

# Emissions Reduction Incentive Grant Supplemental Activity Application Form Replacement of Heavy Duty Vehicles and Equipment

TCEQ-10430b  
Version 12.01



Applications will be considered void if language is altered.  
The completed form should be attached to the Project Application Form TCEQ-10430.  
This application form is only valid for the application period ending November 30, 2012, or subsequent end date if the application period is extended.

## **Application Deadline:**

ERIG applications will be accepted until 5 p.m. Central Time on November 30, 2012, unless extended to a later date by the TCEQ.

Texas Commission on Environmental Quality  
Air Quality Division  
Implementation Grants Section (Incentive Grants), MC-204  
P.O. Box 13087  
Austin, TX 78711-3087

<http://www.terpgrants.org>



## Replacement of Heavy Duty Vehicles and Equipment

### Form 1 - General Information

Attach this form to the Project Application Form TCEQ-10430

**1. Emission source**

<b>Mark with an X below the replacement emissions source for this application. (Only one source allowed.)</b>	
On-Road Heavy Duty Vehicles:	
Non-Road Heavy Duty Equipment:	
Marine Vessels:	
Locomotives:	
Stationary Equipment:	

**2. Has the vehicle or equipment already been acquired?** (Mark the appropriate box with an X.)

Yes:		No:	
Date of acquisition:			
Expected # of months to complete the acquisition:			

**3. Has this activity been included in a previous application to TCEQ?** (Mark the appropriate box with an X.)

Yes:		No:	
If the box above was marked yes, then please explain and include the date:			

#### Locomotive only

**4. What will be the primary use of the locomotive?** (Mark the appropriate box with an X. Refer to the instructions in the RFGA for details on the options.)

Switchyard, Short Haul, etc.:		Industrial Rail – Limited use by an industrial or commercial entity. (see instructions in the RFGA for detailed definition):	
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**5. Does the old locomotive/engine have a start stop device?** (Mark the appropriate box with an X.)

Yes:		No:	
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**6. The new locomotive will be what type?** (Mark the appropriate box with an X.)

Genset/Hybrid:		Regular One Engine Switcher:	
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**7. Briefly explain the use of the locomotive below to verify the category marked in Item 4. above.**

#### Non-Road Heavy-Duty Equipment Only

**8. Is the non-road equipment used for natural gas recovery purposes AND the applicant chooses not to commit to operate the equipment at least 75% of the annual use in the areas designated in the application?** (Mark the appropriate box with an X.) (Mark the appropriate box with an X.)

Note: Non-Road equipment used for natural gas recovery purposes, attach the Supplemental 2: Non-Road Heavy-Duty Equipment Used for Gas Recovery Purposes.

Yes:		No:	
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**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 2.1**

**Old Vehicle/Equipment Information**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Vehicle/Equipment Description:					
Vehicle/Equipment Make:					
Vehicle/Equipment Model or Model Number:					
Vehicle/Equipment Year:					
Vehicle/Equipment Identification Number:					
Gross Vehicle Weight Rating: (On-Road only)					
Engine Make:					
Engine Model or Model Number:					
Engine Identification Number:					
Engine Year:					
Engine Horsepower:					
Fuel Type:					
Engine Family Code: (12-digit emissions code)					
Certified NOx Emissions: (g/bhp-hr)					

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 2.2**

**Old Vehicle/Equipment Information**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Vehicle/Equipment Description:					
Vehicle/Equipment Make:					
Vehicle/Equipment Model or Model Number:					
Vehicle/Equipment Year:					
Vehicle/Equipment Identification Number:					
Gross Vehicle Weight Rating: (On-Road only)					
Engine Make:					
Engine Model or Model Number:					
Engine Identification Number:					
Engine Year:					
Engine Horsepower:					
Fuel Type:					
Engine Family Code: (12-digit emissions code)					
Certified NOx Emissions: (g/bhp-hr)					

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 2.3**

**Old Vehicle/Equipment Information**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Vehicle/Equipment Description:					
Vehicle/Equipment Make:					
Vehicle/Equipment Model or Model Number:					
Vehicle/Equipment Year:					
Vehicle/Equipment Identification Number:					
Gross Vehicle Weight Rating: (On-Road only)					
Engine Make:					
Engine Model or Model Number:					
Engine Identification Number:					
Engine Year:					
Engine Horsepower:					
Fuel Type:					
Engine Family Code: (12-digit emissions code)					
Certified NOx Emissions: (g/bhp-hr)					

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 2.4**

**Old Vehicle/Equipment Information**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Vehicle/Equipment Description:					
Vehicle/Equipment Make:					
Vehicle/Equipment Model or Model Number:					
Vehicle/Equipment Year:					
Vehicle/Equipment Identification Number:					
Gross Vehicle Weight Rating: (On-Road only)					
Engine Make:					
Engine Model or Model Number:					
Engine Identification Number:					
Engine Year:					
Engine Horsepower:					
Fuel Type:					
Engine Family Code: (12-digit emissions code)					
Certified NOx Emissions: (g/bhp-hr)					

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 3.1**

**New Vehicle/Equipment Information**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Vehicle/Equipment Description:					
Vehicle/Equipment Make:					
Vehicle/Equipment Model or Model Number:					
Vehicle/Equipment Year:					
Vehicle/Equipment Identification Number:					
Gross Vehicle Weight Rating: (On-Road only)					
Engine Make:					
Engine Model or Model Number:					
Engine Identification Number:					
Engine Year:					
Engine Horsepower:					
Fuel Type:					
Engine Family Code: (12-digit emissions code)					
Certified NOx Emissions: (g/bhp-hr)					

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 3.2**

**New Vehicle/Equipment Information**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Vehicle/Equipment Description:					
Vehicle/Equipment Make:					
Vehicle/Equipment Model or Model Number:					
Vehicle/Equipment Year:					
Vehicle/Equipment Identification Number:					
Gross Vehicle Weight Rating: (On-Road only)					
Engine Make:					
Engine Model or Model Number:					
Engine Identification Number:					
Engine Year:					
Engine Horsepower:					
Fuel Type:					
Engine Family Code: (12-digit emissions code)					
Certified NOx Emissions: (g/bhp-hr)					



**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 3.3**

**New Vehicle/Equipment Information**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Vehicle/Equipment Description:					
Vehicle/Equipment Make:					
Vehicle/Equipment Model or Model Number:					
Vehicle/Equipment Year:					
Vehicle/Equipment Identification Number:					
Gross Vehicle Weight Rating: (On-Road only)					
Engine Make:					
Engine Model or Model Number:					
Engine Identification Number:					
Engine Year:					
Engine Horsepower:					
Fuel Type:					
Engine Family Code: (12-digit emissions code)					
Certified NOx Emissions: (g/bhp-hr)					

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 3.4**

**New Vehicle/Equipment Information**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Vehicle/Equipment Description:					
Vehicle/Equipment Make:					
Vehicle/Equipment Model or Model Number:					
Vehicle/Equipment Year:					
Vehicle/Equipment Identification Number:					
Gross Vehicle Weight Rating: (On-Road only)					
Engine Make:					
Engine Model or Model Number:					
Engine Identification Number:					
Engine Year:					
Engine Horsepower:					
Fuel Type:					
Engine Family Code: (12-digit emissions code)					
Certified NOx Emissions: (g/bhp-hr)					

## Replacement of Heavy Duty Vehicles and Equipment

### Price Analysis For Vehicle or Equipment Being Purchased

The price of the vehicle or equipment must be reasonable, as determined by whether the price exceeds the price normally charged for that type of vehicle or equipment absent the availability of a grant. A price comparison option must be entered in Form 4 for each activity. You must provide an original price quote for the vehicle or equipment to be purchased or, if the purchase has already been made, a copy of the invoice or purchase order. In addition, you must provide the price comparison information required for the option chosen. Governmental entities must follow competitive purchasing laws applicable to that entity in making a grant-funded purchase.

**1. No Price Comparison Information is Required.** If you choose one of the following options, only one primary price quote must be provided. If the purchase has already been made, then a copy of the invoice or purchase order should be provided. No additional price comparison information is required unless requested by the TCEQ.

**Option A:** The applicant is a governmental entity and will use competitive purchasing procedures or purchase from a cooperative purchasing program. Price information from a cooperative purchasing list or a written price quote must still be provided to show the expected cost.

**Option B:** The requested grant amount listed in Section 4 of this form does not exceed 60% of the vehicle or equipment cost.

**2. Price Comparison Information is Required.** If you did not choose one of the options above, you must provide price comparison information as requested under at least one of the options listed below. Choose the applicable option below and provide the requested information in addition to one primary price quote.

**Option C:** Two or more additional original price quotes for the same make, model, and model year of vehicle or equipment from unrelated dealers.

**Option D:** Price information from a current government-approved price/bid list or cooperative purchasing price/bid list for the same make, model, and model year of vehicle or equipment.

**Option E:** Price information from a current published/advertised price list available to the general public for the same make, model, and model year of vehicle or equipment.

**Option F:** If the vehicle or equipment is "used," current advertised price information from internet marketing sites or other public advertisements for two or more of the same make, model, and model year of vehicle or equipment.

**Option G:** Documentation of prices charged for at least two recent sales to non-TERP customers by the dealer for the same make, model, and model year of vehicle or equipment. This information may include invoices or purchase orders with the identifying customer information blacked out or other written documentation (sales report, sales list, etc.) from the dealer.

**3. The TCEQ** is not obligated to accept a price quote if the price does not appear to be reasonable. If the price on the primary price quote is higher than the price comparison information provided above, you must provide an explanation of why the price should be considered reasonable. If no price comparison information is available, you must explain why the information is not available and why the price being charged should be considered reasonable. The TCEQ is not obligated to accept the price listed and may deny an application where the price is determined unreasonable or may use a lower amount for determining the incremental cost for the grant. The TCEQ may use published national pricing/value guides and comparison with prices charged for other grants to determine if the price is reasonable.

**Option H:** No price comparison information is available. This option will be accepted only in unusual or special circumstances, such as with a unique type of vehicle or equipment available from only one source. An explanation of why no price comparison information is available must be provided below, along with a justification for why the price should be considered reasonable.

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Financial Data**

**Form 4.1**

**1. Incremental Cost / Cost to Applicant Calculation**

(Refer to section 1.5 of the RFGA for explanations of incremental cost, global positioning system, and scrappage value under Eligible Cost)

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Price Analysis Option:					
Capital Cost - Vehicle/Equipment Purchase (A):					
Global Positioning System (B):					
Scrapage Value (C): <small>(The TCEQ will use a default scrap value of \$1,000 for heavy duty)</small>					
Other Financial Incentives and Tax Credits (D):					
Incremental Cost / Cost to Applicant (E): <small>(A + B - C - D = E)</small>					

**2. Maximum Grant Amount Calculation**

(Refer to RFGA for explanation of maximum grant amount calculation, Section 1.5, Maximum Eligible Grant Amount)

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Incremental Cost / Cost to Applicant (E):					
Enter the maximum % (F):					
Maximum Eligible Grant Amount (G): <small>(E x F = G)</small>					
Grant Amount Requested for This Activity:					

**3. Other Financial Incentives and Tax Credits**

Explain any other financial assistance to be used for the purchase or lease, such as tax credits or deductions, other grants, or any other public financial assistance. This does not include the amount you finance through a bank or other third-party to purchase the equipment.	
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**4. Financing or Lease Terms for Replacement Vehicles**

Reimbursement will not be authorized for pre-payment of future periodic financing or lease payments. A grant recipient will need to either ensure that sufficient payments will be made prior to the end of the grant term to use the grant amount or structure the financing or lease agreement to allow for an up-front payment in return for lower periodic payments. CHOOSE ONE:

<b>Capital Lease Financing</b> <small>(equipment will be purchased and retained at the end of the lease). This option is limited to capital lease agreements with a binding commitment for the applicant to take ownership of the equipment. An option to buy at the end of the lease term, without this binding commitment, will not be considered under this option.</small>	<b>Regular Financing:</b>	<b>Cash Purchase:</b>	<b>Lease:</b> <small>Equipment will be returned at the end of the lease. The lease must extend for at least the Activity Life.</small>
Explain financing or lease terms, including the length (months) of the lease or financing:			

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Financial Data**

**Form 4.2**

**1. Incremental Cost / Cost to Applicant Calculation**

(Refer to section 1.5 of the RFGA for explanations of incremental cost, global positioning system, and scrappage value under Eligible Cost)

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Price Analysis Option:					
Capital Cost - Vehicle/Equipment Purchase (A):					
Global Positioning System (B):					
Scrapage Value (C): <small>(The TCEQ will use a default scrap value of \$1,000 for heavy duty)</small>					
Other Financial Incentives and Tax Credits (D):					
Incremental Cost / Cost to Applicant (E): <small>(A + B - C - D = E)</small>					

**2. Maximum Grant Amount Calculation**

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Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Incremental Cost / Cost to Applicant (E):					
Enter the maximum % (F):					
Maximum Eligible Grant Amount (G): <small>(E x F = G)</small>					
Grant Amount Requested for This Activity:					

**3. Other Financial Incentives and Tax Credits**

Explain any other financial assistance to be used for the purchase or lease, such as tax credits or deductions, other grants, or any other public financial assistance. This does not include the amount you finance through a bank or other third-party to purchase the equipment.	
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Explain financing or lease terms, including the length (months) of the lease or financing:			

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Financial Data**

**Form 4.3**

**1. Incremental Cost / Cost to Applicant Calculation**

(Refer to section 1.5 of the RFGA for explanations of incremental cost, global positioning system, and scrappage value under Eligible Cost)

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Price Analysis Option:					
Capital Cost - Vehicle/Equipment Purchase (A):					
Global Positioning System (B):					
Scrapage Value (C): <small>(The TCEQ will use a default scrap value of \$1,000 for heavy duty)</small>					
Other Financial Incentives and Tax Credits (D):					
Incremental Cost / Cost to Applicant (E): <small>(A + B - C - D = E)</small>					

**2. Maximum Grant Amount Calculation**

(Refer to RFGA for explanation of maximum grant amount calculation, Section 1.5, Maximum Eligible Grant Amount)

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Incremental Cost / Cost to Applicant (E):					
Enter the maximum % (F):					
Maximum Eligible Grant Amount (G): <small>(E x F = G)</small>					
Grant Amount Requested for This Activity:					

**3. Other Financial Incentives and Tax Credits**

Explain any other financial assistance to be used for the purchase or lease, such as tax credits or deductions, other grants, or any other public financial assistance. This does not include the amount you finance through a bank or other third-party to purchase the equipment.	
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**4. Financing or Lease Terms for Replacement Vehicles**

Reimbursement will not be authorized for pre-payment of future periodic financing or lease payments. A grant recipient will need to either ensure that sufficient payments will be made prior to the end of the grant term to use the grant amount or structure the financing or lease agreement to allow for an up-front payment in return for lower periodic payments. CHOOSE ONE:

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Explain financing or lease terms, including the length (months) of the lease or financing:			

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Financial Data**

**Form 4.4**

**1. Incremental Cost / Cost to Applicant Calculation**

(Refer to section 1.5 of the RFGA for explanations of incremental cost, global positioning system, and scrappage value under Eligible Cost)

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Price Analysis Option:					
Capital Cost - Vehicle/Equipment Purchase (A):					
Global Positioning System (B):					
Scrapage Value (C): <small>(The TCEQ will use a default scrap value of \$1,000 for heavy duty)</small>					
Other Financial Incentives and Tax Credits (D):					
Incremental Cost / Cost to Applicant (E): <small>(A + B - C - D = E)</small>					

**2. Maximum Grant Amount Calculation**

(Refer to RFGA for explanation of maximum grant amount calculation, Section 1.5, Maximum Eligible Grant Amount)

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
Incremental Cost / Cost to Applicant (E):					
Enter the maximum % (F):					
Maximum Eligible Grant Amount (G): <small>(E x F = G)</small>					
Grant Amount Requested for This Activity:					

**3. Other Financial Incentives and Tax Credits**

Explain any other financial assistance to be used for the purchase or lease, such as tax credits or deductions, other grants, or any other public financial assistance. This does not include the amount you finance through a bank or other third-party to purchase the equipment.	
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**4. Financing or Lease Terms for Replacement Vehicles**

Reimbursement will not be authorized for pre-payment of future periodic financing or lease payments. A grant recipient will need to either ensure that sufficient payments will be made prior to the end of the grant term to use the grant amount or structure the financing or lease agreement to allow for an up-front payment in return for lower periodic payments. CHOOSE ONE:

<b>Capital Lease Financing</b> (equipment will be purchased and retained at the end of the lease). This option is limited to capital lease agreements with a binding commitment for the applicant to take ownership of the equipment. An option to buy at the end of the lease term, without this binding commitment, will not be considered under this option.	<b>Regular Financing:</b>	<b>Cash Purchase:</b>	<b>Lease:</b> Equipment will be returned at the end of the lease. The lease must extend for at least the Activity Life.
Explain financing or lease terms, including the length (months) of the lease or financing:			

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 5.1**

**Activity Life and Area**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
<b>Designated Activity Life:</b>					
<b>% of Annual Usage Austin Area:</b> (Bastrop, Caldwell, Hays, Travis, and Williamson Counties)					
<b>% of Annual Usage Beaumont-Port Arthur Area:</b> (Hardin, Jefferson, and Orange Counties)					
<b>% of Annual Usage Corpus Christi Area:</b> (Nueces and San Patricio Counties)					
<b>% of Annual Usage Dallas-Fort Worth Area:</b> (Collin, Dallas, Denton, Ellis, Hood, Johnson, Kaufman, Parker, Rockwall, Tarrant, and Wise Counties)					
<b>% of Annual Usage Houston-Galveston-Brazoria Area:</b> (Brazoria, Chambers, Fort Bend, Galveston, Harris, Liberty, Montgomery, and Waller Counties)					
<b>% of Annual Usage San Antonio Area:</b> (Bexar, Comal, Guadalupe, and Wilson Counties)					
<b>% of Annual Usage Tyler-Longview Area:</b> (Gregg, Harrison, Rusk, Smith, and Upshur Counties)					
<b>% of Annual Usage - Victoria Area:</b> (Victoria County)					
<b>% of Annual Usage Spent on Designated Highways and Roadways:</b> (On-Road Only)					

**Travel Description:** Please describe your typical route, including the following: a) Daily, weekly or monthly trips; b) Cities traveled between; and c) Highways traveled. This information must match the percentage and areas marked on Form 5.1



**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 5.2**

**Activity Life and Area**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
<b>Designated Activity Life:</b>					
<b>% of Annual Usage Austin Area:</b> (Bastrop, Caldwell, Hays, Travis, and Williamson Counties)					
<b>% of Annual Usage Beaumont-Port Arthur Area:</b> (Hardin, Jefferson, and Orange Counties)					
<b>% of Annual Usage Corpus Christi Area:</b> (Nueces and San Patricio Counties)					
<b>% of Annual Usage Dallas-Fort Worth Area:</b> (Collin, Dallas, Denton, Ellis, Hood, Johnson, Kaufman, Parker, Rockwall, Tarrant, and Wise Counties)					
<b>% of Annual Usage Houston-Galveston-Brazoria Area:</b> (Brazoria, Chambers, Fort Bend, Galveston, Harris, Liberty, Montgomery, and Waller Counties)					
<b>% of Annual Usage San Antonio Area:</b> (Bexar, Comal, Guadalupe, and Wilson Counties)					
<b>% of Annual Usage Tyler-Longview Area:</b> (Gregg, Harrison, Rusk, Smith, and Upshur Counties)					
<b>% of Annual Usage - Victoria Area:</b> (Victoria County)					
<b>% of Annual Usage Spent on Designated Highways and Roadways:</b> (On-Road Only)					

**Travel Description:** Please describe your typical route, including the following: a) Daily, weekly or monthly trips; b) Cities traveled between; and c) Highways traveled. This information must match the percentage and areas marked on Form 5.2.

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 5.3**

**Activity Life and Area**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
<b>Designated Activity Life:</b>					
<b>% of Annual Usage Austin Area:</b> (Bastrop, Caldwell, Hays, Travis, and Williamson Counties)					
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<b>% of Annual Usage Spent on Designated Highways and Roadways:</b> (On-Road Only)					

**Travel Description:** Please describe your typical route, including the following: a) Daily, weekly or monthly trips; b) Cities traveled between; and c) Highways traveled. This information must match the percentage and areas marked on Form 5.3.

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 5.4**

**Activity Life and Area**

Description	Activity Number:	Activity Number:	Activity Number:	Activity Number:	Activity Number:
<b>Designated Activity Life:</b>					
<b>% of Annual Usage Austin Area:</b> (Bastrop, Caldwell, Hays, Travis, and Williamson Counties)					
<b>% of Annual Usage Beaumont-Port Arthur Area:</b> (Hardin, Jefferson, and Orange Counties)					
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<b>% of Annual Usage - Victoria Area:</b> (Victoria County)					
<b>% of Annual Usage Spent on Designated Highways and Roadways:</b> (On-Road Only)					

**Travel Description:** Please describe your typical route, including the following: a) Daily, weekly or monthly trips; b) Cities traveled between; and c) Highways traveled. This information must match the percentage and areas marked on Form 5.4.

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 6**

**Usage**

**1. Usage Commitment Option - List either Option 1 or Option 2 as described in section 1.11 of the RFGA:**  
 (By selecting Option 2, the applicant will be required to install GPS on the Vehicle/Equipment unless this requirement is waived by the TCEQ)

**2. If the TCEQ does not waive the GPS requirements, would the applicant like to use the Option 1 defaults?**  
 (Mark the box to the right Yes or No)

**3. Annual Usage** Is the annual usage listed below in miles, gallons, or hours?


**List the annual usage for each activity**

Description	Activity Number:		Activity Number:		Activity Number:		Activity Number:		Activity Number:	
Annual Usage:										

**List the annual usage for each activity**

Description	Activity Number:		Activity Number:		Activity Number:		Activity Number:		Activity Number:	
Annual Usage:										

**List the annual usage for each activity**

Description	Activity Number:		Activity Number:		Activity Number:		Activity Number:		Activity Number:	
Annual Usage:										

**List the annual usage for each activity**

Description	Activity Number:		Activity Number:		Activity Number:		Activity Number:		Activity Number:	
Annual Usage:										

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 7**

**Disposition of the Old Vehicle/Equipment Being Replaced**

**1. Are you proposing an alternative method of destruction other than the listed method in the RFGA?**(Mark the appropriate box with an X.)

Yes:		No:	
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**2. Does the alternative method of destruction apply to all activities?**(Mark the appropriate box with an X.)

Yes:		No:	
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If the box above is marked No, please list the activity numbers which the alternative method applies to below.

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Explain the alternative method of destruction for those activities in the box below. If needed, please attached additional pages.

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**3. Disposition of Locomotive/Engine Being Replaced (Locomotive Only)**

The applicant requests Executive Director approval for an alternative disposition plan that will result in the old locomotive and engine being permanently removed from the State of Texas. (mark the appropriate box below). Please refer to the RFGA, Appendix B for information on the requirements for submitting an alternative disposition plan.

Yes:		No:	
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# Replacement of Heavy Duty Vehicles and Equipment

## Vehicle/Equipment Information

### Form 8

#### VEHICLE/EQUIPMENT CERTIFICATION

This form is to be completed and signed by a **certified or licensed mechanic** qualified to assess the condition of the vehicle. The mechanic may not be an employee of the applicant, unless approved by the TCEQ. Attach additional forms as needed.

**INFORMATION ON THE VEHICLE BEING REPLACED. Note: the VIN must match the number listed on Form(s) 2.1-2.4**

Activity Number:		Vehicle/Equipment Identification Number:	
Activity Number:		Vehicle/Equipment Identification Number:	
Activity Number:		Vehicle/Equipment Identification Number:	
Activity Number:		Vehicle/Equipment Identification Number:	
Activity Number:		Vehicle/Equipment Identification Number:	
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Activity Number:		Vehicle/Equipment Identification Number:	
Activity Number:		Vehicle/Equipment Identification Number:	
Activity Number:		Vehicle/Equipment Identification Number:	

I, the undersigned, have inspected the vehicle/equipment(s) noted above. The engine starts and runs properly and the vehicle/equipment is in good operating condition. In my professional opinion, the vehicle/equipment is able to perform the functions normally expected for this type of vehicle/equipment and could be expected to operate for an additional two years. **Intentional falsification of these forms will be prosecuted to the extent allowed under the law and may be used as an adverse factor in future grant selection decisions.**

<b>Printed Name:</b>	
<b>Name of Service Company:</b>	
<b>Phone Number:</b>	
<b>Address:</b>	
<b>List your mechanic certification type and number:</b>	
<b>Certified Mechanic Signature:</b> (Please sign and date in BLUE ink)	
<b>Date:</b>	

**Replacement of Heavy Duty Vehicles and Equipment**

**Vehicle/Equipment Information**

**Form 9**

**Option 2 Usage Rates Justification**

Explain below in detail how you arrived at the proposed usage rate. Provide documentation as outlined in section 1.11 of the RFGA used to justify the usage for the Option 2. If you have chosen option 1 (default values) for your usage commitment, you do not need to complete this form.

**Explanation:**

Large empty light blue area for providing the explanation.

Replacement of Heavy Duty Vehicles and Equipment

Vehicle/Equipment Information

Form 10

Applicant Certification of Ownership or Lease, Condition, and Historical Use
Complete for EACH Replacement Activity

Activity Number:

Complete separate form for each replacement activity

Sign below to certify that, unless a waiver has been submitted, these conditions have been met.

1. Ownership or Lease

a. Vehicle or equipment has been continuously owned for the preceding two years. For vehicle and marine vessel titles, the applicant is listed on the front of the title document for the preceding two years.

b. If vehicle is leased, the applicant has leased the vehicle for the preceding two years and the applicant is listed as the lessee on the lease agreement for the preceding two years.

Date of purchase or lease:

Previous owner or leasing company:

Is a waiver for the Ownership and Use requirements being requested? (Mark the box to the right Yes or No.)

2. Registration (on-road vehicles and marine vessels)

a. The vehicle or vessel has been continuously registered for operation in Texas for the preceding two years.

Registration Number:

Registration expiration date:

Is a waiver for the Registration requirements being requested? (Mark the box to the right Yes or No.)

3. Operation in Texas

a. The vehicle or equipment has been continuously located and used in Texas for the preceding two years.

Is a waiver for the Operation in Texas requirements being requested? (Mark the box to the right Yes or No.)

4. Historical Use

Miles (on-road vehicles):

(List average annual use for the preceding two years)

Hours (non-road equipment, marine vessels, and stationary equipment):

(List average annual use for the preceding two years)

Fuel Use (locomotives and on-road vehicles with a significant (>25%) power take off operation, if you intend to use vehicle fuel use as the usage factor):

(List average annual use for the preceding two years)

The vehicle/equipment being replaced has how many total miles/hours indicated on the odometer/meter?

Is the odometer/hour meter working? (Mark the box to the right Yes or No.)

If you are selecting Option 2, you must also complete Form 9 and should provide documentation to prove that the listed historical usage correct. Under the Option 2, the future use commitment may not exceed the average annual historical use.

5. Condition

a. The vehicle or equipment is currently in good operating condition and capable of performing its primary function at the time of signature.

b. To the best of the applicant's knowledge, the vehicle or equipment is capable of continuing to perform its primary function for at least the period of the designated activity life, taking into account normal maintenance, repairs, and upkeep.

Is a waiver for the Condition requirements being requested? (Mark the box to the left Yes or No.)

6. Continued Operation and Use

a. If the grant funds were not available, the applicant expects to otherwise continue to operate the vehicle or equipment in Texas for at least the period of the designated activity life and the applicant otherwise would not have planned to replace the vehicle or equipment.

b. If the vehicle is currently leased, the lease agreement extends through the period of the designated activity life or the lease includes a purchase clause.

Is a waiver for the Continued Operation Use requirements being requested? (Mark the box to the right Yes or No.)

7. Signature

Signature of Authorized Official:

Date of Signature (must be the date the form was signed in blue ink):



## Replacement of Heavy Duty Vehicles and Equipment

**This page should be used as a checklist before grant application submission.**

**Below is a list of all the pages that require a signature. ALL forms must include original signatures in all signature blocks and should be signed in BLUE ink. No photocopies, faxes, scanned copies, or other copies of required signatures will be accepted. If a signature page is missing or has been altered, the application will not be accepted.**

### **SIGNATURE PAGES**

Signature Page (Authorized Official); Vehicle Certification (Certified Mechanic); Applicant Certification of Ownership or Lease, Condition, and Historical Use (Authorized Official); Child Support Certification (Authorized Official); W-9 Form (Authorized Official)

### **The following documentation, if applicable, is required with the application**

- 1.** Copy of current title or lease agreements (vehicle leases only) listing the applicant as the owner or lessee. If not two years old, copies of previous title or lease documents.  
For equipment that is not titled, copy of bill of sale or other documents showing ownership for previous two years.
- 2.** Copy of current registration document or receipt, if registration required for the equipment being replaced.  
If registration was renewed within the last six months, attach copies of previous registration documentation to show continuous registration for two years. (On-Road Only)
- 3.** A copy of the applicant's current marine vessel registration. (Marine Only)
- 4.** Three color photographs showing (1) the entire vehicle/equipment, including the tires, (2) the engine showing the engine plate if possible, and (3) the vehicle registration and inspection sticker.
- 5.** A detailed original price quote for the purchase of the vehicle/equipment/engine if it has not yet been purchased.
- 6.** If the vehicle/equipment/engine has already been purchased, provide the purchase, lease, or financing agreement and/or invoice showing the price paid. The purchase may not have been made before the opening of the grant application period.

### **ADDITIONAL FORMS TO INCLUDE**

W-9 Form (Request for Taxpayer Identification Number and Certification Form)  
Waiver Request (if applicable)  
Alternative Disposition Request for Locomotive/Engine Being Replaced (Locomotive Only)  
Photocopy of state or federal issued identification card (if applicant is individual or sole proprietor)  
Supplemental Form 1: Stationary Equipment (if applicable)  
Supplemental Form 2: Non-Road Heavy-Duty Equipment Used for Gas Recovery Purposes