

**PROPOSITION 1B - GOODS MOVEMENT EMISSION REDUCTION PROGRAM APPLICATION****FORM A1: Applicant Information** *(Complete one form per company)***I. APPLICANT INFORMATION(Required Information)**

Applicant Name/Registered Owner (Equipment Owner):		
Business Name (if any):		TRUCRS ID #:
Primary Contact Full Name:		Email:
Mailing Address:		Phone Number:
City:	State:	Zip Code:
Fleet Size: _____	<i>"Fleet Size" means the number of diesel-fueled vehicles traveling in California that are registered to be driven on public highways and have a manufacturer's gross vehicle weight rating of 14,001 pounds or greater that are under common ownership or control [as defined in CCR section 2025 in title 13, article 4.5, Chapter 1] by a person, business, or government agency.</i>	

**II. PROJECT INFORMATION**

What type of project are you applying for?		
Project Type	Total Number of trucks included	Additional forms to complete
Truck Replacement	Number of trucks being replaced: _____	<b>Form B1</b> for each truck included in the application
Two-for-One Truck Replacement	Number of trucks being replaced: _____	<b>Form B1 and B2</b> for each two-for-one truck replacement included in the application
Truck Engine Repower	Number of trucks being repowered: _____	<b>Form B3</b> for each truck included in the application
Three-Way Truck Transaction	Total trucks included: _____	<b>Form B4</b> for each 3-way truck transaction in the application
Truck Stop Electrification Infrastructure	Not Applicable	<b>Form C1</b>
Electric Charging Stations or Hydrogen Fueling Units	Not Applicable	<b>Form C2</b>

**III. SUPPLEMENTAL INFORMATION - PLEASE ATTACH THE FOLLOWING DOCUMENTS TO COMPLETE YOUR APPLICATION**

<input type="checkbox"/>	Attach one or more of the following forms to <b>Form A1</b> , as required: Form B1-Truck Replacement Form B2- Two-for-One Truck Replacement Form B3- Truck Engine Repower Form B4- Three-Way Truck Transaction Form C1- Truck Stop Electrification Infrastructure Form C2- Electric Charging Stations or Hydrogen
<input type="checkbox"/>	Attach a copy of the "Certificate of Compliance" from CARB's TRUCRS database, this certificate must show that your fleet is in compliance with CARB Truck and Bus Regulation at the time of application submittal. The TRUCRS website can be accessed at: <a href="https://ssl.arb.ca.gov/ssltrucrs-crstb/trucrs_reporting/reporting.php">https://ssl.arb.ca.gov/ssltrucrs-crstb/trucrs_reporting/reporting.php</a> .

Submit the original completed application (with all required supporting documents and signatures) along with **two (2) copies of the entire application package** via mail delivery, or in person to:

South Coast Air Quality Management  
District 21865 Copley Dr., Diamond Bar, CA  
91765 Attn: Procurement

**Application Deadline: Solicitation will remain open until April 30, 2020 at 1 pm**

**NOTE:** Facsimile or email submittals **will not be accepted**. You must submit total of 3 copies including the original application.



## PROPOSITION 1B - GOODS MOVEMENT EMISSION REDUCTION PROGRAM APPLICATION

### FORM A1: Applicant Information *(Complete one form per company)*

**I am the owner of the existing vehicle(s), have the legal authority to apply for incentive funding for the entity described in this application, and agree to the following statement by signing below:**

- ✓ I (equipment owner) have reviewed the information provided in this application, including all supporting documentation, and certify the application information is true and correct, and meet the minimum requirement 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;
- ✓ The program-funded equipment shall be placed into operation and post-inspected prior to the applicable operational deadline to remain eligible for funding;
- ✓ 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;
- ✓ Neither the owner nor equipment identified in the application has any outstanding violations or non-compliance with CARB regulations; The purchase of this low-emission vehicle is NOT required by any local, state, and/or federal rule or regulation, including, but not limited to, the Drayage Truck Regulation (13 CCR §2027), Truck and Bus Regulation (13 CCR §2025), and/or Solid Waste Collection Vehicle Regulation (13 CCR §2021);
- ✓ I have not and will not apply for additional grant funds from any other agency or program for the vehicle(s) included in this application, except the funding programs allowed by the Guideline.
- ✓ I will disclose any other source(s) of funding that has been applied for and will be used for the same project, including the source of funds, amount, and the purpose for funding;
- ✓ I will disclose the 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;
- ✓ Grant funds shall only be used to offset the capital cost of the equipment and/or shall reduce the principal owed to purchase the equipment;
- ✓ 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; New equipment purchased outside of California may be subject to California sales and/or use tax;
- ✓ I have all the information needed to understand what must be done to maintain eligibility for Program funds. This includes maintaining registration and ownership; keeping equipment in legal operating condition within California; correcting any air pollution citations;
- ✓ complying with all CARB regulations; and reporting, repairing, or replacing equipment that has been damaged, destroyed, or stolen;
- ✓ I understand that an incomplete or illegible application, including applications that are missing required information, may be rejected by the South Coast AQMD at their discretion;
- ✓ I acknowledge that the South Coast AQMD may release the information the application contains to third parties if required by state and federal public records laws;
- ✓ I understand that the Program-funded equipment will be required to operate at least 90% or 100% of its operating time within California for the project life;
- ✓ Program funds were not used to previously upgrade the equipment identified in the equipment project application (except for funds that may have been received to retrofit a truck with a diesel PM filter);
- ✓ Any additional non-Program funding needed to complete the equipment project according to the proposed timeframe is reasonably available; and
- ✓ I understand as an applicant that incentive programs have limited funds and shall terminate upon depletion of program funding.

**Printed Name of Owner:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Signature of Owner:** \_\_\_\_\_

**Date:** \_\_\_\_\_