

BOARD MEETING DATE: October 6, 2017

AGENDA NO. 11

PROPOSAL: Issue Program Announcement for School Bus Replacements

SYNOPSIS: Since 2001, the SCAQMD has replaced over 1,600 pre-1994 publicly owned school buses and retrofitted nearly 3,400 school buses. The Carl Moyer AB 923 funds can be utilized for replacement and retrofit of school buses. This action is to issue a Program Announcement to replace pre-1994 school buses owned by public school districts with new alternative fuel buses.

COMMITTEE: Technology, September 15, 2017; Recommended for Approval

RECOMMENDED ACTION:

Issue Program Announcement #PA2018-02 for replacement of pre-1994 school buses owned by public school districts with new alternative fuel buses.

Wayne Natri
Executive Officer

MMM:FM:VW:VY

Background

Since the commencement of the Lower-Emission School Bus Program in 2001, SCAQMD has awarded nearly \$280 million in state and local funds to replace over 1,600 highly polluting publicly owned school buses with alternative fuel buses and to retrofit 3,400 newer diesel school buses with particulate traps. This program has resulted in helping thousands of school kids to commute in some of the cleanest school buses in the country. The Carl Moyer AB 923 funds can be utilized for replacement and retrofit of school buses.

Proposal

This action is to issue Program Announcement #PA2018-02 for replacement of pre-1994 school buses owned by public school districts and joint power authorities with new alternative fuel buses. The PA will close on January 4, 2018, after a three-month application period. Funding will be provided from the Carl Moyer Program AB 923 Fund (80). Depending on the number of applications received, all the requests may not be funded in their entirety; final funding amounts will be recommended to the Board when they consider the proposed awards.

For replacement of pre-1994 school buses with alternative fuel buses owned by public school districts and joint power authorities, the SCAQMD will award up to \$165,000 for Type D CNG buses and up to \$129,500 for Type C propane buses toward the base price of the bus, including sales tax and the fire suppressant system. School districts will have to pay for any additional discretionary options that they may choose to include on the bus. In the case of commercial availability at the time of the awards, schools willing to purchase alternative fuel school buses certified below the 0.2 gram NOx standard will be prioritized. Schools may also apply for CARB's Hybrid and Zero Emission Truck and Bus Voucher Incentive Project (HVIP) funds to help leverage and reduce their portion of match funding. Furthermore, up to \$14,000 per CNG and \$5,000 per propane bus will be provided for fueling infrastructure. School districts cannot opt to use the funding provided for infrastructure to reduce their local match.

Outreach

In accordance with SCAQMD's Procurement Policy and Procedure, a public notice advertising the PA and inviting bids will be published in the Los Angeles Times, the Orange County Register, the San Bernardino Sun, and Riverside County's Press Enterprise newspapers to leverage the most cost-effective method of outreach to the South Coast Basin. Electronic notification of this funding opportunity will also be sent to all public school districts in the SCAQMD's jurisdiction.

Additionally, potential bidders may be notified utilizing SCAQMD's own electronic listing of certified minority vendors. Notice of the PA will be emailed to the Black and Latino Legislative Caucuses and various minority chambers of commerce and business associations, and placed on the Internet at SCAQMD's website (<http://www.aqmd.gov>) where it can be viewed by making the selection "Grants & Bids."

Bid Evaluation

Proposals will be reviewed and evaluated by a diverse, technically qualified panel in accordance with criteria in the attached PA.

Benefits to SCAQMD

The successful implementation of the Lower-Emission School Bus Replacement Program will ensure less polluting and safer school transportation for school children and will reduce public exposure to toxic diesel particulate matter emissions.

Resource Impacts

Funding for the Lower-Emission School Bus Replacement Program will be provided from the Carl Moyer Program AB 923 Fund (80) and the final funding amounts will be recommended to the Board when they consider the proposed awards.

Attachment

Program Announcement #PA2018-02 for Alternative Fuel School Bus Replacements

***Announcing South Coast Air Quality Management District's
Alternative Fuel School Bus Replacement Program
(Eligibility restricted to public school districts and joint power authorities)***

**Program Announcement & Application
PA2018-02**

October 6, 2017

Depending upon the number of applications received and availability of funding, the SCAQMD Board retains discretion to make full awards, partial awards, or no awards at all under this Program Announcement. If the choice to make a partial award causes any bidder to withdraw, the funds that would have been awarded to that bidder will be re-allocated to the other bidders or allocated pursuant to a new program announcement. SCAQMD also reserves the right to change any criteria such as the schedule, qualifications, grant provisions and selection criteria outlined in this Program Announcement & Application.

October 6, 2017

The South Coast Air Quality Management District (SCAQMD) is pleased to announce another round of funding opportunity for the implementation of the “Lower-Emission School Bus Program (LESB)” in the South Coast Air Basin. This program, which supplements earlier programs, is designed to assist school districts to purchase new Type C or Type D alternative fuel school buses. Only public school districts, and those participating under a joint powers authority agreement (JPA), are eligible for these funds.

Background

Since 2001, when the Lower-Emission School Bus Program began, SCAQMD has awarded nearly \$280 million in state and local funds to: replace 1,600 highly polluting older diesel school buses with clean alternative fuel buses and retrofit 3,400 diesel school buses with PM traps. As a result of the LESB Program, thousands of school children travel in some of the cleanest and safest buses in the South Coast region.

Highlights of the Alternative Fuel School Bus Replacement Program

Eligibility

Only public school districts and joint power authorities (JPAs) in the South Coast Air Quality Basin are eligible to apply.

Funding

Funds for the new Alternative Fuel School Bus Replacement Program will be provided from the Carl Moyer Program AB923 Fund. The final funding amount will be recommended at the time of SCAQMD Board approval for the proposed awards. Depending on the number of applications received, all the requests may not be funded in their entirety.

SCAQMD is seeking applications from public school districts to replace pre-1994 school buses that weigh over 14,000 lbs. Gross Vehicle Weight (GVW). SCAQMD will first replace any remaining pre-1987 buses in the fleets. In the application, school districts are requested to list their pre-1994 buses in their preferred priority order for replacement, either by accumulated mileage, age or maintenance track record. Given that funds may be limited, pre-1994 buses may be replaced in phases. Applicants are encouraged to list their oldest buses first and/or buses with the highest cumulative mileages.

For replacement of pre-1994 school buses with alternative fuel buses, the SCAQMD will fund up to \$165,000 for Type D CNG buses and up to \$129,500 for Type C propane buses, including sales tax and the fire suppressant system. School districts will also have to pay for any additional discretionary options that they may choose to include on the bus. In case of commercial availability at the time of the awards, schools willing to

purchase alternative fuel school buses certified below the 0.2 gram NOx standard will be prioritized. Schools may also apply for state's Hybrid and Zero-Emission Truck and Bus Voucher Incentive Project (HVIP) funds to help leverage and reduce their portion of match funding. Furthermore, up to \$14,000 per CNG and \$5,000 per propane bus will be provided for fueling infrastructure. However, funding provided for infrastructure cannot be used to reduce a school district's local match in instances where the infrastructure funds are not needed.

For each bus being requested for replacement, school districts must provide the annual CHP292 from year 2014 to present. Applicants have to agree to crush a pre-1994 school bus weighing over 14,000 GVWR.

The original application and three hard copies with Superintendent's signature and digitized version must be received by SCAQMD no later than 4:00 p.m. Thursday, January 4, 2018.

Also applicants must submit to SCAQMD's School Bus Program Supervisor the following:

1. two Excel sheets with details of the school buses in the fleet – one hard copy that accompanies the application, and the other sent electronically to Vasken Yardemian at vyardemian@aqmd.gov
2. a digitized version of the whole application

Schools need to include the latest CARB Executive Order (1 page) for the bus engine being ordered, and specify which piggy-back bid was used to order the new bus (Waterford, Hemet or equivalent). Schools need to operate these new school buses for a minimum of fifteen (15) years from the date of CHP certification.

Please see below for further details of the Program, procedures to apply and the application form.

Should you have any questions regarding this Program Announcement, please contact:

- Vasken Yardemian, Program Supervisor, at (909) 396-3296
Email: vyardemian@aqmd.gov, or
- Lily Garcia, Contract Assistant, at (909) 396-2832, lgarcia1@aqmd.gov
- Please note: SCAQMD is closed on Mondays.

The program announcement and application document PA2018-02 can also be accessed via the Internet by visiting SCAQMD's website at www.aqmd.gov/grants-bids.

Our main objective is to reduce children's exposure to harmful emissions from diesel school buses. We look forward to receiving your application.

ATTACHMENTS

Application Form and Procedures to Apply for Funding to Purchase New
Alternative Fuel School Bus

CERTIFICATIONS AND REPRESENTATIONS:

- All Applicants need to provide updated Business Contact Information
- New Applicants need to fill in the Taxpayer ID information

Funding for New Alternative Fuel School Buses

***(Only Public School Districts and Joint Power
Authorities are eligible to apply)***

PA2018-02

October 6, 2017

SCAQMD's Lower-Emission School Bus Program

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I.A. PROGRAM INTRODUCTION

In earlier rounds of funding, using a combination of state and its own funds totaling nearly \$280 million, SCAQMD has replaced over 1,600 older diesel buses with new alternative fuel bus, primarily CNG, and has retrofitted nearly 3,400 diesel buses with PM traps. Over 50 percent of these funds have been awarded to school districts located in disproportionately impacted areas. Thousands of students travel daily in these SCAQMD-funded school buses that are among the cleanest and safest in the South Coast Air Basin.

Funding Available for New School Bus Replacement

Background

Under this Program Announcement, SCAQMD will be providing its own AB 923 funds for the replacement of pre-1994 school buses with alternative fuel new school buses. Only public school districts and joint power authorities are eligible to apply under this program

For replacement of pre-1994 school buses with alternative fuel buses, the SCAQMD will fund up to \$165,000 for Type D CNG buses and up to \$129,500 for Type C propane buses, including sales tax and the fire suppressant system. School districts will also have to pay for any additional discretionary options that they may choose to include on the bus. In case of commercial availability at the time of the awards, schools willing to purchase alternative fuel school buses certified below the 0.2 gram NOx standard will be prioritized. Schools may also apply for state's HVIP funds to help leverage and reduce their portion of match funding.

Furthermore, up to \$14,000 per CNG and \$5,000 per propane bus will be provided for fueling infrastructure. Funding provided for infrastructure cannot be used to reduce a school district's local match in cases where the infrastructure funds are not needed.

Emission Limits

- The new alternative fuel school bus must be certified to at least an emission limit of: 0.2 g/bhp-hr (NMHC and NOx) and 0.01 g/bhp-hr for PM, but school buses certified at lower optional NOx standard will be prioritized.

I.B. PROGRAM SCHEDULE

The implementation schedule is outlined below.

Tentative Schedule for School Bus Replacement Program

October 6, 2017 (Friday) Issue the Program Announcement & Application PA2018-02.

January 4, 2018 (Thursday) **Applications due by 4 p.m. for school bus replacements.**
Applicants are encouraged to apply well before this deadline.

April 6, 2018 (Friday)	SCAQMD Board to consider approval of the school bus replacement awards.
July 6, 2018	All school bus orders must be placed with vendors by school districts. Copies of vendor quotes and purchase orders faxed to SCAQMD (attn. Ms. Lily Garcia, fax (909-396-3774).
March 15, 2019	New buses delivered and CNG infrastructure completed.
April 12, 2019	All requests for reimbursement submitted by school districts, along with evidence of bus crushed.

I.C. APPLICATION SUBMITTAL

The applicant shall submit **four copies** (1 original and 3 copies) of the application, each marked “**Program Application PA2018-02**” These four copies should be placed together in a sealed envelope, plainly marked in the upper left-hand corner with the name and address of the applicant, **no later than 4:00 p.m., Thursday, January 4, 2018.**

The application package must be addressed to:

Mr. Dean D. Hughbanks, Procurement Manager
Re: Program Application PA2018-02
Alternative Fuel School Bus Replacement
 South Coast Air Quality Management District
 21865 Copley Drive
 Diamond Bar, CA 91765

All the school bus replacement applications must be **signed by the school’s superintendent.** (School superintendents shall not delegate this responsibility for signature to his or her deputy.) In addition, a digitized copy of the entire application and Excel sheet of fleet inventory should be e-mailed to the school bus program supervisor at vyardemian@aqmd.gov.

I.D. PARTICIPATION GUIDELINES, REQUIREMENTS, & CONDITIONS

GRANT PROVISIONS FOR SCHOOL BUS REPLACEMENT & INFRASTRUCTURE

A. School Bus Replacement Criteria Overview

1. Only public school districts within the jurisdiction of the SCAQMD that own and operate school buses, including under provisions of a joint powers authority, can apply for funding. The program is for replacement of:

- pre-1994 school buses with new alternative fuel buses; and
- pre-1994 school buses to be replaced must have continuous CHP certification from 2014 onwards.

All the replaced and the new replacement buses must have a manufacturer gross vehicular weight rating (GVWR) of greater than 14,000 pounds and be powered by a heavy-duty engine (CARB classification).

2. Only replacement buses will be funded. Fleet expansion buses (that fail to crush an existing school bus) will not be eligible for funding.
3. Only alternative fuel engines that meet the following emission criteria will be eligible for funding
 - At least 0.2 g/bhp-hr NMHC + NO_x or lower, and 0.01 g/bhp-hr PM or lower. If available, school buses certified at lower optional standard will be prioritized.
4. Availability of alternative fuels to refuel the newly acquired buses shall be documented. The school district can apply for fueling infrastructure funds. If awarded, school districts are eligible up to an additional ten percent of the bus award, and in the case of CNG buses, not exceeding \$14,000 per CNG bus, or \$5,000 per new propane bus awarded from AB923 funds. These infrastructure funds cannot be used to reduce the school district's local match requirement.
5. Priority shall be given to replacement of the oldest buses from the group of buses applied for the Program. Pre-1987 buses will be replaced first.
6. Only pre-1994 school buses with continuously certified CHP certificates since 2014 are eligible for replacement.
7. All pre-1994 school buses proposed for replacement must be in current use. These buses must have a CHP certificate valid as of December 31, 2014, and continuously thereafter, and a valid, verifiable DMV license. The application form calls for specific information related to the replaced bus. Additional information may be required as evidence that these buses are in operation. If there is a break in documentation, please inform the SCAQMD's Program Supervisor Vasken Yardemian at vyardemian@aqmd.gov.
8. Complete documents pertaining to the replaced bus, new bus purchase, vendor quotes, and proof of crushing must be kept in files for a period of seven (7) years after the date of removal of the existing bus. Access to these files, and personnel involved in the transactions, should be allowed in the event of an audit from either state or local authorities.
9. Schools need to include the latest CARB Executive Order (1 page) for the bus engine being ordered and specify which piggy-back bid was used to order the new bus (Waterford, Hemet or equivalent).

10. With the application, applicants must include a print-out of the current fleet composition with details of every bus and its engine currently operating in its fleet (make, model year, fuel type, VIN#, license plate #, engine make, model year, accumulated mileage, average annual mileage etc.) For fleet inventory purposes, diesel buses, within 1994 to 2006 model years (inclusive), that have PM traps and that lack PM traps, need to be identified as well. Additionally, an Excel version of the fleet composition should be sent directly to Vasken Yardemian at vyardemian@aqmd.gov.

B. Infrastructure Criteria Overview

1. If funds for CNG infrastructure are required, the applicant must make such request, and provide justification for the funds requested.
2. Requested funds should offset the cost of procuring new slow-fill alternative-fuel refueling equipment or expanding the capacity of an existing refueling station.
3. New capacity requested will be directly related to the capacity needed by the new CNG buses awarded through this program.
4. Upon approval, funding may be used to purchase slow-fill equipment or used to buy down the cost of a public access fast-fill facility based on estimated cost of slow-fill capacity needed for the new buses.

FUNDING ALLOCATIONS

A. Amounts of Funding

1. Public school districts can use any legally valid piggy-back bid in the State of California to purchase new CNG buses. Examples include, but are not restricted to, the Waterford and Hemet bids. Funding requested for purchase of a bus shall be consistent with the prices on the legally valid piggy-back bid. With the exception of the alternative fuel option, and onboard fire-suppressant system or gas detector system, the applicant is responsible for the cost of any options not included in the prices on the list.
2. SCAQMD will pay up to \$165,000 for Type D CNG buses and up to \$129,500 for Type C propane buses, including sales tax and the fire suppressant system. School districts will also have to pay for any additional discretionary options that they may choose to include on the bus.
3. The cost of the optional fire suppression system and/or gas methane detector included in the amounts described above is up to \$4,500 per bus.

4. The basis for the amount of funding requested for purchase of alternative-fuel refueling infrastructure shall be documented in the application. Amounts requested for funding shall be based on the cost of slow-fill stations. Awards shall not exceed \$14,000 per new CNG bus awarded, or \$5,000 per new propane bus awarded. These amounts will be paid through AB 923 funds.

B. Matching Fund Requirement

1. For replacement of 1993 and older model year in-use school buses, applicants shall pay the amount above \$165,000 for CNG Type D bus, and above \$129,500 for propane Type C bus.
2. The applicant shall have its fueling infrastructure funds for the purchase, upgrade, installation and operation of the alternative-fuel refueling infrastructure.
3. The source of match funding for bus purchases and infrastructure shall be documented and attached to this application. If other grant funds are being used as match funding, detailed information on required use of those funds shall be included.
4. Carl Moyer Program funds may not be used as match funding to purchase new buses.
5. Schools may apply for state's HVIP funds to help leverage and reduce their portion of match funding.

C. Authorizing Signature

The submitted school bus replacement application, and its 3 copies, shall have the school district's superintendent's signature. Applications without authorizing signatures will not be accepted.

D. Disbursement of Funds

1. Following receipt of the grant award from SCAQMD, the school district must provide a copy of the grant agreement and key attachments to the selected vendor(s). Per the provisions of the grant, a purchase order shall be placed without delay to allow for the prompt delivery of the buses.
2. Funds will be paid on a reimbursement basis to the vendor, following the delivery of the new school bus(es) to the applicant.
3. Vendors should be encouraged to directly invoice SCAQMD for SCAQMD's share of funds. Applicants shall cooperate fully with the vendor to provide the vendor the various

documents SCAQMD would need before reimbursing the vendor. These documents are listed in the grant agreement.

4. All buses must be physically delivered to the customer by **March 15, 2019**.
5. Proof of vehicle delivery and supporting documents, as required in the grant, must accompany any request for reimbursement of approved funds. School district must identify any options purchased over and above those included in the base price, and alternative fuel option. Besides the fire suppression and/or gas detection systems, for which SCAQMD will pay up to \$4,500, other discretionary options must be paid by the school district. The receipt of vehicle should be signed by the Director of Transportation before submission to SCAQMD.
6. All requests for reimbursement along with proof of crushing must be received by **April 12, 2019**. Monies owed will be paid directly to the bus vendor.
7. Funds will be paid on a reimbursement basis at the time of completion of the alternative-fuel refueling facility. CNG infrastructure must be completed by **March 15, 2019**. Proof of completion shall accompany any request for reimbursement of approved funds. All requests for reimbursement must be signed by the transportation director and received by SCAQMD on or before **April 12, 2019**. Monies owed will be paid directly to the infrastructure provider.

PROJECT IMPLEMENTATION

A. Preferred List of School Bus Replacement

Applicants are encouraged to list their pre-1994 buses in order of applicant preference. If a priority list is not indicated, from the pool of buses requested for replacement by an applicant, either the oldest buses or the buses with highest cumulative mileage will be replaced first.

B. Project Completion Deadlines and Penalties

1. School bus purchase orders must be placed no later than July 6, 2018.
2. New buses must be delivered no later than March 15, 2019. The business entity responsible for delaying the delivering of the buses may be subject to \$100 per day per bus penalty for buses delivered after March 15, 2019.
3. All requests for reimbursement for purchases submitted by school districts, along with evidence of bus crushed, and other documentation, should be submitted to SCAQMD by April 12, 2019.

C. Monitoring and Reporting

1. School districts must notify the SCAQMD's program supervisor by email to vyardemian@aqmd.gov when the funded buses are ordered and again when the buses arrive on site. Prior to reimbursement, an inspection by SCAQMD may be required.
2. School districts must notify the SCAQMD's program supervisor by email to vyardemian@aqmd.gov when any equipment is ordered for the refueling station, and when the equipment is operating. Prior to, or following reimbursement, an inspection by SCAQMD may be required.

I.E. IF YOU NEED HELP

This Program Announcement and Application can be obtained by accessing the SCAQMD website at www.aqmd.gov/grants-bids. SCAQMD staff members are available to answer questions during the application acceptance period. In order to help expedite assistance, please direct your inquiries to the applicable staff person, as follows:

- For **General, Administrative, or Technical Assistance**, please contact:

Vasken Yardemian
Program Supervisor
Technology Advancement Office
Phone 909-396-3296
Fax: 909-396-3632
vyardemian@aqmd.gov

- For **Questions on Invoices and Contracts**, please contact:

Lily Garcia
Contract Assistant
Technology Advancement Office
Phone: 909-396-2832
Fax: 909-396-3252
lgarcia1@aqmd.gov

Appendix A

SCAQMD Alternative Fuel School Bus Replacement Program

**APPLICATION FOR GRANT TO PURCHASE ALTERNATIVE FUEL SCHOOL BUS
AND INFRASTRUCTURE**

Fiscal Year 2017-2018

PA2018-02

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**GRANT APPLICATION FORM FOR THE
ALTERNATIVE FUEL SCHOOL BUS REPLACEMENT PROGRAM
Program Announcement PA2018-02**

(Please return signed application with next 4 pages filled out)

School District: _____

Street Address: _____

City: _____ County: _____ State: CA. Zip Code: _____

School District Primary Contact Person: _____

Name/Title: _____

Phone No.: _____ Ext: _____ Fax: No.: _____

Email (please print): _____

Alternative Contact (name, title, phone, email address – please print)

of Alternative Fuel School Buses Requested _____

Alternative Fuel School Bus Replacement Funds Amount Requested _____

Matching Funds Amount: _____

Sources of School District Matching Funds (please list by amount):

Documentation must be attached to this application explaining the source of match funds, and the need for CNG infrastructure funds. An authorizing resolution from the school board approving the match funds must be attached. If the resolution is not available at the time of the application submission, it should be sent to the program supervisor within 2 months the application submittal.

Fueling Infrastructure Funds Amount Requested: _____

of CNG or PROPANE buses owned and currently operated by School District: _____

If not on premise, identify the nearest refueling facility and one-way distance to the facility: _____

Superintendent's Signature: _____

Name of School Official (please print): _____ Date Signed _____

INFORMATION ON EXISTING BUSES TO BE REPLACED

- List only pre-1994 Buses (1993 or older) with GVWR above 14,000 lbs.
- For each bus, please include CHP 292 from 2014 onwards to present (or alternatively, CHP 343As).
- Please list these pre-1994 buses in your preferred order of priority for replacement: the least desirable buses first (either by accumulated mileage, or age or maintenance issues)

Bus ID No.	Make, Model, Year of pre-1994 bus	VIN No.	GVWR (must be at least 14,000 lbs.)	Odometer Mileage	Engine Make & Model, Year	DMV License Plate	CHP 292/343 from 2010 onwards? (Yes/No)*

*Attach CHP 292 certificates for each bus listed above. CHP certificate for each bus must be continuously valid since 2014 onwards to present (Attach a note, if there is any problem or an issue we need to address.). Without CHP certificates, application will not be processed.

**INFORMATION ON NEW BUSES
PROPOSED TO BE PURCHASED**

(Please include CARB Executive Order of the Bus Engine being purchased)

(Purchase and sales information of the new buses must be from a legally valid piggy-back bid)

Name of Vendor	Final Price quoted by Vendor (inclusive of sales tax)*	Make	Model	Year	GVWR	# of Passengers

*Please identify the piggy-back bid used to order the above. Also, identify any discretionary options being purchased by the school district. Besides the fire suppressant or gas detector, and the CNG package, SCAQMD will not pay for any discretionary option above those included as standard in the base bid.

Please document availability of CNG or PROPANE refueling station for the new bus purchases:

ALTERNATIVE FUEL INFRASTRUCTURE GRANT APPLICATION (PA2018-02)

Please answer all questions below. If non-applicable, write N/A.

Amount of funds requested: _____

Number of new CNG or PROPANE school buses applied for: _____

Number of CNG or PROPANE buses presently on site: _____

The requested funds will be used for (please circle one):

New Facility / Upgrade Existing Facility

Local Gas Utility Company

Distance (miles) to nearest off-site CNG or PROPANE Fueling Station: _____

Please attach a statement of reasons why it is not feasible to refuel at an off-site fueling station.

Existing fueling station:

Actual size of on-site CNG or PROPANE compressor, if any (In CFM) _____

CNG or PROPANE Fuel Storage Capacity if any: _____

Actual number of CNG Fueling Posts (two hoses/post) or PROPANE Fuel Dispensers:

Natural Gas Pressure at Main (PSIG): _____

Is this station accessible to the public? YES / NO

New fueling station:

CFM capacity needed for additional buses: _____

Number of CNG Fueling Posts (two hoses/post) or PROPANE Fuel Dispenser needed:

Will this station be accessible to the public? YES / NO

**South Coast
Air Quality Management District**

SAMPLE GRANT FOR NEW BUS AWARD (not to be returned with application)

Sample Provisions. SCAQMD reserves the right to amend these provisions.

**GRANT AWARD & AUTHORIZATION FORM
Alternative Fuel School Bus Replacement Funding Program
Pursuant to Program Announcement PA2018-02**

Your grant application, to replace pre-1994 buses with new buses, has been approved for funding by the South Coast Air Quality Management District ("SCAQMD") Governing Board. A summary of the grant provisions are listed below:

GRANTEE	
Grant Number	G
Number of CNG or Propane School Buses Awarded	
Required School Match for Above Buses (pre-1994 bus replaced at \$15,000 for CNG and \$10,000 for a Propane bus replaced)*	
a. Total School Bus Replacement Grant Award	
b. Total Award for Installing Fire- Suppression Systems and/or Methane Detection System (with a maximum of \$4,500 per bus)	
c. Total Infrastructure Grant Award	
Maximum SCAQMD Award (a+b+c+d)	
Source of Funding	<i>Fund 80/AB 923</i>
Deadline for Physical Delivery of All Buses	Not later than March 15, 2019
Deadline for the Installation of the Alternative Fuel Station	Not later than March 15, 2019
Agreement Term with SCAQMD	May 15, 2024
Date to which School District must own and operate the new bus received under this Program	At minimum, to March 15, 2034
Date to Which All Records (relating to this Grant) Need to be Retained	March 15, 2036

1. PARTIES - The parties to this Grant Award Agreement ("Agreement") are the South Coast Air Quality Management District ("SCAQMD") whose address is 21865 Copley Drive, Diamond Bar, California 91765-4178, and School District ("GRANTEE") whose address _____

2. AGREEMENT TERM – The term of this Agreement is from the date of execution by both parties through **May 15, 2034**, unless further extended by amendment of this Agreement in writing. No work shall commence until this Agreement is fully executed by all parties.

The project must comply with the 2008 California Air Resources Board's (CARB) Lower-Emission School Bus Program Guidelines, dated April 15, 2008, including associated Advisories/Mail-outs (subsequent revisions to the Guidelines), and must meet all program requirements for the full term of this Agreement. Inclusive of the Agreement term, there are two timeframes: A) **Project Completion**, which is from the date of grant execution to the date the last new school bus has been ordered, delivered and placed into operation; and B) **Project Implementation**, which is from the date the final invoice has been paid until the end date of this Agreement.

3. ADDITIONAL TERMS –To receive funds pursuant to this Grant, GRANTEE must comply with all of the following terms and conditions including those set forth in the following documents, which are attached and incorporated as part of this Grant.
 - a. Information on the CNG or Propane bus(es) to be purchased (**Attachment A-1**);
 - b. List of pre-1994 school buses that must be crushed and permanently removed (**Attachment B-1**);
 - c. Reporting Data on Old and New School Buses, replaced and purchased under this Funding Program (Excel format) (**Attachment C-1**);
 - d. Lower-Emission School Bus Replacement Funding Program Announcement and Application **PA2018-02** dated October 6, 2017 (Attachment D); and
 - e. 2008 CARB Lower-Emission School Bus Guidelines, dated April 15, 2008, and associated Advisories/Mail-outs, which are available at the following CARB web link:
<http://arb.ca.gov/bonds/schoolbus/schoolbus.htm>.

In addition to the terms and agreements in this Grant and above, if a document was required as part of the application as specified by the Program Announcement, and has not yet been provided by GRANTEE to the SCAQMD, GRANTEE must provide such prior to grant execution.

4. PROVIDE VENDOR COPY OF GRANT - Copies of this Agreement must be provided to the vendor(s) selected to provide new CNG or Propane bus(es) and to vendor(s) selected to provide and/or install alternative fuel infrastructure. This will, among other elements, enable the vendor to assist GRANTEE in complying with the terms and conditions of this Grant.
5. VENDOR TO DIRECTLY BILL SCAQMD - SCAQMD prefers that each vendor bill SCAQMD directly for alternative fuel bus(es) delivered and alternative fuel station installed pursuant to this Agreement. GRANTEE is discouraged from paying the vendor directly, but if it does the GRANTEE must submit copies of the front and back of all cancelled check(s) paid to vendor along with all the required documentation listed in Clause 11 below (for buses) and/or Clause 16 (for alternative fuel infrastructure).
6. PROJECT MILESTONES – GRANTEE must achieve the following milestones under this Agreement:
 - a. Issue purchase order (PO) to purchase new bus(es) by **July 6, 2018**;
 - b. Have all new buses delivered by vendor to GRANTEE no later than **March 15, 2019**;
 - c. Ensure that the new CNG or Propane bus(es) comply with the NO_x and PM certification standards listed in the 2008 CARB Lower-Emission School Bus Guidelines and/or Advisories/Mail-outs (**see Attachment A-1**);
 - d. Crush and permanently remove one pre-1994 school bus listed in **Attachment B-1** for every new bus purchased, within three weeks of receiving the new CNG and propane bus(es);
 - e. For reimbursement for new buses, vendor to submit invoice, along with required documentation from GRANTEE, to SCAQMD no later than **April 12, 2019** (see Clause 11 below for required documents to accompany new school bus invoice);

- f. Install Alternative Fuel Station or complete upgrades to existing station no later than **March 15, 2019**, if applicable;
 - g. For reimbursement for alternative fuel infrastructure, vendor to submit invoice along with required documentation to SCAQMD no later than **April 12, 2019** (see Clause 16 below for required documents to accompany infrastructure invoice);
7. PURCHASE ORDER & PENALTIES - GRANTEE must place purchase orders for the new bus(es) no later than **July 6, 2018**. Prior to its issuance, a copy of the purchase order from GRANTEE to the school bus vendor (and if applicable to the alternative fuel station installer) must be faxed to Ms. Lily Garcia at fax number (909) 396-3774 (or sent via email to lgarcia1@aqmd.gov) no later than **July 6, 2018**. Per CARB guidelines, a provision shall be explicitly included in the purchase order stating: "A withhold of \$100 per bus per day will be imposed on the vendor by the SCAQMD for each day and each bus that is delivered after **March 15, 2019**.- to the GRANTEE." In addition, the purchase order shall include the following clause: "Bus vendor shall invoice SCAQMD directly for GRANTEE's award."
8. CRUSHING CERTIFICATE AND REQUIREMENTS - Within three (3) weeks of physically receiving the new bus(es), GRANTEE shall select a crushing company, pre-approved by SCAQMD in writing, to permanently remove its pre-1994 school bus(es), as listed in **Attachment B**. The terms "crush" and "dismantle" are interchangeable and are defined as "to punch, crush, stamp, hammer, shred, or otherwise render permanently and irreversibly incapable of functioning as originally intended, any vehicle or vehicle part". The crushing company must issue a **crush certificate**, signed and dated by the company, which includes the following: a) confirmation that the pre-1994 bus(es) has been permanently destroyed; b) statement that the method used to dismantle the non-engine portion of the bus, the engine and power-train complies with the definition of dismantle as defined in this clause, including affirmation that the crushed buses had a 4-inch hole cut into the engine block, and date dismantled; and c) the **Engine Serial Number** and **VIN** of the bus(es). For the crushed buses, GRANTEE must also provide clear photographs of each destroyed engine and vehicle.
9. PAYMENT TERMS - Up to the amounts specified in the above table, SCAQMD will pay for new alternative-fueled school buses acquired through a legally valid competitive bid in California, in an amount not exceeding the base price (covering listed base options), the cost of the CNG/ propane option and sales tax, less GRANTEE's required match amount. To prevent delays in payment, within three weeks of physically receiving the new bus(es) from the vendor, GRANTEE agrees to permanently remove its pre-1994 buses, as listed in Attachment B, and as listed in **Clause 11 below** provide all the required documentation to the bus vendor for invoice processing.
10. ADDITIONAL SAFETY OPTION PAID. SCAQMD requires installation of safety system, i.e. either a methane detection system and/or a fire-suppression system on each alternatively fueled bus. If installed at time of purchase, SCAQMD will pay an additional \$4,500 per bus maximum for this option.
11. DOCUMENTATION NEEDED FOR PAYMENT OF NEW BUS(ES)
GRANTEE shall coordinate with bus vendor to provide SCAQMD with the following documentation:
- a. **Original invoice** for each bus identifying:
 - i. Details of each bus delivered including, but not limited to, the make, model year of the engine; bus make, model, year, vehicle identification number (VIN), passenger capacity, gross vehicle weight and wheel-chair capacity, if any;
 - ii. Whether or not each bus has a fire-suppression and/or methane detection system;
 - iii. Special options ordered by the school district over the base;
 - iv. Alternative fuel package, sales tax and school district's contribution;
 - v. SCAQMD's contribution; and

- vi. Engine and bus details for each crushed bus. These must include engine serial number, engine family, make, model year of the engine; and bus make, model, year, vehicle identification number (VIN), passenger capacity, gross vehicle weight, and wheel-chair capacity, if any.
 - b. **Cover letter** (an original) signed and dated by GRANTEE's Director of Transportation, or his/her equivalent, confirming, under penalty of perjury, the following:
 - i. Details of the new buses delivered as listed in Clause (11)(a)(i) above;
 - ii. Grant number to which the invoice should be charged;
 - iii. Date when the bus was physically delivered to the school district;
 - iv. Whether or not a methane detection and/or fire-suppression system was installed;
 - v. Approval of the invoice and its contents;
 - vi. Whether CNG station funds will be used to reduce Grantee match requirements
 - vii. That SCAQMD should pay SCAQMD's contribution to the bus vendor directly; and
 - viii. That the school district will pay its contribution directly to the bus vendor.
 - c. **The latest CHP certificate(s)** for the permanently removed bus(es) indicating that these pre-1994 buses were operating since 2014 onwards to present.
 - d. **Certification from the crushing company** that the pre-1994 bus listed in Attachment B has been permanently removed. GRANTEE must ensure that the engine and power-train are irreversibly destroyed. **Engine Serial Number and VIN(s)** of the permanently removed bus(es) must be listed on the certificate. Prior to sending the bus for crushing, a clear picture of both the bus ID label and engine ID label must be taken and submitted to SCAQMD with invoice package.
 - e. A copy of the **first page** of this Grant Award (that contains the Summary Table) and **a copy of Attachment B** attached to this Grant Award (that lists the pre-1994 buses to be crushed) Identify and highlight the bus(es) listed in Attachment B that were permanently removed. VIN(s) and details of the permanently removed bus(es) submitted with the invoice and cover letter must match Attachment B.
 - f. The above documentation must be received by SCAQMD on or before **April 12, 2019**. Please submit these documents to the attention of Ms. Lily Garcia, TAO, SCAQMD, 21865 Copley Drive, Diamond Bar, CA 91765.
 - g. Three electronic files to be sent to Mr. Vasken Yardemian that includes (a) an Excel File listing grant and old and new bus information required in Attachment C (Reporting Data on School Bus Replacements), (b) Electronic print-out of the Grantee's current fleet inventory, with details of each school bus in the fleet (see application in program announcement on required details) and (c) PDF scan of the whole invoice package,
12. **TERM OF OWNERSHIP** - GRANTEE (school district) is required to own and operate the newly acquired CNG/Propane buses within the South Coast Air Quality Management District for **at least fifteen years** from the date of physical delivery.
13. **RIGHT OF INSPECTION** – Before payment of invoice, SCAQMD and CARB reserve the right to inspect all school buses and alternative fuel infrastructure purchased and/or installed pursuant to this Agreement.
14. **ALTERNATIVE FUEL INFRASTRUCTURE** – SCAQMD requires the following:
 - a. That alternative fuel infrastructure be installed by a licensed contractor;
 - b. That the installing contractor have substantial direct experience in installing alternative fuel infrastructure;
 - c. That the alternative fuel infrastructure funded under this Agreement comply with all applicable laws, regulations and codes including, but not limited to, those pertaining to building, safety, fire, health, public contracting and public works, and with any local codes that may provide additional safety;
 - d. That a fire permit or equivalent certification be issued by a licensed engineer, a copy of which must be enclosed with the invoice for infrastructure;
 - e. That the alternative fuel infrastructure construction must be completed by **March 15, 2019**, unless SCAQMD grants a written extension due to exceptional circumstances; and

- f. That Grantee place an SCAQMD logo, as a permanent fixture, in a prominent location at their fueling station; the design and format of the SCAQMD logo will be provided by SCAQMD's program supervisor.

15. PREVAILING WAGES FOR INFRASTRUCTURE CONSTRUCTION.

(a) GRANTEE is alerted to the prevailing wage requirements of California Labor Code section 1770 et seq., and the compliance monitoring and enforcement of such requirements by the Department of Industrial Relations ("DIR"). GRANTEE and all of GRANTEE's subcontractors must comply with the California Public Works Contractor Registration Program and must be registered with the DIR to participate in public works projects. GRANTEE shall be responsible for determining the applicability of the provisions of California Labor Code and complying with the same, including, without limitation, obtaining from the Director of the Department of Industrial Relations the general prevailing rate of per diem wages and the general prevailing rate for holiday and overtime work, making the same available to any interested party upon request, paying any applicable prevailing rates, posting copies thereof at the job site and flowing all applicable prevailing wage rate requirements

(b) to its subcontractors. Proof of compliance with these requirements must be provided to SCAQMD upon request. GRANTEE and GRANTEE's subcontractors shall indemnify, defend and hold harmless the South Coast Air Quality Management District against any and all claims, demands, damages, defense costs or liabilities based on failure to adhere to the above referenced statutes.

(c) Additional information is provided at <http://www.dir.ca.gov/public-works/SB854.html>.

16. DOCUMENTATION NEEDED FOR PAYMENT FOR ALTERNATIVE FUEL INFRASTRUCTURE

GRANTEE shall coordinate with all infrastructure contractors to provide SCAQMD with the following documentation:

- a. **An itemized invoice** (an original) must be submitted from the infrastructure contractor verifying installation, acceptance and operation of the alternative fuel refueling station. The invoice should include applicable details of the equipment installed (make, model, flow rate, horsepower capacity, inlet and outlet pressure, number of dispensing hoses, etc.), the cost of materials and labor, sales tax, warranties, and, if applicable, maintenance agreement.
- b. **Evidence that a fire permit** or equivalent certification by a licensed engineer was issued for installation of the alternative fuel refueling station.
- c. **Cover letter** (an original) signed and dated by GRANTEE's Director of Transportation, or his/her equivalent, confirming, under penalty of perjury, the following:
 - i. the invoice contents
 - ii. the grant number to which the invoice needs to be charged
 - iii. specific details of the work done
 - iv. date of completion of infrastructure construction
 - v. acceptance of the infrastructure construction
 - vi. that SCAQMD should pay SCAQMD's contribution to the vendor directly,
 - vii. that the school district will pay its contribution to the vendor directly; and
 - viii. that the SCAQMD logo has been permanently installed at the station.
- d. **Copies of the bid documents**, if any, issued by GRANTEE (school district), responses to the bid, engineering drawings in 8.5 by 11 size, and photos of the final installation.

17. DEADLINE FOR ALTERNATIVE FUEL STATION DOCUMENTATION – Above documentation for CNG/propane station upgrades must be provided to SCAQMD no later than **March 15, 2019**. Please submit these documents to Ms. Lily Garcia, TAO, SCAQMD, 21865 Copley Drive, Diamond Bar, CA 91765.

18. NON-COMPLIANCE – SCAQMD reserves the right to cancel this Agreement or withhold payment for GRANTEE's non-compliance with the Agreement. Further, SCAQMD reserves the right to cancel the Agreement if it is not executed by GRANTEE in a timely manner.

19. ENFORCEMENT – SCAQMD and CARB have the authority to enforce the terms of this Agreement at any time during the Agreement term plus two years. SCAQMD and CARB will seek whatever legal, equitable and other remedies are available for the GRANTEE's failure to comply with the terms of this Agreement or with the Lower-Emission School Bus Program requirements incorporated herein.
20. AUDIT RIGHTS – SCAQMD, CARB, and the California Department of Finance, or their designee(s), shall have the right to inspect the buses purchased under this Grant, alternative fuel station installed, and review and copy any records and supporting documentation pertaining to the performance of this Agreement. GRANTEE agrees to allow the auditor(s) access to these new buses, and records during normal business hours and to allow interviews of any employees who might reasonably have information related to such these buses and records.
21. AUDIT OF SUBCONTRACTORS - GRANTEE must include a similar right, as Clause 20 above, for the State and SCAQMD, or their designee(s), to audit records and interview staff in any subcontract related to the performance of this Agreement.
22. REPORTING REQUIREMENTS - During the term of this Agreement, GRANTEE agrees to provide periodic reports to SCAQMD on the implementation of this award, including but not limited to, entering detailed information in SCAQMD and/or CARB's School Bus database on each bus that is replaced and purchased under this Award, and on the alternative fueling station upgrades. GRANTEE will require its Vendor to cooperate in providing these reports. SCAQMD will specify the frequency and format of these reports.
23. RECORDS AND RECORDS RETENTION – GRANTEE shall maintain and retain records related to this Agreement for the Agreement term plus two years, or until **March 15, 2036**, whichever is later. These records shall be maintained in print form for the first seven (7) years of this Agreement but may be maintained electronically thereafter. These records include but are not limited to the following:
 - A. Application and all documents provided with and subsequent to the application submittal;
 - B. Clear, legible copy of a photograph of the data tag of the old bus to be replaced/crushed;
 - C. CHP certificates (**292 or 343A**) of the buses being crushed since year 2008 to the date of crushing;
 - D. A copy of the DMV registration and DMV Title of ownership of each new bus and old bus being crushed;
 - E. Vendor quotes for the new buses and station upgrades;
 - F. A copy of the CARB engine certification for the bus engines purchased under this Agreement;
 - G. Purchase orders for the buses and alternative fuel station upgrades;
 - H. Executed contracts;
 - I. Proof of crushing of the pre-1994 school buses including Form 42 and crushing certificate (refer to Clause 8);
 - J. Proof of delivery of the new replacement bus(es) and special options purchased and installed on the bus(es);
 - K. All invoice(s) related to the project including documents required for payment (refer to Clause 11);
 - L. If GRANTEE paid its vendor directly, GRANTEE must retain proof of payment; and
 - M. Maintenance records.
24. NOTICES – Any notices from either party to the other shall be given in writing to the attention of the persons listed below, or to other such addresses or addressees as may hereafter be designated in writing for notices by either party to the other. Notice shall be given by certified, express or registered mail, return receipt requested, and shall be effective as of the date of receipt indicated on the return receipt card.

SCAQMD: South Coast Air Quality Management District
 21865 Copley Drive
 Diamond Bar, CA 91765-4178

GRANTEE:

25. INDEMNIFICATION - GRANTEE agrees to hold harmless, defend and indemnify SCAQMD, its officers, employees, agents, representatives, and successors-in-interest against any and all loss, damage, costs, lawsuits, demands, judgments, legal fees, or any other expenses incurred or required to be paid by SCAQMD, its officers, employees, agents, representatives, or successors-in-interest arising from or related to any injury to persons or damage to property caused directly or indirectly, in whole or in part, by any willful or negligent act or omission of GRANTEE, its employees, subcontractors, agents or representatives in the performance of this Grant. This Indemnification clause shall survive the expiration or termination (for any reason) of the Grant and shall remain in full force and effect.
26. ASSIGNMENT - The rights granted hereby may not be assigned, sold, licensed, or otherwise transferred by either party without the prior written consent of the other, and any attempt by either party to do so shall be void upon inception.
27. NON-EFFECT OF WAIVER - The failure of GRANTEE or SCAQMD to insist upon the performance of any or all of the terms, covenants, or conditions of this Grant, or failure to exercise any rights or remedies hereunder, shall not be construed as a waiver or relinquishment of the future performance of any such terms, covenants, or conditions, or of the future exercise of such rights or remedies, unless otherwise provided for herein.
28. ATTORNEYS' FEES - In the event any action is filed in connection with the enforcement or interpretation of this Grant, each party shall bear its own attorneys' fees and costs.
29. FORCE MAJEURE - Neither SCAQMD nor GRANTEE shall be liable or deemed to be in default for any delay or failure in performance under this Grant or interruption of services resulting, directly or indirectly, from acts of God, civil or military authority, acts of public enemy, war, strikes, labor disputes, shortages of suitable parts, materials, labor or transportation, or any similar cause beyond the reasonable control of SCAQMD or GRANTEE.
30. DE-OBLIGATION OF UNSPENT BALANCES - Upon thirty (30) days' written notice to GRANTEE, SCAQMD may de-obligate from the Grant funds that remain unexpended by the installation deadlines listed unless extended in writing. GRANTEE to initial here acknowledging consent to de-obligation of non-expended funding.

31. SUPERINTENDENT CERTIFICATION – By initialing here, Superintendent certifies that he/she had the authority to submit the application applying for the funds under this grant award and that the individual identified in Clause 26 (Notices) is the individual authorized to implement the project. _____
32. GOVERNING LAW - This Grant shall be construed and interpreted and the legal relations created thereby shall be determined in accordance with the laws of the State of California. Venue for resolution of any disputes under this Grant shall be Los Angeles County, California.
33. ENTIRE GRANT - This Contract represents the entire agreement between the parties hereto related to GRANTEE providing services to SCAQMD and there are no understandings, representations, or warranties of any kind except as expressly set forth herein. No waiver, alteration, or modification of any

of the provisions herein shall be binding on any party unless in writing and signed by the party against whom enforcement of such waiver, alteration, or modification is sought.

The undersigned parties agree to the terms and conditions as set forth in this Grant. The undersigned parties certify under penalty of perjury that they are duly authorized to bind the parties to this Grant.

GRANTOR:
South Coast
Air Quality Management District

GRANTEE:
() Unified School District

Signature of Authorized Official

Signature of Authorized Official

Name: Dr. William A. Burke

Name: _____

Title: Chairman, Governing Board

Title: _____

Date _____

Date _____

ATTEST:
Denis Garzaro, Clerk of the Board

By: _____

APPROVED AS TO FORM:
Kurt R. Weise, General Counsel

By: _____

CERTIFICATIONS AND REPRESENTATIONS

1. Business Contact Information
2. W9- with EIN Taxpayer ID#
3. Campaign Contribution Disclosure Form (for private companies only)



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:

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, remember to sign all 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 Administrative Officer

DH:tm

Enclosures: Business Information Request
Disadvantaged Business Certification
W-9
Form 590 Withholding Exemption Certificate
Federal Contract Debarment Certification
Campaign Contributions Disclosure
Direct Deposit Authorization

All applicants: Please return this completed page with Application



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 <i>Check One:</i>	<input type="checkbox"/> Individual <input type="checkbox"/> DBA, Name _____, County Filed in _____ <input type="checkbox"/> Corporation, ID No. _____ <input type="checkbox"/> LLC/LLP, ID No. _____ <input type="checkbox"/> Other _____

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

BUSINESS STATUS CERTIFICATIONS

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 SCAQMD, (name of business) will engage in good faith efforts to achieve the fair share in accordance with 40 CFR Section 33.301, 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:

- | | |
|---|--|
| <input type="checkbox"/> Small Business Enterprise/Small Business Joint Venture | <input type="checkbox"/> Women-owned Business Enterprise |
| <input type="checkbox"/> Local business | <input type="checkbox"/> Disabled Veteran-owned Business Enterprise/DVBE Joint Venture |
| <input type="checkbox"/> Minority-owned Business Enterprise | <input type="checkbox"/> Most Favored Customer Pricing Certification |

Percent of ownership: _____ %

Name of Qualifying Owner(s): _____

State of California Public Works Contractor Registration No. _____ . MUST BE INCLUDED IF BID PROPOSAL IS FOR PUBLIC WORKS PROJECT.

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 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.

Most Favored Customer as used in this policy means that the SCAQMD will receive at least as favorable pricing, warranties, conditions, benefits and terms as other customers or clients making similar purchases or receiving similar services.

Form **W-9**
(Rev. December 2014)
Department of the Treasury
Internal Revenue Service

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.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>	
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 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 generally 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 instructions for line 1 and 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. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

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. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Note. If you are a U.S. person and 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.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (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 payee 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, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, 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,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

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 *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

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

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. 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 line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 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 U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

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

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

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
- B—The United States or any of its agencies or instrumentalities
- C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
- G—A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
- I—A common trust fund as defined in section 584(a)
- J—A bank as defined in section 581
- K—A broker
- L—A trust exempt from tax under section 664 or described in section 4947(a)(1)
- M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

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-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, 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 SSA office or get this form online at www.ssa.gov. 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 Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting 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, apply for a TIN and 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. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. 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, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 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 made in settlement of payment card and third party network transactions, 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 disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor ⁴
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. 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
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List 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.

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

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the 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.) Also see *Special rules for partnerships* on page 2.

***Note.** Grantor also must provide a Form W-9 to trustee of trust.

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.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and 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. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

2017 Withholding Exemption Certificate**590**

The payee completes this form and submits it to the withholding agent. The withholding agent keeps this form with their records.

Withholding Agent Information

Name _____

Payee Information

Name _____

 SSN or ITIN FEIN CA Corp. no. CA SOS file #

Address (apt./sta., room, PO box, or PMB no.) _____

City (if you have a foreign address, see instructions.) _____

State _____

ZIP code _____

Exemption Reason**Check only one box.**

By checking the appropriate box below, the payee certifies the reason for the exemption from the California income tax withholding requirements on payment(s) made to the entity or individual.

- Individuals — Certification of Residency:**
I am a resident of California and I reside at the address shown above. If I become a nonresident at any time, I will promptly notify the withholding agent. See instructions for General Information D, Definitions.
- Corporations:**
The corporation has a permanent place of business in California at the address shown above or is qualified through the California Secretary of State (SOS) to do business in California. The corporation will file a California tax return. If this corporation ceases to have a permanent place of business in California or ceases to do any of the above, I will promptly notify the withholding agent. See instructions for General Information D, Definitions.
- Partnerships or Limited Liability Companies (LLCs):**
The partnership or LLC has a permanent place of business in California at the address shown above or is registered with the California SOS, and is subject to the laws of California. The partnership or LLC will file a California tax return. If the partnership or LLC ceases to do any of the above, I will promptly inform the withholding agent. For withholding purposes, a limited liability partnership (LLP) is treated like any other partnership.
- Tax-Exempt Entities:**
The entity is exempt from tax under California Revenue and Taxation Code (R&TC) Section 23701 _____ (insert letter) or Internal Revenue Code Section 501(c) _____ (insert number). If this entity ceases to be exempt from tax, I will promptly notify the withholding agent. Individuals cannot be tax-exempt entities.
- Insurance Companies, Individual Retirement Arrangements (IRAs), or Qualified Pension/Profit-Sharing Plans:**
The entity is an insurance company, IRA, or a federally qualified pension or profit-sharing plan.
- California Trusts:**
At least one trustee and one noncontingent beneficiary of the above-named trust is a California resident. The trust will file a California fiduciary tax return. If the trustee or noncontingent beneficiary becomes a nonresident at any time, I will promptly notify the withholding agent.
- Estates — Certification of Residency of Deceased Person:**
I am the executor of the above-named person's estate or trust. The decedent was a California resident at the time of death. The estate will file a California fiduciary tax return.
- Nonmilitary Spouse of a Military Servicemember:**
I am a nonmilitary spouse of a military servicemember and I meet the Military Spouse Residency Relief Act (MSRRA) requirements. See instructions for General Information E, MSRRA.

CERTIFICATE OF PAYEE: Payee must complete and sign below.To learn about your privacy rights, how we may use your information, and the consequences for not providing the requested information go to ftb.ca.gov and search for **privacy notice**. To request this notice by mail, call 800.852.5711.

Under penalties of perjury, I declare that I have examined the information on this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare under penalties of perjury that if the facts upon which this form are based change, I will promptly notify the withholding agent.

Type or print payee's name and title _____

Telephone (____) _____

Payee's signature ► _____

Date _____

2017 Instructions for Form 590

Withholding Exemption Certificate

References in these instructions are to the California Revenue and Taxation Code (R&TC).

General Information

Registered Domestic Partners (RDP) – For purposes of California income tax, references to a spouse, husband, or wife also refer to a Registered Domestic Partner (RDP) unless otherwise specified. For more information on RDPs, get FTB Pub. 737, Tax Information for Registered Domestic Partners.

A Purpose

Use Form 590, Withholding Exemption Certificate, to certify an exemption from nonresident withholding.

Form 590 does not apply to payments of backup withholding. For more information, go to ftb.ca.gov and search for **backup withholding**.

Form 590 does not apply to payments for wages to employees. Wage withholding is administered by the California Employment Development Department (EDD). For more information, go to edd.ca.gov or call 888.745.3886.

Do not use Form 590 to certify an exemption from withholding if you are a **Seller of California real estate**. Sellers of California real estate use Form 593-C, Real Estate Withholding Certificate, to claim an exemption from the real estate withholding requirement.

The following are excluded from withholding and completing this form:

- The United States and any of its agencies or instrumentalities.
- A state, a possession of the United States, the District of Columbia, or any of its political subdivisions or instrumentalities.
- A foreign government or any of its political subdivisions, agencies, or instrumentalities.

B Income Subject to Withholding

California Revenue and Taxation Code (R&TC) Section 18662 requires withholding of income or franchise tax on payments of California source income made to nonresidents of California.

Withholding is required on the following, but is not limited to:

- Payments to nonresidents for services rendered in California.
- Distributions of California source income made to domestic nonresident partners, members, and S corporation shareholders and allocations of California source income made to foreign partners and members.
- Payments to nonresidents for rents if the payments are made in the course of the withholding agent's business.
- Payments to nonresidents for royalties from activities sourced to California.

- Distributions of California source income to nonresident beneficiaries from an estate or trust.
- Endorsement payments received for services performed in California.
- Prizes and winnings received by nonresidents for contests in California.

However, withholding is optional if the total payments of California source income are \$1,500 or less during the calendar year.

For more information on withholding get FTB Pub. 1017, Resident and Nonresident Withholding Guidelines. To get a withholding publication, see Additional Information.

C Who Certifies this Form

Form 590 is certified by the payee. California residents or entities exempt from the withholding requirement should complete Form 590 and submit it to the withholding agent before payment is made. The withholding agent is then relieved of the withholding requirements if the agent relies in good faith on a completed and signed Form 590 unless notified by the Franchise Tax Board (FTB) that the form should not be relied upon.

An incomplete certificate is invalid and the withholding agent should not accept it. If the withholding agent receives an incomplete certificate, the withholding agent is required to withhold tax on payments made to the payee until a valid certificate is received. In lieu of a completed exemption certificate, the withholding agent may accept a letter from the payee as a substitute explaining why they are not subject to withholding. The letter must contain all the information required on the certificate in similar language, including the under penalty of perjury statement and the payee's taxpayer identification number (TIN). The withholding agent must retain a copy of the certificate or substitute for at least five years after the last payment to which the certificate applies, and provide it upon request to the FTB.

If an entertainer (or the entertainer's business entity) is paid for a performance, the entertainer's information must be provided. **Do not** submit the entertainer's agent or promoter information.

The grantor of a grantor trust shall be treated as the payee for withholding purposes. Therefore, if the payee is a grantor trust and one or more of the grantors is a nonresident, withholding is required. If all of the grantors on the trust are residents, no withholding is required. Resident grantors can check the box on Form 590 labeled "Individuals — Certification of Residency."

D Definitions

For California nonwage withholding purposes, **nonresident** includes all of the following:

- Individuals who are not residents of California.
- Corporations not qualified through the California Secretary of State (CA SOS) to do business in California or having no permanent place of business in California.
- Partnerships or limited liability companies (LLCs) with no permanent place of business in California.
- Any trust without a resident grantor, beneficiary, or trustee, or estates where the decedent was not a California resident.

Foreign refers to non-U.S.

For more information about determining resident status, get FTB Pub. 1031, Guidelines for Determining Resident Status. Military servicemembers have special rules for residency. For more information, get FTB Pub. 1032, Tax Information for Military Personnel.

Permanent Place of Business:

A corporation has a permanent place of business in California if it is organized and existing under the laws of California or it has qualified through the CA SOS to transact intrastate business. A corporation that has not qualified to transact intrastate business (e.g., a corporation engaged exclusively in interstate commerce) will be considered as having a permanent place of business in California only if it maintains a permanent office in California that is permanently staffed by its employees.

E Military Spouse Residency Relief Act (MSRRA)

Generally, for tax purposes you are considered to maintain your existing residence or domicile. If a military servicemember and nonmilitary spouse have the same state of domicile, the MSRRA provides:

- A spouse shall not be deemed to have lost a residence or domicile in any state solely by reason of being absent to be with the servicemember serving in compliance with military orders.
- A spouse shall not be deemed to have acquired a residence or domicile in any other state solely by reason of being there to be with the servicemember serving in compliance with military orders.

Domicile is defined as the one place:

- Where you maintain a true, fixed, and permanent home.
- To which you intend to return whenever you are absent.

A military servicemember's nonmilitary spouse is considered a nonresident for tax purposes if the servicemember and spouse have the same domicile outside of California and the spouse is in California solely to be with the servicemember who is serving in compliance with Permanent Change of Station orders.

California may require nonmilitary spouses of military servicemembers to provide proof that they meet the criteria for California personal income tax exemption as set forth in the MSRRA.

Income of a military servicemember's nonmilitary spouse for services performed in California is not California source income subject to state tax if the spouse is in California to be with the servicemember serving in compliance with military orders, and the servicemember and spouse have the same domicile in a state other than California.

For additional information or assistance in determining whether the applicant meets the MSRRA requirements, get FTB Pub. 1032.

- The partnership ceases to have a permanent place of business in California.
- The LLC ceases to have a permanent place of business in California.
- The tax-exempt entity loses its tax-exempt status.

If any of these situations occur, then withholding may be required. For more information, get Form 892, Resident and Nonresident Withholding Statement, Form 892-B, Resident and Nonresident Withholding Tax Statement, and Form 892-V, Payment Voucher for Resident and Nonresident Withholding.

Additional Information

Website: For more information go to ftb.ca.gov and search for **nonwage**.
MyFTB offers secure online tax account information and services. For more information and to register, go to ftb.ca.gov and search for **myftb**.

Telephone: 888.792.4900 or 916.845.4900, Withholding Services and Compliance phone service

Fax: 916.845.9512

Mail: WITHHOLDING SERVICES AND COMPLIANCE MS F-182
FRANCHISE TAX BOARD
PO BOX 942867
SACRAMENTO CA 94267-0867

For questions unrelated to withholding, or to download, view, and print California tax forms and publications, or to access the TTY/TDD numbers, see the information below.

Internet and Telephone Assistance

Website: ftb.ca.gov

Telephone: 800.852.5711 from within the United States
916.845.6800 from outside the United States

TTY/TDD: 800.822.6268 for persons with hearing or speech impairments

Asistencia Por Internet y Teléfono

Sitio web: ftb.ca.gov

Teléfono: 800.852.5711 dentro de los Estados Unidos
916.845.6800 fuera de los Estados Unidos

TTY/TDD: 800.822.6268 para personas con discapacidades auditivas o de habla

Specific Instructions

Payee Instructions

Enter the withholding agent's name.

Enter the payee's information, including the TIN and check the appropriate TIN box.

You must provide a valid TIN as requested on this form. The following are acceptable TINs: social security number (SSN); individual taxpayer identification number (ITIN); federal employer identification number (FEIN); California corporation number (CA Corp no.); or CA SOS file number.

Private Mail Box (PMB) – Include the PMB in the address field. Write "PMB" first, then the box number. Example: 111 Main Street PMB 123.

Foreign Address – Follow the country's practice for entering the city, county, province, state, country, and postal code, as applicable, in the appropriate boxes. Do not abbreviate the country name.

Exemption Reason – Check the box that reflects the reason why the payee is exempt from the California income tax withholding requirement.

Withholding Agent Instructions

Do not send this form to the FTB. The withholding agent retains this form for a minimum of five years or until the payee's status changes, and must provide this form to the FTB upon request.

The payee must notify the withholding agent if any of the following situations occur:

- The individual payee becomes a nonresident.
- The corporation ceases to have a permanent place of business in California or ceases to be qualified to do business in California.

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 (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.



CAMPAIGN CONTRIBUTIONS DISCLOSURE

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 South Coast Air Quality Management District (SCAQMD) 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).

California law prohibits a party, or an agent, from making campaign contributions to SCAQMD Governing Board Members or members/alternates of the Mobile Source Air Pollution Reduction Review Committee (MSRC) of more than \$250 while their contract or permit is pending before SCAQMD; 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, SCAQMD 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 more than \$250 in the 12-month period prior to the consideration of the item by the Governing Board or the MSRC. Gov't Code §84308(c).

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

SECTION I.

Contractor (Legal Name): _____

DBA, Name _____, County Filed in _____ Corporation, ID No. _____ LLC/LLP, ID No. _____
--

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

SECTION II.

Has Contractor and/or any 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 member/alternate 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
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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
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I declare the foregoing disclosures to be true and correct.

By: _____

Title: _____

Date: _____

DEFINITIONS

Parent, Subsidiary, or Otherwise Related Business Entity (2 Cal. Code of Regs., §18703.1(d).)

(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.



South Coast Air Quality Management District

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

Direct Deposit Authorization

STEP 1: Please check all the appropriate boxes

- | | |
|--|--|
| <input type="checkbox"/> Individual (Employee, Governing Board Member) | <input type="checkbox"/> New Request |
| <input type="checkbox"/> Vendor/Contractor | <input type="checkbox"/> Cancel Direct Deposit |
| <input type="checkbox"/> Changed Information | |

STEP 2: Payee Information

Last Name	First Name	Middle Initial	Title
Vendor/Contractor Business Name (if applicable)			
Address		Apartment or P.O. Box Number	
City	State	Zip	Country
Taxpayer ID Number	Telephone Number	Email Address	

Authorization

- I authorize South Coast Air Quality Management District (SCAQMD) to direct deposit funds to my account in the financial institution as indicated below. I understand that the authorization may be rejected or discontinued by SCAQMD at any time. If any of the above information changes, I will promptly complete a new authorization agreement. If the direct deposit is not stopped before closing an account, funds payable to me will be returned to SCAQMD for distribution. This will delay my payment.
- This authorization remains in effect until SCAQMD receives written notification of changes or cancellation from you.
- I hereby release and hold harmless SCAQMD for any claims or liability to pay for any losses or costs related to insufficient fund transactions that result from failure within the Automated Clearing House network to correctly and timely deposit monies into my account.

STEP 3:

You must verify that your bank is a member of an Automated Clearing House (ACH). Failure to do so could delay the processing of your payment. You must attach a voided check or have your bank complete the bank information and the account holder must sign below.

To be Completed by your Bank

Staple Voided Check Here	Name of Bank/Institution		
	Account Holder Name(s)		
	<input type="checkbox"/> Saving <input type="checkbox"/> Checking	Account Number	Routing Number
	Bank Representative Printed Name	Bank Representative Signature	Date
	ACCOUNT HOLDER SIGNATURE:		Date

For SCAQMD Use Only

Input By _____

Date _____