

ERRATA SHEET
FOR PROGRAM ANNOUNCEMENT #2011-11
PROPOSITION 1B – GOODS MOVEMENT EMISSION REDUCTION PROGRAM
ON-ROAD HEAVY-DUTY DIESEL TRUCKS

After Board approval on March 4, 2011, the following clerical errors were identified in the Program Announcement:

Page 2: Drayage Trucks

Up to \$30,000 for a Class 7 replacement truck with an engine that meets ~~MY2007~~ MY2010 emissions (~~1.20~~ 0.20 g/bhp-hr NOx or less)

Page 8: Drayage Trucks

~~\$40,000~~ \$30,000 for replacement of a Class 7 truck (GVWR 26,001 lbs to 33,000 lbs) with an engine that meets or exceeds the MY2010 emissions (0.20 g/bhp-hr or less NOx). To be eligible, the replacement truck must have less than 250,000 miles with odometer verification at the time of post-inspection.

Page 11: Truck A Replacement Funding Table

Old Truck Information	Maximum Funding Amounts to retrofit (\$)	Maximum Funding Amounts for replacement (\$)
Class 8 “Other truck”	\$5,000	\$60,000
Class 8 “Drayage Truck”	Not Eligible	\$50,000
Class 7 “Other Truck”	\$50,000 \$5,000	\$40,000
Class 7 “Drayage Truck”	Not Eligible	Not Eligible

Appendix A through D:

In Section 2, Item #19 of Appendices A through D, the applicant must also specify the percentage of miles traveled (or Power Take Off hours, if applicable) in California in the past two years. The application forms have been revised to reflect this change.

The revised Program Announcement and application forms are attached.

**AQMD PROGRAM ANNOUNCEMENT
ON-ROAD HEAVY DUTY DIESEL TRUCKS
EMISSION REDUCTION PROGRAM**

PA #2011-11(REVISED)

The South Coast Air Quality Management District (AQMD) is seeking project proposals for eligible projects that reduce emission from older, heavy-duty diesel trucks. In this Program Announcement (PA), the words “Proposer,” “Applicant,” and “Contractor” are used interchangeably.

SECTION I – PROGRAM OVERVIEW

INTRODUCTION

The diesel pollution from current goods movement operations greatly impacts the health of community residents near ports, rail yards, distribution centers, and roads with high truck traffic. In the Los Angeles/Inland Empire region, which includes California’s largest concentration of goods movement facilities (e.g., ports and rail yards); the result has been major health risks associated with very high regional levels of ozone and fine particulate (PM_{2.5}) pollution.

The Proposition 1B: Goods Movement Emission Reduction Program (hereafter “Program”) is intended to reduce air pollution associated with freight movement along California’s trade corridors. The program provides grants to equipment owners/operators on a competitive basis to upgrade their equipment to cleaner technologies. The program targets diesel-related emissions from freight movement activities within four trade corridors including the Bay Area, Central Valley, Los Angeles/Inland Empire and San Diego/Border trade corridors. These four trade corridors and other program requirements are defined in the Proposition 1B: Goods Movement Emission Reduction Program Guidelines dated March 25, 2010 (Program Guidelines) which are available on the CARB Proposition 1B - Goods Movement Emission Reduction Program website located at: <http://www.arb.ca.gov/bonds/gmbond/gmbond.htm>. The program provides higher grant amounts for projects that utilize the cleanest technologies.

Below are the minimum eligibility requirements for heavy-duty diesel truck projects:

- Existing truck must have a Gross Vehicle Weight Rating (GVWR) of 26,001 lbs. or greater.
- Existing truck must have been operating at least 75% of the time within California over the past two years.
- Existing truck must have an engine with a model year that is eligible for the appropriate funding option listed below.
- Existing truck must move goods for sale a majority of the time.
- The funding amounts vary depending on the following criteria:
 - a) Whether the existing truck is Class 7 (GVWR 26,001 – 33,000) or Class 8 (GVWR 33,001 +).
 - b) Whether the existing truck is in drayage or non-drayage service.
 - c) The type of equipment project upgrade chosen.

This Program Announcement is seeking applications from truck owners/operators for eligible projects in the following five categories:

1. **PM Retrofit**- Up to \$10,000 is available to retrofit an eligible MY1994-2006 heavy duty diesel engine with a CARB-verified Level 3 Plus diesel particulate filter that reduces PM by 85% or more. Trucks serving ports and intermodal rail yards are not eligible.
2. **Repower** – Up to \$30,000 is available to repower an older heavy-duty diesel truck (with engine MY1994-2006) with a new engine that meets the MY2010 emission standards.
3. **Replacement** – Up to \$60,000 is available to replace an older heavy duty diesel truck (engine MY2003 or older) with a diesel or alternative fuel truck that meets the 2007 or 2010 emission standards. Below are the options available under this project category:

Dravage Trucks:

- Old Truck: Must be engine MY1994-2003.
- Up to \$50,000 for a Class 8 replacement truck with an engine that meets MY2010 emissions (0.20 g/bhp-hr NOx or less).
- Up to \$30,000 for a Class 7 replacement truck with an engine that meets MY2010 emissions (0.20 g/bhp-hr NOx or less).

Other Trucks:

Class 8 Truck Replacement

Options	NOx Emission Certification	Maximum Funding Amounts (\$)
1	Meets or exceeds 2010 Engine Standard (≤ 0.20 g/bhp-hr)	\$60,000
2	Meets or exceeds the optional 2007 Engine Standard (≤ 0.50 g/bhp-hr)	\$50,000
3	Meets or exceeds 2007 Engine Standard (≤ 1.20 g/bhp-hr)	\$40,000

Class 7 Truck Replacement

Options	NOx Emission Certification	Maximum Funding Amounts(\$)
1	Meets or exceeds 2010 Engine Standard (≤ 0.20 g/bhp-hr)	\$40,000
2	Meets or exceeds optional 2007 Engine Standard (≤ 0.50 g/bhp-hr)	\$30,000
3	Meets or exceeds 2007 Engine Standard (≤ 1.20 g/bhp-hr)	\$25,000

4. Three-Way Truck Transactions:

- Up to \$60,000 to replace an eligible Class 8 truck and up to \$40,000 to replace an eligible Class 7 truck that has a MY1998-2006 engine (Truck A) with a diesel or alternative fuel truck (Truck C) meeting MY2010 emissions standard.
- Optional \$5,000/truck to equip Truck A with a CARB-verified Level 3 Plus diesel particulate filter that reduces diesel PM by at least 85%.
- Scrap a MY1993 or older diesel truck (Truck B) and replace with Truck A.
 - Truck A: Heavy duty diesel truck with MY1998-2006 engine.
 - Truck B: Heavy duty diesel truck with MY1993 or older engine.
 - Truck C: Heavy duty diesel truck that meet MY2010 emissions.

5. Electrification Infrastructure for Truck Stop or Distribution Center:

Eligible projects include: Electrical infrastructure at truck stops, intermodal facilities, distribution centers, and other places where heavy-duty diesel trucks congregate in a trade corridor. Program funding for this category of projects varies based on the type of facility (e.g., distribution center or truck stop) and location of project site (such as at a dock or in a parking area). The funding amounts for this category are identified in Appendix A of the Program Guidelines.

GENERAL PROGRAM INFORMATION

This Program Announcement is intended to solicit applications for eligible projects in the category of heavy-duty diesel trucks that are engaged in goods movement activities as defined by the Proposition 1B Program. Each application will be initially reviewed for completeness. Only complete applications will be evaluated for program eligibility. All eligible projects will be competitively ranked based on the criteria set forth in the Program Guidelines. Truck projects will compete against each other for limited funding based on a ranking process that uses calculated emission reductions and cost effectiveness to rank projects against each other. Truck projects will be funded in order starting at the top of the competitively ranked list until all funds are allocated. Funding levels listed in the PA represent the maximum amount of program funding allowed for each project option. Equipment owners may request a reduced funding amount to improve the cost-effectiveness and competitiveness of the equipment project. Projects that request a lower amount of funding may rank higher in the competitive process. Also, as part of the application, the equipment owner must commit to at least 90% or 100% operation in California. Projects that commit to 100% operation in California may be more competitive due to the increased emission reductions that will be achieved within California.

It is each applicant's responsibility to read the Program Guidelines in addition to this PA to ensure that the submitted application is complete, containing all required information, and the project meets all program requirements at the time of submittal to AQMD. During the evaluation period, AQMD (or AQMD's consultants) may contact applicants for clarification and/or additional information needed to verify program eligibility. AQMD is not required to notify the applicant to collect information that is missing from the application. At the AQMD's discretion, consultants to the AQMD may conduct all or part of such evaluation and/or verification. Application data verification during the evaluation and contracting process may cause initial cost-effectiveness rankings and associated awards to change. Furthermore, the

AQMD reserves the right to reject incomplete applications or make adjustments to awards based on AQMD's verification of project information.

It is expected that multiple awards will be granted under this PA, subject to the approval of the AQMD's Governing Board and contingent upon AQMD's receipt of funds from CARB in the amount of the required payments.

PROGRAM HIGHLIGHTS

General

- All eligible vehicles will be evaluated and competitively ranked based on criteria set forth in this PA and the Program Guidelines. The trucks will be ranked based on specifications including, but not be limited to: engine model year, vehicle miles traveled per year (VMT), and the requested funding amount.
- Eligible vehicles include Class 7 and Class 8 heavy-duty diesel trucks involved in goods movement activities and that have operated in California at least 75% of the time during the past 2 years. The vehicle's Gross Vehicle Weight Rating (GVWR) must be 26,001 lbs. or greater to be eligible for program funding.
- Applicants applying for grant funding must be the legal owner of the old truck at the time the equipment project application is submitted to the AQMD.
- Applicants must provide a copy of the current California DMV vehicle registration.
- Applicant must provide documentation of annual miles traveled over the past 2 years (e.g., maintenance or inspection records with odometer readings, shipment logs, fuel receipts with vehicle identification, etc).
- Applicant must also provide proof of DMV registration for the past 2 years (California Base-plated or International Registration Plan (IRP) are acceptable). Monthly or seasonal registrations are acceptable with supporting documentation. If 2-year registration records are not available, then the applicant must provide a DMV printout showing the registration history or a minimum of 8 months registration supplemented by alternative documentation (e.g., proof of insurance, shipment records, or fuel consumption records) that establishes a pattern of California operation over the last 2 years.
- Applicant must demonstrate that the truck was operated for at least 5,000 miles each year for the past 2 years.
- Applicants must provide a price quote for the proposed retrofit device, equipment or new replacement truck.
- Applicants must provide the old truck VIN as part of the application. A VIN compliance check will be performed by CARB to verify there are no outstanding violations prior to funding approval.

- No third party contracts are allowed.
- **Unsigned applications will be deemed ineligible and will NOT be considered for funding.**
- A pre-inspection of the old truck and post-inspection of the new replacement truck will be required to verify eligibility of the vehicle prior to disbursement of any incentive funding under this program. New equipment shall not be ordered or purchased until the existing equipment passes a pre-inspection by AQMD or its designee and the contract is fully executed.
- **Destruction of the old vehicles and engines being replaced is required.**
- Proposed projects in the application cannot be under an existing Carl Moyer or Proposition 1B contract at the time of application.
- Grant funds shall only be used to pay down the capital cost of the equipment.
- There are two payment options that will be available: 1) direct payment to the vendor and 2) reimbursement to contractor with proof of payment by contractor. Payment of grant funds shall only be made upon the submittal of sufficient invoice documentation specifying the actual cost of the equipment and grant funds requested, and the satisfactory completion of a post-inspection by AQMD.
- It is the applicant's responsibility to correct any outstanding CARB violations associated with the owner's entire fleet of vehicles. Outstanding CARB violations will affect eligibility if not corrected by applicant.
- The mileage limit for the replacement truck is: 1) 500,000 miles for a Class 8 truck and 2) 250,000 miles for a Class 7 truck. Odometer verification at the time of post inspection by AQMD will be required to verify eligibility.
- Any tax obligation associated with the award is the responsibility of the grantee. Individuals or companies receiving grant funding will be issued a 1099-G form by AQMD for the full award amount.
- A number of CARB fleet rules and air quality regulations currently being implemented may reduce or eliminate eligibility for Program funding. Compliance with existing air quality regulations is a prerequisite for Program funding. Applicants are responsible for ensuring that they are in full compliance with all applicable regulations, such as the following:
 - On-Road Private @ <http://www.arb.ca.gov/msprog/onrdiesel/onrdiesel.htm>
- All the regulations and funding opportunities for diesel trucks operating in California can be also accessed through a CARB hotline at 866-6DIESEL.

- This program does not provide funding for the truck efficiency upgrades. Technologies that improve fuel efficiency for trucks may include devices that reduce aerodynamic drag and rolling resistance. Aerodynamic drag may be reduced using devices such as cab roof fairings, cab side gap fairings, cab side skirts, and on the trailer side, trailer side skirts, gap fairings, and trailer tail. Rolling resistance may be reduced using single wide tires or low-rolling resistance tires and automatic tire inflation systems on both the tractor and the trailer. These upgrades offer the potential to cut emissions of greenhouse gases and criteria pollutants, with a two to three year payback period through lower fuel costs. The benefits are variable based on the type of truck operations.

On December 11, 2008, ARB adopted a *Regulation To Reduce Greenhouse Gas Emissions From Heavy-Duty Vehicles (CCR, title 17, section 95300)*. The regulation applies primarily to owners of 53-foot or longer box-type trailers requiring their trucks and trailers to become more fuel efficient. Truck owners may be responsible for replacing or retrofitting their affected vehicles with efficiency upgrades that fit their operating profile. Other incentive programs may help offset the purchase cost or help finance the purchase of the upgrades, including ARB’s Providing Loan Assistance for California Equipment (PLACE) Program (<http://www.arb.ca.gov/ba/loan/on-road/on-road.htm>).

- Non-performance with any provision of the AQMD contract may result in the recovery of all or a portion of the grant funds or penalties to the equipment owner.

Project Implementation Deadlines:

Table 1: Port and Rail Yard (Drayage) Trucks – All Fleet Sizes

Old Engine Model Year	Project Type	Maximum Funding Amounts		New Equipment Must be Operational by:
		Class 8	Class 7	
1993 or older	Not eligible for funding	-	-	-
1994-2003	2010 Replacement (0.20 g/bhp-hr or lower NOx)	\$50K	\$30K	12/31/2013
1994-2006	2010 Repower (0.20 g/bhp-hr or lower NOx)	\$30K		

Table 2: Other Trucks – Small Fleets (1-3 Trucks)

Old engine Model Year	Project Type	Maximum Funding Amounts		New Equipment Must be Operational by:	Eligible for Fleet Averaging
		Class 8	Class 7		
2003 or older	2010 Replacement (0.20 g/bhp-hr or lower NOx)	\$60K	\$40K	12/31/2013	12/31/2015
	2007+ Replacement (0.50 g/bhp-hr or lower NOx)	\$50K	\$30K		
	2007 Replacement (1.20 g/bhp-hr or lower NOx)	\$40K	\$25K		
1994-2006	2010 Repower (0.20 g/bhp-hr or lower NOx)	\$30K		12/31/2014	12/31/2014
1996-2006	PM Retrofit (Level 3 +) w/4 year contract	\$10K			
1994-2006	PM Retrofit (Level 3 +)	\$5K			

	w/2 year contract			
--	-------------------	--	--	--

Table 3: Other Trucks – Large Fleets (4+ Trucks)

Old engine Model Year	Project Type	Maximum Funding Amounts		New Equipment Must be Operational by:	Eligible for Fleet Averaging
		Class 8	Class 7		
2003 or older	2010 Replacement (0.20 g/bhp-hr or lower NOx)	\$60K	\$40K	12/31/2012	12/31/2015
	2007+ Replacement (0.50 g/bhp-hr or lower NOx)	\$50K	\$30K		
	2007 Replacement (1.20 g/bhp-hr or lower NOx)	\$40K	\$25K		
1994-2006	2010 Repower (0.20 g/bhp-hr or lower NOx)	\$30K			12/31/2013
2005-2006	PM Retrofit (Level 3 +) w/4 year contract	\$10K			
1994-2006	PM Retrofit (Level 3 +) w/2 year contract	\$5K			

1. Retrofit Projects

This program will provide the following incentives to retrofit an eligible MY1994-2006 heavy duty diesel engine with a CARB-verified Level 3 Plus device that reduces PM by at least 85%:

1. \$5,000/truck with a project life of two years
2. \$10,000/truck with a project life of four years

The deadlines for project implementation, including retrofit projects, are identified in the tables above. CARB will post and update information on the Program’s website describing the operational deadlines for this and other project options.

- Truck serving ports and intermodal rail yards (as defined on page 8 of this PA) are not eligible for retrofit funding.
- Equipment owner must commit to at least 90% or 100% operation in California.
- Equipment owner must demonstrate that any mid-1990s engine subject to the software upgrades for diesel trucks (i.e., chip reflash) has completed the upgrade.

2. Repower

This program will provide funding up to \$30,000 to repower a truck with an eligible MY 1994-2006 heavy duty diesel engine with a new engine that meets MY2010 emissions.

The deadlines for project implementation, including repower projects, are identified in the tables above. CARB will post and update information on the Program’s website describing the operational deadlines for this and other project options.

- Equipment owner must commit to a project life of 5 years or 500,000 miles, whichever comes first.

- Equipment owner must commit to at least 90% or 100% operation in California.
- Equipment owner must scrap the old engine.
- Equipment owner must purchase a minimum of a 1-year or 100,000-mile major component engine warranty for the replacement engine that covers parts and labor.
- Equipment owner shall provide a copy of the CARB Executive Order documenting that the new engine meets the 2010 emission standards.

3. Replacement

Drayage Trucks

This program will provide funding up to the amounts below to replace an eligible truck with engine MY1994 -2003 with a new diesel or alternative fuel truck.

- \$50,000 for replacement of a Class 8 truck (GVWR 33,001 lbs or greater) with an engine that meets or exceeds the MY2010 emissions (0.20 g/bhp-hr or less NOx). To be eligible, the replacement truck must have less than 500,000 miles with odometer verification at the time of post-inspection.
- \$30,000 for replacement of a Class 7 truck (GVWR 26,001 lbs to 33,000 lbs) with an engine that meets or exceeds the MY2010 emissions (0.20 g/bhp-hr or less NOx). To be eligible, the replacement truck must have less than 250,000 miles with odometer verification at the time of post-inspection.
- Equipment owner must commit to at least 90% or 100% operation in California.
- Equipment owner must commit to a project life of 5 years or 500,000 miles, whichever comes first.
- Equipment owner must scrap the old truck.
- Equipment owner must purchase a minimum of a 1-year or 100,000-mile major component engine warranty for the replacement engine that covers parts and labor.
- Class 7 trucks will need to be replaced with eligible Class 7 trucks. Class 8 trucks will need to be replaced with eligible Class 8 truck. Truck replacement projects that involve a downgrade or upgrade in weight classification are not allowed.
- The operational deadline for implementing a drayage truck project is 12/31/2013 as listed in Table 1 of this PA.
- Drayage Truck means any in-use on-road vehicle with a gross vehicle weight rating (GVWR) greater than 26,000 lbs that pulls a trailer or chassis that is used for transporting cargo, such as containerized, bulk, or break-bulk goods, that operates:

- On or transgresses through port or intermodal rail yard property for the purpose of loading, unloading or transporting cargo, including transporting empty containers and chassis:
- Off port or intermodal rail yard property transporting cargo or empty containers or chassis that originated from or is destined to a port or intermodal rail property.
- Self certification in the application is required. Verification of the truck in the Drayage Truck Registry (DTR) will be performed.

Other Trucks

This program will provide funding up to the amounts below to replace a Class 7 or Class 8 truck equipped with eligible engine MY2003 or older with a newer diesel or alternative fuel truck.

Class 7 trucks will need to be replaced with eligible Class 7 trucks. Class 8 trucks will need to be replaced with eligible Class 8 truck. Truck replacement projects that involve a downgrade or upgrade in weight classification are not allowed.

Class 8 Truck Replacement

Options	NOx Emission Certification	Maximum Funding Amounts (\$)
1	Meets or exceeds 2010 Engine Standard (≤0.20 g/bhp-hr)	\$60,000
2	Meets or exceeds optional 2007 Engine Standard (≤0.50 g/bhp-hr)	\$50,000
3	Meets or exceeds 2007 Engine Standard (≤1.20 g/bhp-hr)	\$40,000

To be eligible, the replacement truck must have less than 500,000 miles with odometer verification at the time of post-inspection.

Class 7 Truck Replacement

Options	NOx Emission Certification	Maximum Funding Amounts (\$)
1	Meets or exceeds 2010 Engine Standard (≤0.20 g/bhp-hr)	\$40,000
2	Meets or exceeds the optional 2007 Engine Standard (≤0.50 g/bhp-hr)	\$30,000
3	Meets or exceeds 2007 Engine Standard (≤1.20 g/bhp-hr)	\$25,000

To be eligible, the replacement truck must have less than 250,000 miles with odometer verification at the time of post-inspection.

- Applicants must provide a copy of the CARB Executive Order for the newer, lower-emitting **diesel, natural gas, hybrid or electric** truck engine documenting that the engine complies with both FEL and CERT values equal to or lower than the emission level specified in the application. Class 8 replacement truck engines must meet the specified

NOx values (FEL and CERT) as certified by an ARB Executive Order for on-road use with an intended service of HHDD (heavy-heavy duty diesel) for diesel engines or HDO (heavy duty Otto) for alternative fueled vehicles.

- Equipment owner must commit to at least 90% or 100% operation in California.
- The deadlines for project implementation are identified in Tables 2 and 3 above. CARB will post and update information on the Program's website describing the operational deadlines for this and other project options.
- Equipment owner must commit to a project life of 5 years or 500,000 miles, whichever comes first.
- Equipment owner must scrap the old truck.
- Two for One option: The equipment owner may scrap two old trucks and replace these old trucks with one newer, low-emission truck. The combined mileage of the two old trucks will be used in the emission reduction calculation. This option does not increase the amount of available funding however the project may rank higher due to the increased emission reductions from using two older vehicles instead of one vehicle. If two older trucks are not within the same weight classification (one is Class 7 and one is Class 8), the applicant may choose either a Class 7 or Class 8 replacement vehicle and the corresponding funding cap.
- Equipment owner must purchase a minimum of a 1-year or 100,000-mile major component engine warranty for the replacement engine that covers parts and labor.

4. Three-Way Truck Transactions:

This project option involves the following: 1) replacement of a middle-aged truck (engine MY1998-2006) with a new truck meeting the 2010 emission standards, 2) installation of a retrofit device on the middle-aged truck and using the retrofitted truck to replace an older diesel truck (engine MY1993 or older), and 3) scrapping the older diesel truck. Projects in this category may result in greater emission reductions and a more competitive project.

- Program will provide funding up to \$60,000 to replace an eligible truck that has a MY1998-2006 engine (Truck A) with a diesel or alternative fuel truck (Truck C) meeting the MY2010 emission standards.
- Optional \$5,000/truck to equip Truck A with a CARB-verified Level 3 Plus diesel particulate filter that reduces diesel PM by at least 85%.
- Scrap a MY 1993 or older diesel truck (Truck B) and replace with Truck A.

Truck A: Heavy duty diesel truck with MY 1998-2006 engine.

Truck B: Heavy duty diesel truck with MY 1993 or older engine.

Truck C: Heavy duty diesel truck that meet MY2010 emissions.

Truck A Replacement Funding Table

Old Truck Information	Maximum Funding Amounts to retrofit (\$)	Maximum Funding Amounts for replacement (\$)
Class 8 "Other truck"	\$5,000	\$60,000
Class 8 "Drayage Truck"	Not Eligible	\$50,000
Class 7 "Other Truck"	\$5,000	\$40,000
Class 7 "Drayage Truck"	Not Eligible	Not Eligible

- If Truck A is a Class 7 (GVWR > 26,000 lbs.) Drayage Truck, the project is ineligible and the application will be rejected.
- Truck B can be any drayage or non-drayage Class 7 or Class 8 (GVWR > 26,000 lbs.) truck. The GVWR of Truck B does not affect the level of available funding for the project.
- Truck B must be identified and listed in the application with all data including mileage, mileage documentation, vocation, VIN, etc. Applicants are not allowed to change the identity of Truck B after the application is submitted.
- At the time of application, Truck A and Truck B may be owned by different entities.
- Please refer to the Program Guidelines for more information about this project option.

5. Electrification Infrastructure for Truck Stop or Distribution Center:

- Eligible projects include: Electrical infrastructure at truck stops, intermodal facilities, distribution centers, and other places where heavy-duty diesel trucks congregate in a trade corridor.
- Please refer to the Program Guideline for more information in this category.

PROGRAM ADMINISTRATION

The Program will be administered locally by the AQMD through the Technology Advancement Office.

SCHEDULE OF EVENTS

Release of PA #2011-11	March 4, 2011
All Applications Due by 1:00 pm	Friday, April 29, 2011
Anticipated Board Consideration of Awards	September 2, 2011

APPLICATION WORKSHOPS

- Wednesday, March 30, 2010 – 2:00 p.m. to 4:00 p.m.
SCAQMD Headquarters, Auditorium
21865 Copley Drive
Diamond Bar, CA 91765
- Wednesday, April 6, 2010 – 10 a.m. to Noon
SCAQMD Headquarters, Auditorium
21865 Copley Drive
Diamond Bar, CA 91765

**ALL APPLICATIONS MUST BE RECEIVED AT THE AQMD HEADQUARTERS
NO LATER THAN 1:00 P.M. ON FRIDAY, APRIL 29, 2011**

Postmarks will not be accepted. Faxed or e-mail proposals will not be accepted. Proposers may hand-deliver proposals to the AQMD by submitting the proposal to the AQMD Public Information Center. The proposal will be date and time-stamped and the person delivering the proposal will be given a receipt.

AQMD may issue subsequent solicitations if insufficient applications are received in this solicitation.

STATEMENT OF COMPLIANCE

Government Code Section 12990 and California Administrative Code, Title II, Division 4, Chapter 5, require employers to agree not to unlawfully discriminate against any employee or applicant because of race, religion, color, national origin, ancestry, physical handicap, medical condition, marital status, sex, or age. A statement of compliance with this clause is included in all AQMD contracts.

CONTACT FOR ADDITIONAL INFORMATION

Questions regarding the content or intent of this PA or procedural matters should be addressed to:

Mei Wang
Air Quality Specialist
Technology Advancement Office
South Coast Air Quality Management District
21865 Copley Drive, Diamond Bar, CA 91765
(909) 396-3257/3915 FAX

If you are unable to reach Ms. Mei Wang, you may call Ms. Vicki White, Program Supervisor at (909) 396-3436.

SECTION II – APPLICATION, WORK STATEMENT, AND DELIVERABLES

Application Requirements

A complete application must be submitted to AQMD by no later than the application deadline (by 1:00pm on Friday, April 29, 2011) to be considered for program funding. It is the applicant's responsibility to ensure the application contains all the required information at the time of submittal to the AQMD. The AQMD is not required to contact the applicant to obtain required information that is missing from the application. The application forms are provided in the appendices of this program announcement. The application forms are listed below:

Appendix A – Application Form for Heavy-Duty Diesel Truck Replacement

Appendix B – Application Form for Heavy-Duty Diesel Truck Retrofit

Appendix C – Application Form for Heavy-Duty Diesel Truck Repower

Appendix D – Application Form for Three-Way Truck Transaction

Appendix E – Application Form for Electrification Infrastructure at a Truck Stop or Distribution Center

The applicant should be aware that the application forms require certain information (such as a project description, project schedule and project cost information) to be provided as attachments to the application form. The application form and all required attachments must be completed and submitted to AQMD by the application deadline.

Applicants must sign the Application form indicating their understanding of the requirements for submittal of additional project information if needed to enable AQMD to finalize a contract and that all vehicles, engines or equipment must be in operation within certain time periods as prescribed in this PA. **Unsigned applications will be deemed ineligible and will NOT be considered for funding.**

Work Statement

As part of the contract execution, a statement of work will be provided to all grantees that include tasks and deliverables demonstrating compliance with the requirements of the Program as administered by AQMD. Detailed requirements will be provided in the contract to be executed but below are the minimum criteria for projects to replace heavy-duty diesel trucks:

- Truck owners must:
 - √ Commit to 90% or 100% California-only operation and registration in California for the duration of the contract term. Dual plates, IRP, and any other out-of-state registrations are prohibited.
 - √ Commit to at least 50% of travel in the four California trade corridors for duration of the contract term.
 - √ Agree to accept an on-board electronic monitoring unit at any time during the contract term.
 - √ Agree to equipment inspections and contract milestone deadlines for project implementation.
 - √ Comply with provision for payment of grant fund.

- √ Scrap the old truck and engine according to the terms specified in the Program Guidelines and the contract (this applies to truck replacement and repower projects only).
- √ Comply with record-keeping*, reporting, and audit requirements.
- √ Sign a legally binding contract with the local agency including project milestone dates and completion deadlines.
- √ Properly maintain the replacement truck in good operating condition and according to the manufacturer's recommendations.
- √ Demonstrate proof of equipment warranty and collision/comprehensive insurance on replacement truck. AQMD shall be named as additional insured on the policy.

Remedies for non-performance with the AQMD contract may include, but are not limited to:

Recovery of all or a portion of Program funds.

Other fiscal penalties on equipment owners based on the severity of the nonperformance.

Cancellation of the contract.

A ban on the equipment owner's ability to participate in future State incentive programs.

Prohibiting a specific piece of equipment from participating in another State incentive program.

**Equipment owners/grantees are required to retain, at minimum, all documents, invoices, and correspondence associated with the application, award, contract, monitoring, enforcement, and reporting requirements for at least two years after equipment project contact term or three years after final payment, whichever is later. Records shall be readily available and accessible to AQMD, CARB, or their designee upon request for the purposes of ongoing evaluations or auditing.*

Deliverables

Upon receiving notification of an award, equipment owner/grantee will be sent AQMD's contract that meets the requirements of the Program. This contract will clearly list requirements of the equipment owner/grantee to assist in monitoring the project and providing regular progress reports about how the funded vehicle(s) are being used. Owners shall be responsible for annual reporting that includes, but is not limited to:

- Contact information (owner name, address, phone, etc.).
- Proof of California registration.
- Proof of insurance.
- Current odometer reading (or estimated vehicle mileage if odometer is missing or broken)
- Annual vehicle miles traveled (including mileage/activity logs for documentation).
- Certification of at least 90% or 100% California operation.
- Certification and documentation of at least 50% of travel in the four California trade corridors as described in Section I - Program Overview.
- Summary of maintenance performed and inspections conducted.

- Certification that the project was operated in accordance with the signed contract and that all information submitted is true and accurate.
- Other information as requested by the local agency.

SECTION III - APPLICATION SUBMITTAL REQUIREMENTS

Applicants **must** complete the appropriate application forms which are included in the Appendices. In addition, Conflict of Interest and Project Cost information, as described below, must also be submitted with the application. It is the responsibility of the applicant to ensure that all information submitted is accurate and complete. Use the checklist provided in the Appendices to ensure all application elements are submitted.

CONFLICT OF INTEREST

Applicants must address any potential conflicts of interest with other clients affected by actions performed by the firm on behalf of the AQMD. Although the applicant will not be automatically disqualified by reason of work performed for such firms, the AQMD reserves the right to consider the nature and extent of such work in evaluating the application. Conflicts of interest will be screened on a case-by-case basis by the AQMD District Counsel's Office. Conflict of interest provisions of the state law, including the Political Reform Act, may apply to work performed pursuant to this contract. Please discuss potential conflicts of interest on the application form entitled "Contracting Statements".

PROJECT COST

Applicants must provide cost information in their applications, as follows:

- Total project cost
- Program dollars requested
- Source and amounts of other funding (private, local, and/or other State, federal)
- Request for a direct payment to vendor (if applicable)
- Documentation of match funding availability

All project costs must be clearly indicated in the application. In addition, applicants should be sure to include any sources of co-funding and the amount of each co-funding source in the application. **Applicants are cautioned that the project life period (as determined by Program requirements) used in calculating emissions reductions will be used to determine the length of the data reporting obligation. For example, a project that uses a five year life for the emissions reduction calculations will require the grantee to sign a five year contract, and operate the equipment/vehicle for the full five years, including tracking and reporting activity.**

Applicants are not required to calculate the project's cost-effectiveness. AQMD will perform these calculations and rank all projects according to Program Guidelines.

APPLICATION SUBMISSION

All applications must be submitted according to specifications set forth herein. Failure to adhere to these specifications may be cause for rejection of the application without evaluation.

Application Forms: For each project, all application forms must be completed and submitted with other required documents (i.e., Certifications and Representations) discussed below and in the corresponding appendixes.

Application Statement: Appendix F of this PA consists of two forms that must be completed and returned with the application.

Certifications and Representations: Appendix G of this PA consists of five forms that must be completed and returned with the application.

Due Date - The applicant shall submit **three (3) complete copies of the application** in a sealed envelope, plainly marked in the upper left-hand corner with the name and address of the applicant and the words "**Program Announcement PA #2011-11**". All proposals/applications shall be submitted in an environmentally friendly format: stapled, not bound, black and white print; no three-ring, spiral, or plastic binders, and no card stock or colored paper. All applications must be received by no later than **1:00 p.m., on Friday, April 29, 2011**. Postmarks are not accepted as proof of deadline compliance. **Faxed or e-mailed proposals will not be accepted.** Proposals must be directed to:

Procurement Unit
South Coast Air Quality Management District
21865 Copley Drive
Diamond Bar, CA 91765

Any correction or resubmission done by the applicant will not extend the submittal due date.

Grounds for Rejection – An application may be immediately rejected if:

- It is not prepared in the format described.
- It is not signed by the equipment owner (or duly authorized individual representing the firm).
- Does not include DMV registration information, mileage supporting documents, Contractor Statement Forms and other forms required in this PA.

Missing Information – AQMD is not required to contact the applicant to obtain missing application information. It is the responsibility of the applicant to ensure all required application information is submitted to AQMD by the application deadline.

Disposition of Proposals - The AQMD reserves the right to reject any or all proposals/applications. All responses become the property of the AQMD. One copy of the proposal shall be retained for AQMD files. Additional copies and materials will be returned only if requested and at the applicant's expense.

Modification or Withdrawal - Once submitted, the proposal/application cannot be altered without the prior written consent of AQMD. All proposals shall constitute firm offers and may not be withdrawn for a period of ninety (90) days following the last day to accept proposals.

After the solicitation period closes, you are limited in what you can change in your application because some changes would affect the project's competitive ranking. You may choose to buy a truck with an engine that has a cleaner engine emission level than when you applied, but you will still only be eligible for the funding level you originally selected. For example, if you select Option 1, you can use Program funds to purchase a cleaner truck with a 0.50 or 0.20 g/bhp-hr NOx engine, but you will not receive any additional grant funds. In addition, you cannot choose an emission level that is dirtier than the one you selected when you applied. For example, if you choose Option 3, you cannot use Program funds to purchase a truck with a 0.50 or 1.20 g/bhp-hr NOx engine.

SECTION IV – APPENDICES AND OTHER INFORMATION

Appendix A: Application Forms for Heavy-Duty Diesel Truck Replacement Projects

Appendix B: Application Forms for Heavy-Duty Diesel Truck Retrofit Projects

Appendix C: Application Form for Heavy-Duty Diesel Truck Repower

Appendix D: Application Form for Three-Way Truck Transaction

Appendix E: Application Form for Electrification Infrastructure at a Truck Stop or Distribution Center

Appendix F: Application Statement (required to be submitted with each application)

Appendix G: Certifications and Representations (required to be submitted with each application)



**APPENDIX A – APPLICATION
FOR
HEAVY-DUTY DIESEL TRUCK REPLACEMENT
AQMD PROGRAM ANNOUNCEMENT
PA #2011-11(REVISED)**

Instructions:
<ul style="list-style-type: none"> ✓ Read the SCAQMD Program Announcement PA #2011-11 for instructions and additional important information. ✓ Fill in all applicable sections with ink. Please print legibly (Be sure to complete Appendix F – Application Statement and Appendix G – Certifications and Representations). ✓ Return three (3) hard copies to: <div style="text-align: center; padding-left: 40px;"> Procurement Unit South Coast Air Quality Management District 21865 East Copley Drive Diamond Bar, CA 91765 </div>
DEADLINE: Received at SCAQMD by Friday, April 29, 2011 at 1:00PM (no exceptions)

SECTION 1 – GENERAL INFORMATION (PLEASES PRINT OR TYPE)

ORGANIZATION INFORMATION		
1. Applicant Name, Business, or Company (as it appears on Form W-9):		
2. Address:		
3. City:	4. State:	5. Zip Code:
6. Mailing Address (if different from above):		
7. City:	8. State:	9. Zip Code:
10. Number of Vehicles to be replaced:		
11. Have you applied for any other grant programs? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain and provide name(s) of the agency:		
BUSINESS INFORMATION		
12. Fleet Size (Include Trucks > 14,000 lbs. GVWR only):	13. Number of Employees:	
PRIMARY CONTRACT INFORMATION		
14. First and Last Name:		15. Contact Title:
16. Phone Number:	17. Fax Number:	
18. Alternate Contact Number:	19. Email:	
20. Vehicle Registered Owner :		
21. Person with Equipment Signing Authority:		

(THE INFORMATION BELOW IS REQUIRED FOR EACH PIECE OF EQUIPMENT.
FOR MULTIPLE UNITS YOU MAY PROVIDE AN EXCEL SPREADSHEET CONTAINING THE REQUIRED INFORMATION)

SECTION 2 – CURRENT EQUIPMENT AND ACTIVITY INFORMATION *

CURRENT VEHICLE		
1. Vehicle Number:	2. Vehicle Make:	3. Vehicle Model:
4. Vehicle Model Year:	5. Vehicle GVWR:	
6. Vehicle Identification Number (VIN):	7. License Plate Number:	
8. Vehicle Axle Configuration: <input type="checkbox"/> 2 Axle <input type="checkbox"/> 3 Axle	9. Odometer Reading:	10. Hubodometer Reading (if applicable):
CURRENT VEHICLE ENGINE		
11. Engine Make:	12. Engine Model:	
13. Engine Model Year:	14. Horsepower Rating:	
15. Engine Serial Number:	16. Fuel Type:	
17. Engine Family Number (if applicable):		
18. Is the Vehicle Used Seasonally? __No. __Yes	19. Miles Traveled: 2009 _____ miles ____% in California 2010 _____ miles ____% in California	Power Take Off (if applicable) 2009 _____ hours ____% in CA 2010 _____ hours ____% in CA
20. Vehicle Vocation(s): <input type="checkbox"/> Check this box if the existing truck is a Drayage Truck. Drayage trucks include Port trucks and rail yard trucks as defined on Page 8 of this PA.		
21. % Use in the four California trade corridors: Bay Area: _____% Central Valley: _____% LA/Inland Empire: _____% San Diego/Border Region: _____% Total: _____% (not to exceed 100%) Estimated percentage of annual miles that were in the counties of Los Angeles, Orange, Riverside and/or San Bernardino _____%		
22. Does the existing truck have a diesel particulate filter installed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list the CARB verified Level of PM emission control (Level 1, 2, or 3): _____ Diesel filter installation date: _____ Any grant funds received for the installation: <input type="checkbox"/> Yes <input type="checkbox"/> No		

* For applicants selecting the 2 for 1 project option (as described on Page 10 of this PA), Section 2 will need to be completed for each of the two old trucks involved in the 2 for 1 project.

THE FOLLOWING DOCUMENTS ARE REQUIRED TO BE SUBMITTED WITH THE APPLICATION:

- o Copy of DMV Registration information, including:
- o Current registration - March or April 2011.
- o Past 2-year registration - Provide copies of DMV registration for last 24 months (California Base-plated or International Registration Plan (IRP) are acceptable.)
- o If 2-year registration records are not available, then the applicant must provide a DMV printout showing the registration history or a minimum of 8 months registration supplemented by alternative documentation (e.g., proof of insurance, shipment records, or fuel consumption records) that establishes a pattern of California operation over the last 2 years.
- o Copy of Title to show proof of ownership (if available)
- o Vocation Letter (specifying the types of goods that you haul and where you haul these goods.)

- Provide documentation of annual miles traveled over past 2 years (e.g., maintenance or inspection records with odometer readings, shipment logs, fuel receipts with vehicle identification, etc)
- CARB Executive Order documenting the certified emissions level of the new truck engine, equipment, repower engine, or retrofit device (if available).
- Price quote for the new replacement truck, equipment or retrofit device.
- For concrete mixer trucks, dump trucks, and other truck types specifically identified by ARB staff, the owner may provide the Power Take Off (PTO) hours in conjunction with VMT:
- Documentation from the hour meter unit is required.
- PTO hours will be converted to miles based on factors supplied by ARB and combined with VMT in the calculation of emission reductions and cost-effectiveness.

(THE INFORMATION BELOW IS REQUIRED FOR EACH PIECE OF EQUIPMENT.
FOR MULTIPLE UNITS YOU MAY PROVIDE AN EXCEL SPREADSHEET CONTAINING THE REQUIRED INFORMATION)

SECTION 3 – REPLACEMENT VEHICLE INFORMATION

REPLACEMENT VEHICLE		
1. Vehicle Make (if known):		2. Vehicle Model (if known):
3. Vehicle Model Year:		4. Vehicle GVWR *:
REPLACEMENT VEHICLE ENGINE		
5. Engine Make (if known):		6. Engine Model (if known):
7. Engine Model Year:		8. Horsepower Rating (if known):
9. Fuel Type: <input type="checkbox"/> Diesel <input type="checkbox"/> LNG <input type="checkbox"/> CNG <input type="checkbox"/> Hybrid <input type="checkbox"/> Electric		
10. Engine Family Number (if known):		
REPLACEMENT VEHICLE ACTIVITIES		
11. Will the new replacement truck be operated for 90% or 100% of the time in CA? <input type="checkbox"/> 90% <input type="checkbox"/> 100% <input type="checkbox"/> Other, _____(if replacement vehicle operates less than 90% in CA the vehicle is ineligible for funding)		
12. % Use in the four California trade corridors: Bay Area: _____% Central Valley: _____% LA/Inland Empire: _____% San Diego/Border Region: _____%		
Total: _____% (not to exceed 100%)		
Estimated percentage of annual miles that were in the counties of Los Angeles, Orange, Riverside and/or San Bernardino _____%		
REPLACEMENT VEHICLE DEALER INFORMATION		
1. Vehicle Dealer Name:		
2. Address:		
3. City:	4. State:	5. Zip Code:
6. Contact Name:		7. Contact Title
8. Phone Number:		9. Fax Number:
10. Email:		

* The replacement vehicle must be the same class as the old truck; no downgrade or upgrade in weight classification is allowed.

Note: The replacement truck must have less than 500,000 miles for Class 8 truck and 250,000 miles for Class 7 truck with odometer verification at the time of post inspection by AQMD.

PROJECT FUNDING

1. Program Funding Requested:

Drayage Trucks:

- \$50,000 (Program Limit) - Replacement of a Class 8 truck with an engine that meets or exceeds MY2010 emissions (≤ 0.20 g/bhp-hr NOx).
- Other (Class 8 truck), specify amount of funding request: \$_____
- \$30,000 (Program Limit) - replacement of a Class 7 truck with an engine that meet or exceeds MY 2010 emissions (≤ 0.20 g/bhp-hr NOx).
- Other (Class 7 truck), specify amount of funding request: \$_____

Other Trucks:

Class 8 Truck

Check one	Options	NOx Emission Certification	Funding Request (\$)
	1	Meets or exceeds 2010 Engine Standard (≤ 0.20 g/bhp-hr)	<input type="checkbox"/> \$60,000 (Program Limit) <input type="checkbox"/> OTHER: _____
	2	Meets or exceeds optional 2007 Engine Standard (≤ 0.50 g/bhp-hr)	<input type="checkbox"/> \$50,000 (Program Limit) <input type="checkbox"/> OTHER: _____
	3	Meets or exceeds 2007 Engine Standard (≤ 1.20 g/bhp-hr)	<input type="checkbox"/> \$40,000 (Program Limit) <input type="checkbox"/> OTHER: _____

Class 7 Truck

Check one	Options	NOx Emission Certification	Funding Request (\$)
	1	Meets or exceeds 2010 Engine Standard (≤ 0.20 g/bhp-hr)	<input type="checkbox"/> \$40,000 (Program Limit) <input type="checkbox"/> OTHER: _____
	2	Meets or exceeds optional 2007 Engine Standard (≤ 0.50 g/bhp-hr)	<input type="checkbox"/> \$30,000 (Program Limit) <input type="checkbox"/> OTHER: _____
	3	Meets or exceeds 2007 Engine Standard (≤ 1.20 g/bhp-hr)	<input type="checkbox"/> \$25,000 (Program Limit) <input type="checkbox"/> OTHER: _____

- 2 for 1 replacement project (Complete A-2 for each old truck and select a project funding option in the above table for the replacement truck).

2. Source(s) and amount of other funding (private, local, other State, Federal):

3. Purchasing Vehicle with a Lease to Own Program*: No Yes

4. Name of Lease to Own Program (if applicable):

5. Lessor Company Name:

6. Lessor Primary Contact Name and Phone number:

7. Lessor Address:

8. Total project cost including Program and non-Program dollars:

9. Indicate if you are requesting: Direct payment to vendor Reimbursement

10. Interested in Loan Assistance Program: Yes No

* Lease-To-Own (LTO) program must conform to all requirements listed in the Program Guidelines, Chapter IV.A.13. LTO application must be signed and submitted by the owner of the old truck. The applicant must be the legal owner of the old truck at the time of application and must participate in the LTO program as either the lessor or lessee.

APPLICATION PACKET CHECKLIST

- Completed Application, especially Vehicle Identification Number (VIN), Truck Model Year, and Engine Model Year.
- Complete Appendix F and G.
- ARB Executive Order (EO) for the new engine's verified emissions (if available).
- Copy of Vehicle Title(s) (if available).
- Copy of current DMV registration.
- Copy of DMV registration for past 2 years. If 2-year registration records are not available, then the applicant must provide a DMV Printout showing the registration history or a minimum of 8 months of registration supplemented by alternative documentation (proof of insurance, shipment records, or fuel consumption records) that establishes a pattern of California operation over the last 2 years.
- Dealer price quote for new replacement truck.
- Vocation letter (provide a description of type of goods you haul and where you haul these goods. For example, agricultural, aggregates bulk or break bulk, building or construction materials, concrete mixer trucks, dairy, metals, poultry, wood or paper products, restaurant, grocery, or other).
- Documentation of annual miles traveled for the past two years. Examples of documentation include: maintenance or inspection records with odometer reading, shipment logs, fuel receipts with vehicle identification, etc.
- Verification of GVWR rating for trucks that are 2 axle or less by providing pictures of the engine tag or manufacturer's specification plate with truck VIN listed.



For additional assistance please contact:
Mei Wang
Technology Advancement Office
South Coast Air Quality Management District
(909) 396-3257
mwang@aqmd.gov



**APPENDIX B – APPLICATION FORM
FOR
HEAVY-DUTY DIESEL TRUCK RETROFIT
AQMD PROGRAM ANNOUNCEMENT
PA #2011-11(REVISED)**

Instructions:
<ul style="list-style-type: none"> ✓ Read the SCAQMD Program Announcement PA #2011-11 for instructions and additional important information. ✓ Fill in all applicable sections with ink. Please print legibly (Be sure to complete Appendix F - Application Statement and Appendix G – Certifications and Representations). ✓ Return three (3) hard copies to: <div style="text-align: center; margin-left: 40px;"> Procurement Unit South Coast Air Quality Management District 21865 East Copley Drive Diamond Bar, CA 91765 </div>
DEADLINE: Received at SCAQMD by Friday, April 29, 2011 at 1:00PM (no exceptions)



SECTION 1 – GENERAL INFORMATION (PLEASES PRINT OR TYPE)

ORGANIZATION INFORMATION		
1. Applicant Name, Business, or Company (as it appears on Form W-9):		
2. Address:		
3. City:	4. State:	5. Zip Code:
6. Mailing Address (if different from above):		
7. City:	8. State:	9. Zip Code:
10. Number of Vehicles to be Retrofitted:		
11. Have you applied for any other grant programs? <input type="checkbox"/> yes <input type="checkbox"/> No If yes, please explain and provide name(s) of the agency:		
BUSINESS INFORMATION		
12. Fleet Size (Include Trucks > 14,000 lbs GVWR only):	13. Number of Employees:	
PRIMARY CONTRACT INFORMATION		
14. First and Last Name:		15. Contact Title:
16. Phone Number:	17. Fax Number:	
18. Alternate Contact Number:	19. Email:	
20. Vehicle Registered Owner:		
21. Person with Equipment Signing Authority:		

(THE INFORMATION BELOW IS REQUIRED FOR EACH PIECE OF EQUIPMENT.
FOR MULTIPLE UNITS YOU MAY PROVIDE AN EXCEL SPREADSHEET CONTAINING THE REQUIRED INFORMATION)

SECTION 2 – CURRENT EQUIPMENT AND ACTIVITY INFORMATION

CURRENT VEHICLE		
1. Vehicle Number:	2. Vehicle Make:	3. Vehicle Model:
4. Vehicle Model Year:	5. Vehicle GVWR:	
6. Vehicle Identification Number (VIN):	7. License Plate Number:	
8. Vehicle Axle Configuration: <input type="checkbox"/> 2 Axle <input type="checkbox"/> 3 Axle	9. Odometer Reading:	10. Hubodometer Reading (if applicable):
CURRENT VEHICLE ENGINE		
11. Engine Make:	12. Engine Model:	
13. Engine Model Year:	14. Horsepower Rating:	
15. Engine Serial Number:	16. Fuel Type:	
17. Engine Family Number (if applicable):		
18. Is the Vehicle Used Seasonally? __No. __Yes	19. Miles Traveled: 2009 _____ miles ____% in California 2010 _____ miles ____% in California	Power Take Off (if applicable) 2009 _____ hours ____% in CA 2010 _____ hours ____% in CA
20. Vehicle Vocation(s): <input type="checkbox"/> Check this box if the existing truck is a drayage truck. Drayage trucks include Port trucks and rail yard trucks as defined on Page 8 of this PA. Drayage trucks are not eligible for retrofit funding.		
21. % Use in the four California trade corridors: Bay Area: _____% Central Valley: _____% LA/Inland Empire: _____% San Diego/Border Region: _____% Total: _____% (not to exceed 100%) Estimated percentage of annual miles that were in the counties of Los Angeles, Orange, Riverside and/or San Bernardino _____%		
22. Does the existing truck have a diesel particulate filter installed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list the CARB verified Level of PM emission control (Level 1, 2, or 3): _____ Diesel filter installation date: _____ Any grant funds received for the installation: <input type="checkbox"/> Yes <input type="checkbox"/> No		

THE FOLLOWING DOCUMENTS ARE REQUIRED TO BE SUBMITTED WITH THE APPLICATION:

- Copy of DMV Registration information, including:
- Current registration - March or April 2011.
- Past 2-year registration - Provide copies of DMV registration for last 24 months (California Base-plated or International Registration Plan (IRP) are acceptable.) If 2-year registration records are not available, then the applicant must provide a DMV printout showing the registration history or a minimum of 8 months registration supplemented by alternative documentation (e.g., proof of insurance, shipment records, or fuel consumption records) that establishes a pattern of California operation over the last 2 years.
- Copy of Title to show proof of ownership (if available).
- Vocation Letter (specifying the types of goods that you haul and where you haul these goods.)
- Provide documentation of annual miles traveled over past 2 years (e.g., maintenance or inspection records with odometer readings, shipment logs, fuel receipts with vehicle identification, etc)
- CARB Executive Order documenting the certified emissions level of the new truck engine, equipment, repower engine, or retrofit device (if available).
- Price quote for the new replacement truck, equipment or retrofit device.

(THE INFORMATION BELOW IS REQUIRED FOR EACH PIECE OF EQUIPMENT.
FOR MULTIPLE UNITS YOU MAY PROVIDE AN EXCEL SPREADSHEET CONTAINING THE REQUIRED INFORMATION)

SECTION 3 – RETROFIT DEVICE INFORMATION

RETROFIT DEVICE		
1. Name of the device and device manufacture (if known):		
2. ARB Executive Order Number for the device (if known):		
RETROFITTED VEHICLE ACTIVITIES		
3. Will the retrofitted truck be operated for 90% or 100% of the time in CA? <input type="checkbox"/> 90% <input type="checkbox"/> 100% <input type="checkbox"/> Other, _____ (if retrofitted vehicle operates less than 90% in CA the vehicle is ineligible for funding)		
4. % Use in the four California trade corridors: Bay Area: _____% Central Valley: _____% LA/Inland Empire: _____% San Diego/Border Region: _____% Total: _____% (not to exceed 100%) Estimated percentage of annual miles that were in the counties of Los Angeles, Orange, Riverside and/or San Bernardino _____%		
RETROFIT COMPANY INFORMATION		
5. Retrofit Company Name:		
6. Address:		
7. City:	8. State:	9. Zip Code:
10. Contact Name:	11. Contact Title	
12. Phone Number:	13. Fax Number:	
14. Email:		
PROJECT FUNDING		
15. Program Funding Requested: <input type="checkbox"/> \$5,000 (Program Limit) with a 2 year contract or <input type="checkbox"/> OTHER : _____ <input type="checkbox"/> \$10,000(Program Limit) with a 4 year contract or <input type="checkbox"/> OTHER : _____		
16. Source(s) and amount of other funding (private, local, other State, Federal):		
17. Total project cost including Program and non-Program dollars:		
18. Indicate if you are requesting: <input type="checkbox"/> Direct payment to vendor <input type="checkbox"/> Reimbursement		
19. Interested in Loan Assistance Program: <input type="checkbox"/> Yes <input type="checkbox"/> No		

APPLICATION PACKET CHECKLIST

- Completed **Application** especially **Vehicle Identification Number (VIN), Truck Model Year, and Engine Model Year**.
- Complete **Appendix F** and **G**.
- **ARB Executive Order (EO)** for the retrofit device (if available).
- Copy of **Vehicle Title(s)** (if available).
- Copy of current **DMV registration**.
- Copy of DMV registration for past 2 years. If 2-year registration records are not available, then the applicant must provide a DMV Printout showing the registration history or a minimum of 8 months of registration supplemented by alternative documentation (proof of insurance, shipment records, or fuel consumption records) that establishes a pattern of California operation over the last 2 years.
- **Price quote** for the device(s).
- **Vocation letter** (provide a description of type of goods you haul and where you haul these goods. For example, agricultural, aggregates bulk or break bulk, building or construction materials, concrete mixer trucks, dairy, metals, poultry, wood or paper products, restaurant, grocery, or other).
- Documentation of annual miles traveled for the past two years. Examples of documentation include: maintenance or inspection records with odometer reading, shipment logs, fuel receipts with vehicle identification, etc.
- Verification of **GVWR rating** for trucks that are 2 axle or less by providing pictures of the engine tag or manufacturer's specification plate with truck VIN listed.



For additional assistance please contact:
Mei Wang,
Technology Advancement Office
South Coast Air Quality Management District
(909) 396-3257
mwang@aqmd.gov



**APPENDIX C – APPLICATION FORM
FOR
HEAVY-DUTY DIESEL TRUCK REPOWER
AQMD PROGRAM ANNOUNCEMENT
PA #2011-11(REVISED)**

Instructions:
<ul style="list-style-type: none"> ✓ Read the SCAQMD Program Announcement PA #2011-11 for instructions and additional important information. ✓ Fill in all applicable sections with ink. Please print legibly (Be sure to complete Appendix F - Application Statement and Appendix G – Certifications and Representations). ✓ Return three (3) hard copies to: <div style="text-align: center; padding-left: 40px;"> Procurement Unit South Coast Air Quality Management District 21865 East Copley Drive Diamond Bar, CA 91765 </div>
DEADLINE: Received at SCAQMD by Friday, April 29, 2011 at 1:00PM (no exceptions)



SECTION 1 – GENERAL INFORMATION (PLEASES PRINT OR TYPE)

ORGANIZATION INFORMATION		
1. Applicant Name, Business, or Company (as it appears on Form W-9):		
2. Address:		
3. City:	4. State:	5. Zip Code:
6. Mailing Address (if different from above):		
7. City:	8. State:	9. Zip Code:
10. Number of Vehicles to be Repowered:		
11. Have you applied for any other grant programs? <input type="checkbox"/> yes <input type="checkbox"/> No If yes, please explain and provide name(s) of the agency:		
BUSINESS INFORMATION		
12. Fleet Size (Include trucks > 14,000 lbs GVWR only):	13. Number of Employees:	
PRIMARY CONTRACT INFORMATION		
14. First and Last Name:		15. Contact Title:
16. Phone Number:	17. Fax Number:	
18. Alternate Contact Number:	19. Email:	
20. Vehicle Registered Owner :		
21. Person with Equipment signing Authority:		

(THE INFORMATION BELOW IS REQUIRED FOR EACH PIECE OF EQUIPMENT.

FOR MULTIPLE UNITS YOU MAY PROVIDE AN EXCEL SPREADSHEET CONTAINING THE REQUIRED INFORMATION)

SECTION 2 – CURRENT EQUIPMENT AND ACTIVITY INFORMATION

CURRENT VEHICLE		
1. Vehicle Number:	2. Vehicle Make:	3. Vehicle Model:
4. Vehicle Model Year:	5. Vehicle GVWR:	
6. Vehicle Identification Number (VIN):	7. License Plate Number:	
8. Vehicle Axle Configuration: <input type="checkbox"/> 2 Axle <input type="checkbox"/> 3 Axle	9. Odometer Reading:	10. Hubodometer Reading: (if applicable)
CURRENT VEHICLE ENGINE		
11. Engine Make:	12. Engine Model:	
13. Engine Model Year:	14. Horsepower Rating:	
15. Engine Serial Number:	16. Fuel Type:	
17. Engine Family Number (if applicable):		
18. Is the Vehicle Used Seasonally? __No. __Yes	19. Miles Traveled: 2009 _____ miles ____% in California 2010 _____ miles ____% in California	Power Take Off (if applicable) 2009 _____ hours ____% in CA 2010 _____ hours ____% in CA
20. Vehicle Vocation(s): <input type="checkbox"/> Check this box if the existing truck is a drayage truck. Drayage trucks include Port truck and rail yard trucks as defined on page 8 of this PA.		
21. % Use in The four California trade corridors: Bay Area: ____% Central Valley: ____% LA/Inland Empire: ____% San Diego/Border Region: ____% Total: ____% (not to exceed 100%) Estimated percentage of annual miles that were in the counties of Los Angeles, Orange, Riverside and/or San Bernardino ____%		
22. Does the existing truck have a diesel filter installed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list the CARB verified Level of PM emission control (Level 1, 2, or 3): _____ Diesel filter installation Date: _____ Any grant funds received for the installation: <input type="checkbox"/> Yes <input type="checkbox"/> No		

THE FOLLOWING DOCUMENTS ARE REQUIRED TO BE SUBMITTED WITH THE APPLICATION:

- Copy of DMV Registration information, including:
- Current registration - March or April 2011.
- Past 2-year registration - Provide copies of DMV registration for last 24 months (California Base-plated or International Registration Plan (IRP) are acceptable).
- If 2-year registration records are not available, then the applicant must provide a DMV printout showing the registration history or a minimum of 8 months registration supplemented by alternative documentation (e.g., proof of insurance, shipment records, or fuel consumption records) that establishes a pattern of California operation over the last 2 years.
- Copy of Title to show proof of ownership (if available).
- Vocation Letter (specifying the types of goods that you haul and where you haul these goods).
- Provide documentation of annual miles traveled over past 2 years (e.g., maintenance or inspection records with odometer readings, shipment logs, fuel receipts with vehicle identification, etc).
- CARB Executive Order documenting the certified emissions level of the new truck engine, equipment, repower engine, or retrofit device (if available).
- Price quote for the new replacement truck, equipment or retrofit device.
- Documentation of all engine/truck modifications planned as part of the repower project. Include description of upgrades to such thing as exhaust system, electronics, etc.

(THE INFORMATION BELOW IS REQUIRED FOR EACH PIECE OF EQUIPMENT.
FOR MULTIPLE UNITS YOU MAY PROVIDE AN EXCEL SPREADSHEET CONTAINING THE REQUIRED INFORMATION)

SECTION 3 – REPLACEMENT ENGINE INFORMATION

REPLACEMENT ENGINE		
1. Engine Make:		2. Engine Model:
3. Engine Model Year:		4. Horsepower Rating:
5. Engine Serial Number:		6. Fuel Type: <input type="checkbox"/> Diesel <input type="checkbox"/> LNG <input type="checkbox"/> CNG <input type="checkbox"/> Hybrid <input type="checkbox"/> Electric
7. Engine Family Number (if applicable):		
REPLACEMENT VEHICLE ACTIVITIES		
8. Will the new replacement truck be operated for 90% or 100% of the time in CA? <input type="checkbox"/> 90% <input type="checkbox"/> 100% <input type="checkbox"/> Other, _____ (if replacement vehicle operates less than 90% in CA the vehicle is ineligible for funding)		
9. % Use in The four California trade corridors: Bay Area: _____% Central Valley: _____% LA/Inland Empire: _____% San Diego/Border Region: _____%		
Total: _____% (not to exceed 100%)		
Estimated percentage of annual miles that were in the counties of Los Angeles, Orange, Riverside and/or San Bernardino _____%		
RETROFIT COMPANY INFORMATION		
10. Retrofit Company Name:		
11. Address:		
12. City:	13. State:	14. Zip Code:
15. Contact Name:		16. Contact Title
17. Phone Number:		18. Fax Number:
19. Email:		
PROJECT FUNDING		
20. Program Funding Requested: <input type="checkbox"/> \$30,000 (Program Limit) <input type="checkbox"/> OTHER : _____		
21. Source(s) and amount of other funding (private, local, other State, Federal):		
22. Total project cost including Program and non-Program dollars:		
23. Indicate if you are requesting: <input type="checkbox"/> Direct payment to vendor <input type="checkbox"/> Reimbursement		
24. Interested in Loan Assistance Program: <input type="checkbox"/> Yes <input type="checkbox"/> No		

APPLICATION PACKET CHECKLIST

- Completed **Application** especially **Vehicle VIN Number, Truck Model Year, Engine Model Year**.
- Complete **Appendix F** and **G**.
- ARB **Executive Order (EO)** for the equipment (if available).
- Copy of **Vehicle Title(s)** (if available).
- Copy of current **DMV registration**.
- Copy of DMV registration for past 2 years. If 2-year registration records are not available, then the applicant must provide a DMV Printout showing the registration history or a minimum of 8 months of registration supplemented by alternative documentation (proof of insurance, shipment records, or fuel consumption records) that establishes a pattern of California operation over the last 2 years.
- **Price quote** for the equipment.
- **Vocation letter** (Provide a description of type of goods you haul and where you haul these goods. For example, agricultural, aggregates bulk or break bulk, building or construction materials, concrete mixer trucks, dairy, metals, poultry, wood or paper products, restaurant, grocery, or other).
- Documentation of annual miles traveled for the past two years. Examples of documentation include: maintenance or inspection records with odometer reading, shipment logs, fuel receipts with vehicle identification, etc.
- Documentation of all engine/truck modifications planned as part of the repower project. Include description of upgrades to such things as exhaust systems, electronics, etc.
- Verification of **GVWR rating** for trucks that are 2 axle or less by providing pictures of the engine tag or manufacturer's specification plate with truck VIN listed.



For additional assistance please contact:
Mei Wang,
Technology Advancement Office
South Coast Air Quality Management District
(909) 396-3257
mwang@aqmd.gov



**APPENDIX D – APPLICATION FORM
FOR
THREE-WAY TRUCK TRANSACTION
AQMD PROGRAM ANNOUNCEMENT
PA #2011-11(REVISED)**

Instructions:
<ul style="list-style-type: none"> ✓ Read the SCAQMD Program Announcement PA #2011-11 for instructions and additional important information. ✓ Fill in all applicable sections with ink. Please print legibly (Be sure to complete Appendix F - Application Statement and Appendix G – Certifications and Representations). ✓ Return three (3) hard copies to: <div style="text-align: center; margin-left: 40px;"> Procurement Unit South Coast Air Quality Management District 21865 East Copley Drive Diamond Bar, CA 91765 </div>
DEADLINE: Received at SCAQMD by Friday, April 29, 2011 at 1:00PM (no exceptions)



SECTION 1 – GENERAL INFORMATION (PLEASES PRINT OR TYPE)

ORGANIZATION INFORMATION		
1. Applicant Name, Business, or Company (as it appears on Form W-9):		
2. Address:		
3. City:	4. State:	5. Zip Code:
6. Mailing Address (if different from above):		
7. City:	8. State:	9. Zip Code:
10. Number of Vehicles to participate in 3-Way Truck Transaction:		
11. Have you applied for any other grant program? <input type="checkbox"/> yes <input type="checkbox"/> No If yes, please explain and provide name of the agency:		
BUSINESS INFORMATION		
12. Fleet Size (Include trucks > 14,000 lbs GVWR only):	13. Number of Employees:	
PRIMARY CONTRACT INFORMATION		
14. First and Last Name:		15. Contact Title:
16. Phone Number:	17. Fax Number:	
18. Alternate Contact Number:	19. Email:	
20. Vehicle Registered Owner :		
21. Person with Equipment signing Authority:		

(THE INFORMATION BELOW IS REQUIRED FOR EACH PIECE OF EQUIPMENT.
FOR MULTIPLE UNITS YOU MAY PROVIDE AN EXCEL SPREADSHEET CONTAINING THE REQUIRED INFORMATION)

SECTION 2 – CURRENT EQUIPMENT AND ACTIVITY INFORMATION

TRUCK A: MY1998-2006 HEAVY DUTY DIESEL TRUCK (TO BE RETROFITTED)

Current Vehicle		
1. Vehicle Number:	2. Vehicle Make:	3. Vehicle Model:
4. Vehicle Model Year:		5. Vehicle GVWR:
6. Vehicle Identification Number (VIN):		7. License Plate Number:
8. Vehicle Axle Configuration: <input type="checkbox"/> 2 Axle <input type="checkbox"/> 3 Axle		9. Odometer Reading:
		10. Hubodometer Reading (if applicable):
Current Vehicle Engine		
11. Engine Make:		12. Engine Model:
13. Engine Model Year:		14. Horsepower Rating:
15. Engine Serial Number:		16. Fuel Type:
17. Engine Family Number (if applicable):		
18. Is the Vehicle Used Seasonally? __No __Yes	19. Miles Traveled: 2009 _____ miles _____% in California 2010 _____ miles _____% in California	Power Take Off (if applicable) 2009 _____ hours _____% in CA 2010 _____ hours _____% in CA
20. Vehicle Vocation(s): <input type="checkbox"/> Check this box if the existing truck is a drayage truck. Drayage trucks include Port trucks and rail yard trucks as defined on Page 8 of this PA.		
21. % Use in the four California trade corridors: Bay Area: _____% Central Valley: _____% LA/Inland Empire: _____% San Diego/Border Region: _____% Total: _____% (not to exceed 100%) Estimated percentage of annual miles that were in the counties of Los Angeles, Orange, Riverside and/or San Bernardino _____%		

TRUCK B: MY1993 OR OLDER HEAVY DUTY DIESEL TRUCK (TO BE REPLACED AND SCRAPPED)

Current Vehicle		
1. Vehicle Number:	2. Vehicle Make:	3. Vehicle Model:
4. Vehicle Model Year:		5. Vehicle GVWR:
6. Vehicle Identification Number (VIN):		7. License Plate Number:
8. Vehicle Axle Configuration: <input type="checkbox"/> 2 Axle <input type="checkbox"/> 3 Axle		9. Odometer Reading:
		10. Hubodometer Reading (if applicable):
Current Vehicle Engine		
11. Engine Make:		12. Engine Model:
13. Engine Model Year:		14. Horsepower Rating:
15. Engine Serial Number:		16. Fuel Type:
17. Engine Family Number (if applicable):		
18. Is the Vehicle Used Seasonally? __No. __Yes	19. Miles Traveled: 2009 _____ miles ____% in California 2010 _____ miles ____% in California	Power Take Off (if applicable) 2009 _____ hours ____% in CA 2010 _____ hours ____% in CA
20. Vehicle Vocation(s): <input type="checkbox"/> Check this box if the existing truck is a drayage truck. Drayage trucks include Port trucks and rail yard truck as defined on page 8 of this PA.		
21. % Use in The four California trade corridors: Bay Area: ____% Central Valley: ____% LA/Inland Empire: ____% San Diego/Border Region: ____%		
Total: ____% (not to exceed 100%)		
Estimated percentage of annual miles that were in the counties of Los Angeles, Orange, Riverside and/or San Bernardino ____%		

THE FOLLOWING DOCUMENTS ARE REQUIRED TO BE SUBMITTED WITH THE APPLICATION:

- Copy of DMV Registration information, including:
- Current registration - March or April 2011.
- Past 2-year registration - Provide copies of DMV registration for last 24 months (California Base-plated or International Registration Plan (IRP) are acceptable).
- If 2-year registration records are not available, then the applicant must provide a DMV printout showing the registration history or a minimum of 8 months registration supplemented by alternative documentation (e.g., proof of insurance, shipment records, or fuel consumption records) that establishes a pattern of California operation over the last 2 years.
- Copy of Title to show proof of ownership (if available).
- Vocation Letter (specifying the types of goods that you haul and where you haul these goods).
- Provide documentation of annual miles traveled over past 2 years (e.g., maintenance or inspection records with odometer readings, shipment logs, fuel receipts with vehicle identification, etc).
- CARB Executive Order documenting the certified emissions level of the new truck engine, equipment, repower engine, or retrofit device (if available).
- Price quote for the new replacement truck, equipment or retrofit device.

(THE INFORMATION BELOW IS REQUIRED FOR EACH PIECE OF EQUIPMENT.
FOR MULTIPLE UNITS YOU MAY PROVIDE AN EXCEL SPREADSHEET CONTAINING THE REQUIRED INFORMATION)

SECTION 3 – RETROFIT DEVICE INFORMATION FOR TRUCK A

RETROFIT DEVICE		
1. Name of the Device and Device manufacture (if known):		
2. ARB Executive Order Number for the device (if known):		
RETROFITTED VEHICLE ACTIVITIES		
3. % Use in The four California trade corridors: Bay Area: _____% Central Valley: _____% LA/Inland Empire: _____% San Diego/Border Region: _____%		
Total: _____% (not to exceed 100%)		
Estimated percentage of annual miles that were in the counties of Los Angeles, Orange, Riverside and/or San Bernardino _____%		
RETROFIT COMPANY INFORMATION		
4. Retrofit Company Name:		
5. Address:		
6. City:	7. State:	8. Zip Code:
9. Contact Name:		10. Contact Title
11. Phone Number:		12. Fax Number:
13. Email:		
PROJECT FUNDING		
14. Program Funding Requested:		
<input type="checkbox"/> \$5,000 (Program Limit) with a 2 year contract <input type="checkbox"/> OTHER : _____ ❖ This retrofit funding is for "Truck A" only in this project category. If Truck A is a Drayage truck, it is not eligible for this retrofit funding option.		
15. Source(s) and amount of other funding (private, local, other State, Federal):		
16. Total project cost including Program and non-Program dollars:		
17. Indicate if you are requesting: <input type="checkbox"/> Direct payment to vendor <input type="checkbox"/> Reimbursement		
18. Interested in Loan Assistance Program: <input type="checkbox"/> Yes <input type="checkbox"/> No		

SECTION 4- REPLACEMENT VEHICLE INFORMATION FOR TRUCK C

REPLACEMENT VEHICLE		
1. Vehicle Make (if known):		2. Vehicle Model (if known):
3. Vehicle Model Year:		4. Vehicle GVWR:
REPLACEMENT VEHICLE ENGINE		
5. Engine Make(if known):		6. Engine Model(if known):
7. Engine Model Year:		8. Horsepower Rating(if known):
9. Fuel Type: <input type="checkbox"/> Diesel <input type="checkbox"/> LNG <input type="checkbox"/> CNG <input type="checkbox"/> Hybrid <input type="checkbox"/> Electric		
10. Engine Family Number (if known):		
REPLACEMENT VEHICLE ACTIVITIES		
11. Will the new replacement truck be operated for 90% or 100% of the time in CA? <input type="checkbox"/> 90% <input type="checkbox"/> 100% <input type="checkbox"/> Other, _____ (if replacement vehicle operates less than 90% in CA the vehicle is ineligible for funding)		
12. % Use in The four California trade corridors: Bay Area: _____% Central Valley: _____% LA/Inland Empire: _____% San Diego/Border Region: _____% Total: _____% (not to exceed 100%) Estimated percentage of annual miles that were in the counties of Los Angeles, Orange, Riverside and/or San Bernardino _____%		
REPLACEMENT VEHICLE DEALER INFORMATION		
1. Vehicle Dealer Name:		
2. Address:		
3. City:	4. State:	5. Zip Code:
6. Contact Name:		7. Contact Title
8. Phone Number:		9. Fax Number:
10. Email:		

❖ The replacement truck must have less than 500,000 miles for Class 8 truck and 250,000 miles for Class 7 truck with odometer verification at the post inspection

PROJECT FUNDING

1. Program Funding Requested:

Drayage Trucks:

\$50,000 (Program Limit) - replacement of a Class 8 truck with an engine that meets or exceed MY 2010 emissions (≤ 0.20 g/bhp-hr NOx).

Other: _____

Other Truck:

\$60,000 (Program Limit) - replacement of a Class 8 truck with an engine that meets or exceed MY 2010 emissions (≤ 0.20 g/bhp-hr NOx).

OTHER : _____

\$40,000 (Program Limit) - replacement of a Class 7 truck with an engine that meets or exceeds MY 2010 emissions (≤ 0.20 g/bhp-hr NOx).

OTHER : _____

2. Source(s) and amount of other funding (private, local, other State, Federal):

3. Purchasing Vehicle with a Lease to Own Program*: No Yes

4. Name of Lease to Own Program (if applicable):

5. Lessor Company Name:

6. Lessor Primary Contact Name and Phone number:

7. Lessor Address:

8. Total project cost including Program and non-Program dollars:

9. Indicate if you are requesting: Direct payment to vendor Reimbursement

10. Interested in Loan Assistance Program: Yes No

* Lease-To-Own (LTO) program must conform to all requirements listed in the Program Guidelines, Chapter IV.A.13. LTO application must be signed and submitted by the owner of the old truck. The applicant must be the legal owner of the old truck at the time of application and must participate in the LTO program as either the lessor or lessee.

APPLICATION PACKET CHECKLIST

- Completed **Application** especially **Vehicle VIN Number, Truck Model Year, Engine Model Year**.
- Complete **Appendix F** and **G**.
- **ARB Executive Order (EO)** for the new trucks and retrofit device (if available).
- Copy of **Vehicle Title(s)** (if available).
- Copy of current **DMV registration**.
- Copy of DMV registration for past 2 years. If 2-year registration records are not available, then the applicant must provide a DMV Printout showing the registration history or a minimum of 8 months of registration supplemented by alternative documentation (proof of insurance, shipment records, or fuel consumption records) that establishes a pattern of California operation over the last 2 years.
- **Price quotes** for the new truck and retrofit device.
- **Vocation letter** (provide a description of type of goods you haul and where you haul these goods. For example, agricultural, aggregates bulk or break bulk, building or construction materials, concrete mixer trucks, dairy, metals, poultry, wood or paper products, restaurant, grocery, or other).
- Documentation of annual miles traveled for the past two years. Examples of documentation include: maintenance or inspection records with odometer reading, shipment logs, fuel receipts with vehicle identification, etc.
- Verification of **GVWR rating** for trucks that are 2 axle or less by providing pictures of the engine tag or manufacturer's specification plate with truck VIN listed.



For additional assistance please contact:
Mei Wang,
Technology Advancement Office
South Coast Air Quality Management District
(909) 396-3257
mwang@aqmd.gov



**APPENDIX E – APPLICATION FORM
FOR
TRUCK STOP/DISTRIBUTION CENTER ELECTRIFICATION
AQMD PROGRAM ANNOUNCEMENT
PA #2011-11**

<u>Instructions:</u>
<ul style="list-style-type: none"> ✓ Read the SCAQMD Program Announcement PA #2011-11 for instructions and additional important information. ✓ Fill in all applicable sections with ink. Please print legibly (Be sure to complete Appendix F - Application Statement and Appendix G – Certifications and Representations). ✓ Return three (3) hard copies to: <div style="text-align: center; margin-left: 40px;"> Procurement Unit South Coast Air Quality Management District 21865 East Copley Drive Diamond Bar, CA 91765 </div>
DEADLINE: Received at SCAQMD by Friday, April 29, 2011 at 1:00PM (no exceptions)

SECTION 1 – GENERAL INFORMATION (PLEASES PRINT OR TYPE)

ORGANIZATION INFORMATION		
1. Applicant Name, Business, or Company (as it appears on Form W-9):		
2. Address:		
3. City:	4. State:	5. Zip Code:
6. Mailing Address (if different from above):		
7. City:	8. State:	9. Zip Code:
10. ____ Truck Stop ____ Distribution Center Electrification		
11. Have you applied for any other grant programs? <input type="checkbox"/> yes <input type="checkbox"/> No If yes, please explain and provide name(s) of the agency:		
BUSINESS INFORMATION		
12. Number of Truck Spaces:	13. Number of Docks:	
PRIMARY CONTRACT INFORMATION		
14. First and Last Name:		15. Contact Title:
16. Phone Number:	17. Fax Number:	
18. Alternate Contact Number:	19. Email:	
20. Vehicle Registered Owner		
21. Person with Equipment signing Authority:		

SECTION 2- PROJECT PLAN

Electrification infrastructure information
<ul style="list-style-type: none">• Project description and design, including number and location of electrification units to be installed, with individual and total power requirements:• Vocation of trucks that will use the TSE infrastructure: (Provide a description of type of goods you haul. For example, agricultural, aggregates bulk or break bulk, building or construction materials, concrete mixer trucks, dairy, metals, poultry, wood or paper products, restaurant, grocery, or other).• Equipment vendor(s):• Itemized cost information by phase (e.g., design, environmental, construction):
Predicted activity data with new equipment
<ul style="list-style-type: none">• Estimated annual truck connections to electric power and average connection time:• Estimated annual TRU connections to electrical power and average connection time:• Expected power usage for trucks and TRUs (separately), each year for the first 10 years of operation:
Projected emissions and benefits of the project
<ul style="list-style-type: none">• Emissions with the project over a 10-year period:• Emission reductions attributable to the project (beyond those required by law or regulation) for a 10-year period beginning in the 1st year of operation:• Demonstration that the weighted emission reductions per State dollar invested is equal or better than 0.20 pounds per State dollar:
Equipment project funding demonstration
<ul style="list-style-type: none">• Program dollars requested:• Funding sources and amounts of other funding (private, local, other State, federal):• Total project cost (Program dollars requested plus other match funding):• Documentation of match funding availability:• Interested in Loan Assistance Program: <input type="checkbox"/> Yes <input type="checkbox"/> No

**APPENDIX F – APPLICATION STATEMENT
HEAVY DUTY DIESEL TRUCKS REPLACEMENT PROGRAM
AQMD PROGRAM ANNOUNCEMENT
PA #2011-11**

Please Read and Sign

All information provided in this application will be used by AQMD staff to evaluate the eligibility of this application to receive program funds. AQMD staff reserves the right to request additional information and can deny the application if such requested information is not provided by the requested deadline. Incomplete or illegible applications will be returned to applicant or vendor, without evaluation. An incomplete application is an application that is missing information critical to the evaluation of the project.

- ◆ I certify to the best of my knowledge that the information contained in this application is true and accurate.
- ◆ I understand that, if awarded funding under the Heavy Duty Diesel Trucks Replacement Program, development and submittal of a detailed work statement, with deliverables and schedule is a requirement of the contracting process.
- ◆ I understand that it is my responsibility to ensure that all technologies are either verified or certified by the California Air Resources Board (CARB) to reduce NOx and/or PM pollutants. CARB Verification Letters and/or Executive Orders are attached, as applicable.
- ◆ I understand that there may be conditions placed upon receiving a grant and agree to refund the grant (or pro-rated portion thereof) if it is found that at any time I do not meet those conditions and if directed by the AQMD in accordance with the contract agreement.
- ◆ I understand that, for this equipment, I will be prohibited from applying for any other form of emission reduction credits for Program-funded vehicles/engines, including: Emission Reduction Credit (ERC); Mobile Source Emission Reduction Credit (MSERC) and/or Certificate of Advanced Placement (CAP), for all time, from the AQMD, CARB or any other Air Quality Management or Air Pollution Control District. This prohibition does not include applications for loans and loan guarantees.
- ◆ The proposed project has not been funded and is not being considered for incentive funds by another air district, CARB, or any other public agency.
- ◆ In the event that the vehicle(s)/equipment do not complete the minimum term of any agreement eventually reached from this application, I agree to ensure the equivalent project emissions reductions, or to return grant funds to the AQMD as required by the contract.
- ◆ I have the legal authority to apply for grant funding for the entity described in this application.

- ◆ Disclosure of that value of any current financial incentive that directly reduces the project price, including tax credits or deductions, grants, or other public financial assistance for the same engine is required. To avoid double counting of incentives, all tax credits or deductions, grants, or other public financial assistance must be deducted from the funding request.
- ◆ I understand that third party contracts are not permitted. A third party may, however complete an application on an owner's behalf. Third parties are required to list how much compensation, if any, they are receiving to prepare the application(s), and to certify that no Program funds are being used for this compensation. (see below)
- ◆ I understand that additional project information must be submitted to finalize a contract. This information may be found under Section II: Work Statements/Schedule of Deliverables in the PA.
- ◆ I understand that all vehicles, engines or equipment funded by this program must be operational within a prescribed time from the date of contract execution. I confirm that I know the specific time requirement for the type of project and equipment for which I am applying.
- ◆ I certify that all project match funds (if any) are reasonably available to complete the equipment project according to the proposed time frame.
- ◆ I have initialed this bullet to indicate that there are no potential conflicts of interest with other clients affected by actions performed by the firm on behalf of the AQMD. If this bullet is not initialed, I have attached a description to this application of the potential conflict of interest, which will be screened on a case-by-case basis by the AQMD District Counsel's Office. There is no potential conflict of interest: _____ **(Please Initial if applicable, otherwise attach separate sheet describing the potential conflict)**
- I, the equipment owner, disclose that I have applied for the following other source(s) of funding (if any) for the same equipment project:
 Source of funds: _____
 How much applied for: _____
 What the funding will be used for: _____
- I, the equipment owner, disclose the following value of any existing financial incentive that directly reduces the project cost, including tax credits or deductions, grants, or other public financial assistance, for the same equipment project:
 Value: _____
- I certify that the equipment owner has reviewed the application and that the application information is correct.

- I certify that neither the owner nor equipment identified in the equipment project application has any outstanding violations of CARB regulations.

Applicant's Signature

Date

Applicant's Name (please print)

Title

If this application was prepared by an entity other than the applicant, please provide the information requested below.

Application Preparer's Signature

Date

Application Preparer's Name (please print)

Contact Information

Compensation for application preparation: _____

I certify that no Program funds are the source for this compensation:

Signature of Preparer

Please initial each section below.
(See PA#2011-11 for additional information and requirements):

The purchase of this low-emission technology is **NOT** required by any local, state, and/or federal rule or regulation (with the exception of Agricultural Assistance Program projects).

The definitions of qualifying projects are described in PA #2011-11. These definitions have been reviewed and this application is consistent with those definitions.

The vehicle will be committed to 90% or 100% California-only operation and California base-plated registration for the duration of contract term. Dual plates, IRP, and any other out-of-state registrations are prohibited.

All project applicants must submit documentation that supports the activity claimed in the application (i.e., fuel receipts, mileage logs and/or hour-meter readings covering the last two years). This documentation is attached.

The grant contract language cannot be modified without the written consent of all parties. I have reviewed and accepted the sample contact language.

I understand that an IRS Form 1099 may be issued to me for incentive funds received under the Heavy Duty Diesel Trucks Replacement Program. I understand that it is my responsibility to determine the tax liability associated with participating in the Program.

I understand that a SCAQMD-funded Global Positioning System (GPS) unit will be installed on vehicles/equipment if deemed necessary by AQMD. I will submit data as requested and otherwise cooperate with all data reporting requirements.

I understand that the SCAQMD has the right to conduct unannounced inspections for the full project life to ensure the project equipment is fully operational at the activity level committed to by the contract.

I understand that all emission reductions resulting from funded projects will be retired. To avoid double counting of emission reductions, project vehicles and/or equipment may not receive funding from any other government grant program that is designed to reduce mobile source emissions.

I understand to maintain eligibility for Program funds, I need to maintain vehicle registration, keep equipment in legal operating condition, correct any air pollution citations and report to AQMD, and repair or replace equipment that has been damaged, destroyed, or stolen.

I understand that if I have submitted multiple applications for the same equipment project and not disclosed any other requested or received incentive grant funds. I may be disqualified from funding for that engine or piece of equipment under this Program. The equipment owner may also be prohibited from submitting future applications to any and All ARB incentive programs, or local agency incentive programs.

I understand that any tax credits claimed must be deducted from the Program request. Please check one:

I **do not** plan to claim a tax credit or deduction for costs funded by the Program.

I **do** plan to claim a tax credit or deduction for costs funded by the Program.

If so, please indicate amount here: \$ _____

I plan to claim a tax credit or deduction only for the portion of incremental costs not funded by the Program. If so, please indicate amount here: \$ _____

I understand that grant funds shall only be used toward the cost of the equipment.

APPENDIX G
Certifications and Representations



**South Coast
Air Quality Management District**

21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

Business Information Request

Dear SCAQMD Contractor/Supplier:

The South Coast Air Quality Management District (SCAQMD) is committed to ensuring that our contractor/supplier records are current and accurate. If your firm is selected for award of a purchase order or contract, it is imperative that the information requested herein be supplied in a timely manner to facilitate payment of invoices. In order to process your payments, we need the enclosed information regarding your account. **Please review and complete the information identified on the following pages, complete the enclosed W-9 form, remember to sign both documents for our files, and return them as soon as possible to the address below:**

**Attention: Accounts Payable, Accounting Department
South Coast Air Quality Management District
21865 Copley Drive
Diamond Bar, CA 91765-4178**

If you do not return this information, we will not be able to establish you as a vendor. This will delay any payments and would still necessitate your submittal of the enclosed information to our Accounting department before payment could be initiated. Completion of this document and enclosed forms would ensure that your payments are processed timely and accurately.

If you have any questions or need assistance in completing this information, please contact Accounting at (909) 396-3777. We appreciate your cooperation in completing this necessary information.

Sincerely,

Michael B. O'Kelly
Chief Financial Officer

DH:LV:CW:tm

Enclosures: Business Information Request
Disadvantaged Business Certification
W-9
Federal Contract Debarment Certification

REV 4/10



South Coast Air Quality Management District

21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

BUSINESS INFORMATION REQUEST

Business Name	
Division of:	
Subsidiary of:	
Website Address	
Type of Business	

REMITTING ADDRESS INFORMATION

Address			
City/Town			
State/Province		Zip	
Phone	() - Ext	Fax	() -
Contact		Title	
E-mail Address			
Payment Name if Different			

All invoices must reference the corresponding Purchase Order Number(s)/Contract Number(s) if applicable and mailed to:

**Attention: Accounts Payable, Accounting Department
South Coast Air Quality Management District
21865 Copley Drive
Diamond Bar, CA 91765-4178**

DISADVANTAGED BUSINESS CERTIFICATION

Federal guidance for utilization of disadvantaged business enterprises allows a vendor to be deemed a small business enterprise (SBE), minority business enterprise (MBE) or women business enterprise (WBE) if it meets the criteria below.

- is certified by the Small Business Administration or
- is certified by a state or federal agency or
- is an independent MBE(s) or WBE(s) business concern which is at least 51 percent owned and controlled by minority group member(s) who are citizens of the United States.

Statements of certification:

As a prime contractor to the SCAQMD, _____ (name of business) will engage in good faith efforts to achieve the fair share in accordance with 40 CFR Section 31.36(e), and will follow the six affirmative steps listed below **for contracts or purchase orders funded in whole or in part by federal grants and contracts.**

1. Place qualified SBEs, MBEs, and WBEs on solicitation lists.
2. Assure that SBEs, MBEs, and WBEs are solicited whenever possible.
3. When economically feasible, divide total requirements into small tasks or quantities to permit greater participation by SBEs, MBEs, and WBEs.
4. Establish delivery schedules, if possible, to encourage participation by SBEs, MBEs, and WBEs.
5. Use services of Small Business Administration, Minority Business Development Agency of the Department of Commerce, and/or any agency authorized as a clearinghouse for SBEs, MBEs, and WBEs.
6. If subcontracts are to be let, take the above affirmative steps.

Self-Certification Verification: Also for use in awarding additional points, as applicable, in accordance with SCAQMD Procurement Policy and Procedure:

Check all that apply:

- Small Business Enterprise/Small Business Joint Venture Women-owned Business Enterprise
 Local business Disabled Veteran-owned Business Enterprise/DVBE Joint Venture
 Minority-owned Business Enterprise

Percent of ownership: _____ %

Name of Qualifying Owner(s): _____

I, the undersigned, hereby declare that to the best of my knowledge the above information is accurate. Upon penalty of perjury, I certify information submitted is factual.

NAME

TITLE

TELEPHONE NUMBER

DATE

Definitions

Disabled Veteran-Owned Business Enterprise means a business that meets all of the following criteria:

- is a sole proprietorship or partnership of which is at least 51 percent owned by one or more disabled veterans, or in the case of any business whose stock is publicly held, at least 51 percent of the stock is owned by one or more disabled veterans; a subsidiary which is wholly owned by a parent corporation but only if at least 51 percent of the voting stock of the parent corporation is owned by one or more disabled veterans; or a joint venture in which at least 51 percent of the joint venture's management and control and earnings are held by one or more disabled veterans.
- the management and control of the daily business operations are by one or more disabled veterans. The disabled veterans who exercise management and control are not required to be the same disabled veterans as the owners of the business.
- is a sole proprietorship, corporation, partnership, or joint venture with its primary headquarters office located in the United States and which is not a branch or subsidiary of a foreign corporation, firm, or other foreign-based business.

Joint Venture means that one party to the joint venture is a DVBE and owns at least 51 percent of the joint venture. In the case of a joint venture formed for a single project this means that DVBE will receive at least 51 percent of the project dollars.

Local Business means a business that meets all of the following criteria:

- has an ongoing business within the boundary of the SCAQMD at the time of bid application.
- performs 90 percent of the work within SCAQMD's jurisdiction.

Minority-Owned Business Enterprise means a business that meets all of the following criteria:

- is at least 51 percent owned by one or more minority persons or in the case of any business whose stock is publicly held, at least 51 percent of the stock is owned by one or more minority persons.
- is a business whose management and daily business operations are controlled or owned by one or more minority person.
- is a business which is a sole proprietorship, corporation, partnership, joint venture, an association, or a cooperative with its primary headquarters office located in the United States, which is not a branch or subsidiary of a foreign corporation, foreign firm, or other foreign business.

“Minority” person means a Black American, Hispanic American, Native American (including American Indian, Eskimo, Aleut, and Native Hawaiian), Asian-Indian American (including a person whose origins are from India, Pakistan, or Bangladesh), Asian-Pacific American (including a person whose origins are from Japan, China, the Philippines, Vietnam, Korea, Samoa, Guam, the United States Trust Territories of the Pacific, Northern Marianas, Laos, Cambodia, or Taiwan).

Small Business Enterprise means a business that meets the following criteria:

- a. 1) an independently owned and operated business; 2) not dominant in its field of operation; 3) together with affiliates is either:
 - A service, construction, or non-manufacturer with 100 or fewer employees, and average annual gross receipts of ten million dollars (\$10,000,000) or less over the previous three years, or
 - A manufacturer with 100 or fewer employees.
- b. Manufacturer means a business that is both of the following:
 - 1) Primarily engaged in the chemical or mechanical transformation of raw materials or processed substances into new products.
 - 2) Classified between Codes 311000 to 339000, inclusive, of the North American Industrial Classification System (NAICS) Manual published by the United States Office of Management and Budget, 2007 edition.

Small Business Joint Venture means that one party to the joint venture is a Small Business and owns at least 51 percent of the joint venture. In the case of a joint venture formed for a single project this means that the Small Business will receive at least 51 percent of the project dollars.

Women-Owned Business Enterprise means a business that meets all of the following criteria:

- * is at least 51 percent owned by one or more women or in the case of any business whose stock is publicly held, at least 51 percent of the stock is owned by one or more women.
- * is a business whose management and daily business operations are controlled or owned by one or more women.
- * is a business which is a sole proprietorship, corporation, partnership, or a joint venture, with its primary headquarters office located in the United States, which is not a branch or subsidiary of a foreign corporation, foreign firm, or other foreign business.

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number								
		+		+				
or								
Employer identification number								
		+						

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here

Signature of U.S. person ▶

Date ▶

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or

• Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien.

Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments (after December 31, 2002). This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester, or
2. You do not certify your TIN when required (see the Part II instructions on page 4 for details), or
3. The IRS tells the requester that you furnished an incorrect TIN, or
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate instructions for the Requester of Form W-9.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line. Check the appropriate box for your filing status (sole proprietor, corporation, etc.), then check the box for "Other" and enter "LLC" in the space provided.

Other entities. Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Note. You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

Exempt From Backup Withholding

If you are exempt, enter your name as described above and check the appropriate box for your status, then check the "Exempt from backup withholding" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

Exempt payees. Backup withholding is not required on any payments made to the following payees:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,

- 7. A foreign central bank of issue,
- 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
- 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
- 10. A real estate investment trust,
- 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
- 12. A common trust fund operated by a bank under section 584(a),
- 13. A financial institution,
- 14. A middleman known in the investment community as a nominee or custodian, or
- 15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt recipients listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt recipients except for 9
Broker transactions	Exempt recipients 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt recipients 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt recipients 1 through 7 ²

¹See Form 1099-MISC, Miscellaneous Income, and its instructions.

²However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees; and payments for services paid by a Federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-owner LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter your SSN (or EIN, if you have one). If the LLC is a corporation, partnership, etc., enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.socialsecurity.gov/online/ss-5.pdf. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses/ and clicking on Employer ID Numbers under Related Topics. You can get Forms W-7 and SS-4 from the IRS by visiting www.irs.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt recipients, see *Exempt From Backup Withholding* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

1. **Interest, dividend, and barter exchange accounts** opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. **Interest, dividend, broker, and barter exchange accounts** opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. **Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

4. **Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. **Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
5. Sole proprietorship or single-owner LLC	The owner ³
For this type of account:	Give name and EIN of:
6. Sole proprietorship or single-owner LLC	The owner ³
7. A valid trust, estate, or pension trust	Legal entity ⁴
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

¹List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

²Circle the minor's name and furnish the minor's SSN.

³You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one). If you are a sole proprietor, IRS encourages you to use your SSN.

⁴List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.



United State Environmental Protection Agency
Washington, DC 20460

Certification Regarding Debarment, Suspension, and Other Responsibility Matters

The prospective participant certifies to the best of its knowledge and belief that it and the principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three year period preceding this proposal been convicted of or had a civil judgement rendered against them or commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction: violation of Federal or State antitrust statute or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

I understand that a false statement on this certification may be grounds for rejection of this proposal or termination of the award. In addition, under 18 USC Sec. 1001, a false statement may result in a fine of up to \$10,000 or imprisonment for up to 5 years, or both.

Typed Name & Title of Authorized Representative

Signature of Authorized Representative Date

I am unable to certify to the above statements. My explanation is attached.

EPA Form 5700-49 (11-88)



CAMPAIGN CONTRIBUTIONS DISCLOSURE

California law prohibits a party, or an agent, from making campaign contributions to AQMD Governing Board Members or members/alternates of the Mobile Source Pollution Reduction Committee (MSRC) of \$250 or more while their contract or permit is pending before the AQMD; and further prohibits a campaign contribution from being made for three (3) months following the date of the final decision by the Governing Board or the MSRC on a donor's contract or permit. Gov't Code §84308(d). For purposes of reaching the \$250 limit, the campaign contributions of the bidder or contractor plus contributions by its parents, affiliates, and related companies of the contractor or bidder are added together. 2 C.C.R. §18438.5.

In addition, Board Members or members/alternates of the MSRC must abstain from voting on a contract or permit if they have received a campaign contribution from a party or participant to the proceeding, or agent, totaling \$250 or more in the 12-month period prior to the consideration of the item by the Governing Board or the MSRC. Gov't Code §84308(c). When abstaining, the Board Member or members/alternates of the MSRC must announce the source of the campaign contribution on the record. *Id.* The requirement to abstain is triggered by campaign contributions of \$250 or more in total contributions of the bidder or contractor, *plus* any of its parent, subsidiary, or affiliated companies. 2 C.C.R. §18438.5.

In accordance with California law, bidders and contracting parties are required to disclose, at the time the application is filed, information relating to any campaign contributions made to Board Members or members/alternates of the MSRC, including: the name of the party making the contribution (which includes any parent, subsidiary or otherwise related business entity, as defined below), the amount of the contribution, and the date the contribution was made. 2 C.C.R. §18438.8(b).

The list of current AQMD Governing Board Members can be found at the AQMD website (www.aqmd.gov). The list of current MSRC members/alternates can be found at the MSRC website (<http://www.cleantransportationfunding.org>).

SECTION I. Please complete Section I.

Contractor:

RFP #: PA2011-11

List any parent, subsidiaries, or otherwise affiliated business entities of Contractor: (See definition below).

SECTION II

Has contractor and/or parent, subsidiary, or affiliated company, or agent thereof, made a campaign contribution(s) totaling \$250 or more in the aggregate to a current member of the South Coast Air Quality Management Governing Board or members/alternates of the MSRC in the 12 months preceding the date of execution of this disclosure?

Yes No **If YES, complete Section II below and then sign and date the form. If NO, sign and date below. Include this form with your submittal.**

Campaign Contributions Disclosure, *continued*:

Name of Contributor _____

_____ _____ _____
Governing Board Member or MSRC Member/Alternate Amount of Contribution Date of Contribution

Name of Contributor _____

_____ _____ _____
Governing Board Member or MSRC Member/Alternate Amount of Contribution Date of Contribution

Name of Contributor _____

_____ _____ _____
Governing Board Member or MSRC Member/Alternate Amount of Contribution Date of Contribution

Name of Contributor _____

_____ _____ _____
Governing Board Member or MSRC Member/Alternate Amount of Contribution Date of Contribution

Name of Contributor _____

_____ _____ _____
Governing Board Member or MSRC Member/alternate Amount of Contribution Date of Contribution

I declare the foregoing disclosures to be true and correct.

By: _____

Title: _____

Date: _____

DEFINITIONS

Parent, Subsidiary, or Otherwise Related Business Entity.

- (1) *Parent subsidiary. A parent subsidiary relationship exists when one corporation directly or indirectly owns shares possessing more than 50 percent of the voting power of another corporation.*

- (2) *Otherwise related business entity. Business entities, including corporations, partnerships, joint ventures and any other organizations and enterprises operated for profit, which do not have a parent subsidiary relationship are otherwise related if any one of the following three tests is met:*
 - (A) *One business entity has a controlling ownership interest in the other business entity.*
 - (B) *There is shared management and control between the entities. In determining whether there is shared management and control, consideration should be given to the following factors:*
 - (i) *The same person or substantially the same person owns and manages the two entities;*
 - (ii) *There are common or commingled funds or assets;*
 - (iii) *The business entities share the use of the same offices or employees, or otherwise share activities, resources or personnel on a regular basis;*
 - (iv) *There is otherwise a regular and close working relationship between the entities; or*
 - (C) *A controlling owner (50% or greater interest as a shareholder or as a general partner) in one entity also is a controlling owner in the other entity.*

2 Cal. Code of Regs., §18703.1(d).