



Please Read and Sign

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

- I certify to the best of my knowledge that the information contained in this application is true and accurate and meets the minimum requirements of the proposition 1B –Good Movement Emission Reduction Program.
- I agree to follow all requirements of the Proposition 1B - Goods Movement Emission Reduction Program- Final 2015 Staff Report and Guidelines for Implementation and September 2015 Supplemental Procedures for Ships at Berth and Cargo Handling Equipment Projects.
- I understand that the Program-funded equipment may not be used by the equipment owner to comply with any applicable CARB regulations for the specified timeframe.
- I understand that, if awarded funding under the, development and submittal of a detailed work statement, with deliverables and schedule is a requirement of the contracting process.
- I understand that there may be conditions placed upon receiving a grant and agree to refund the grant (or a pro-rated portion if applicable) if it is found that at any time I do not meet those conditions and if directed by the SCAQMD in accordance with the contract agreement.
- I understand that, for this equipment, I will be prohibited from applying for any other form of emission reduction credits for Program-funded equipment, including: Fleet Emission Credits (CARB's Ships at Berth Regulation), Emission Reduction Credit (ERC); Mobile Source Emission Reduction Credit (MSERC) and/or Certificate of Advanced Placement (CAP), for all time, from the SCAQMD, CARB or any other Air Quality Management or Air Pollution Control District. However, the project may be co-funded with additional federal or local funds in accordance with the Proposition 1B Guidelines.
- The proposed project has not been funded and is not being considered for incentive funds by another air district, CARB, or any other public agency.
- In the event that the equipment does not complete the minimum term of any agreement eventually reached from this application, I agree to notify SCAQMD and return grant funds to the SCAQMD if required by the contract.
- I have the legal authority to apply for grant funding for the entity described in this application.
- I have disclosed the value of any current financial incentive that directly reduces the project price, including tax credits or deductions, grants, or other public financial assistance for the same engine/equipment below as part of this application statement. To avoid double counting of incentives, all tax credits or deductions, grants, or other public financial assistance may be deducted from the funding request.
- A statement verifying that installation or construction activities prohibited prior to contract execution have not started at any of the berths included in the equipment project contract.
- I agree to actively cooperate with the SCAQMD, CARB, or their designees during any ongoing evaluation or audit of the project site, schedule or records. This cooperation includes, but is not limited to, providing contact information and open access (if requested) to communicate directly with key project personnel, contractors, subcontractors, public utilities and material or equipment suppliers.



PROPOSITION 1B - GOODS MOVEMENT EMISSION REDUCTION PROGRAM APPLICATION

FORM C: Application Statement

- I understand that third party contracts are not permitted. A third party may, however complete an application on an owner's behalf. Third parties are required to list how much compensation, if any, they are receiving to prepare the application(s), and to certify that no Program funds are being used for this compensation. (see below)
- I understand that additional project information may be required by SCAQMD to finalize a contract, and that I will be responsible for providing this information to SCAQMD when requested.
- I understand that an incomplete or illegible application, including applications that are missing required documentation, may be rejected by the SCAQMD at their discretion
- I understand that new equipment must not be purchased, received, installed, paid for, or placed into operation prior to contract execution unless specified by the Program Guidelines, and if allowed, equipment owner shall assume all financial risk and is in no way assured program funds.
- I understand that new equipment purchased outside of California may be subject to California sales and/or use tax
- I understand that all equipment funded by this program must be operational within a prescribed time from the date of contract execution. I confirm that I know the specific time requirement for the type of project and equipment for which I am applying. The required project completion dates for eligible project types are specified in the Program Announcement.
- I have initialed this bullet to indicate that there are no potential conflicts of interest with other clients affected by actions performed by the firm on behalf of the SCAQMD. If this bullet is not initialed, I have attached a description to this application of the potential conflict of interest, which will be screened on a case-by-case basis by the SCAQMD District Counsel's Office. There is no potential conflict of interest: _____ **(Please initial if applicable, otherwise attach separate sheet describing the potential conflict.)**
- I, the equipment owner, disclose that I have applied for the following other source(s) of funding (if any) for the same equipment project:

Source of funds: _____

How much applied for: _____

What the funding will be used for: _____

- I, the equipment owner, disclose the following value of any existing financial incentive that directly reduces the project cost, including tax credits or deductions, grants, or other public financial assistance, for the same equipment project:

Value: _____

- I certify that the equipment owner has reviewed the application and that the application information is correct.
- I certify that neither the owner nor equipment identified in the equipment project application has any outstanding violations of CARB regulations.
- I understand as an applicant that incentive programs have limited funds and shall terminate upon depletion of program funding



PROPOSITION 1B - GOODS MOVEMENT EMISSION REDUCTION PROGRAM APPLICATION

FORM C: Application Statement

Applicant Signature

Date

Applicant Name (please print)

Title

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

Applicant Preparer's Signature

Date

Applicant Preparer's Name (please print)

Phone Number/E-mail

Compensation for application preparation: _____

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

Signature of Preparer



PROPOSITION 1B - GOODS MOVEMENT EMISSION REDUCTION PROGRAM APPLICATION

FORM C: Application Statement

Please initial each section.

The emission reductions that will result from this project are **NOT** required by any local, state, and/or federal rule or regulation.

The types of eligible projects are described in this Program Announcement (PA#2016-03). These definitions have been reviewed and this application is consistent with those definitions.

The equipment will be committed to 100% operation within the four California trade corridors for the duration of contract term.

The grant contract language cannot be modified without the written consent of all parties.

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

I understand that an AQMD-funded electronic monitoring unit will be installed on vehicles/equipment if deemed necessary by AQMD. I will submit data as requested and otherwise cooperate with all data reporting requirements.

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

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

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

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

Program.

If so, please indicate amount here: \$ _____

- ☐ I plan to claim a tax credit or deduction only for the portion of incremental costs not funded by the Program.

If so, please indicate amount here: \$ _____