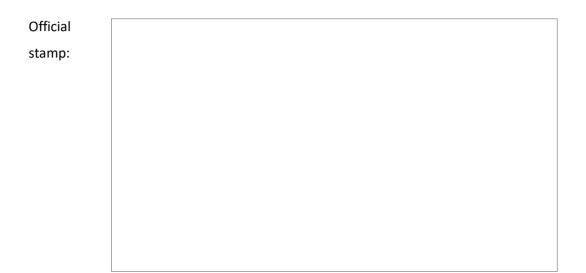
2. Minimum Qualifications

The MICAT project is seeking applicants who have both a topical interest in energy efficiency and the capacity (expertise and time) to provide practice-based guidance and constructive feedback during the Tool's development and validation stages. To that end, successful applicants must have the following minimum qualifications. Please check the box to confirm that the qualification can be met.

☐ My city / organization is actively working with quantifiable energy efficiency data at the local or regional level and have permission to disclose the data to the MICAT partners.

☐ We are able to participate in three workshops with the MICAT project team, as described in Section 1 of the Call Text / Terms of Reference. *Note: The workshops were originally planned to take place in-person, but may be hosted virtually if the current public health guidance precludes physical meetings. Participating municipalities will not be responsible for providing a communications platform for the workshops (e.g., Zoom or Go2Meeting).*

☐ We are able to participate in two MICAT General Assembly meetings, remotely or in situ.

☐ We are able to provide constructive verbal feedback to the project team in English, the project's working language.

3. Signature

Official
stamp:

Name and position of city representative:

Date:

Signature of representative: