2009 Port Truck Retrofit Program Bay Area Air Quality Management District (BAAQMD)

Introduction

The Bay Area Air Quality Management District ("District") is accepting applications for the 2009 Port Truck Retrofit Program ("Program"). The purpose of this program is to provide funding to retrofit heavy-duty diesel vehicles operating primarily as "port trucks" at ports and railheads in the District's jurisdiction. **This application is for port/drayage truck retrofit projects only.**

What You Need To Do

If you would like to be considered for participation in this program, please complete the application and return the application form along with the required attachments to:

Bay Area Air Quality Management District <u>Attn:</u> Port Truck Retrofit Program 939 Ellis St. San Francisco, CA 94109

Submitting this information does not guarantee approval for funding, but will be used to determine the potential emission reductions and District funding contribution for the proposed project. Any equipment purchased prior to the execution of an official grant agreement will not be eligible for funding. If you have questions about this program or the application process, please contact Tina McRee at (415) 749-4701 or by e-mail at: <u>tmcree@baaqmd.gov</u>.

Application Information

1. •	General Contact Information Name of legal Owner of truck:		
•	Motor Carrier name (if applicable):		
•	Owner's mailing address:		
•	Project Primary Contact:		
	О	Name:	
	0	E-mail Address:	
		Phone number:	
	0	Fax number:Attention to:	
•	Person with Equipment Contract Signing Authority (or Owner):		
	0	Name:	
		E-mail Address:	
	0	Phone number:	
•	Small business information:		
	0	Total fleet size:	
	0	Total number of employees:	
	0	Annual gross income:	

- Person that completed application (may be a "Third Party"):
 - Name: _____
 - o E-mail Address:
 - Phone number: _____
- If you were paid to complete this application for another person, please provide third party payment information below and sign:
 - How much was third party paid for completing application:
 - What source of funds are being used to pay the third party:
 - Third party person's signature: ______Date: _____

2. Current Truck Information

1. Truck Make:						
2. Truck Model:						
3. Truck Model Year:						
4. Vehicle Identification Number (VIN):						
5. Gross Combined We	eight Rating (GCWR):					
6. License Plate Numb	er:					
7. CA Motor Carrier Po	ermit Number (CA#):					
8. Name of Insurance G	Company for this Truck:					
9. Current Odometer R	9. Current Odometer Reading:					
10. Engine Make:						
11. Engine Model:						
12. Engine Model Year:						
13. Engine Serial Number:						
14. Engine Horsepower:						
15. Engine Fuel Type (circle): diesel Other:						
Activity Information for this Truck for Past 12 Months 2008 2009						
16. What was the primar	ry work of this truck?					
17. How many total mile	es did you drive?					
18. How many of these miles were driven in California?						
19. How many times per month did this truck visit a port or railhead in the San Francisco Bay Area?						
Estimate the percent (%) of time this truck operated in the following regions of California:						
20. San Francisco Bay Area:%	21. Sacramento/Central Valley: %	22. Los Angeles /Inland Emp		B. San Diego Area:%		

Estimated Future Usage of this Truck

• Over the next four (4) years, please estimate below how you expect to use this truck:

24. How many miles per year do you expect to drive this truck?								
25. How many miles per year will you drive this truck outside of California?								
Estimate the percent (%) of time this truck will operate in each region of California (below):								
26. San Francisco	27. Sacramento/Central	28. Los Angeles	29. San Diego					
Bay Area:	Valley:	/Inland Empire:	Area:					
%	%	%	%					
20.11								
30. How many times per year will this truck visit a San Francisco Bay Area port or railhead?								

3. Proposed Project Equipment Information

Note: A detailed quote from a vendor must be submitted with this application form.

Each applicant will be required to work with a retrofit vendor to complete the following information and to provide a detailed quote based on datalogging report. A list of certified vendors can be found at the following website http://www.baaqmd.gov/pln/grants_and_incentives/gm/vendor_list.htm.

31. Retrofit vendor company name:

32. Retrofit device make & model:

33. ARB Executive Order number showing that the retrofit device selected for this truck and verified for this truck's engine:

(vendor should attach Executive Order to quote)

Project Financing Information

All grantees will be required to pay the sales tax for their projects. It is the goal of the Program to pay all remaining costs (except sales tax) to the greatest extent possible. In unusual cases, a grantee may have to pay excessive project costs. If this should occur, BAAQMD staff will communicate with the grantee in advance to arrange for payment of any additional expenses.

Unless specified by the applicant, grant payments for eligible project expenses will be paid directly to the retrofit vendor who installed the project equipment on this truck.

Do you agree to this direct vendor payment?

 \Box Yes \Box No Owner initials:

Eligible project expenses include parts and labor reasonably necessary for installation of the recommended retrofit device on this truck and reasonable shipping costs and other necessary costs associated with the approved project. Costs of parts, labor or other expenses not necessary or directly related to the approved project will not be paid by the District. Taxes, fees, insurance, maintenance, consulting, registration or other non-related costs are ineligible for grant funds. The grant award is taxable to the grantee as a "taxable government grant" and BAAQMD will issue an IRS tax form 1099 to the grantee.

Grantees that opt out of direct vendor payment will be reimbursed for project expenses by the District. Payment may take up to sixty (60) days after project completion. These grantees will be responsible for payment arrangements with vendor pending District reimbursement.

Important: What you need to attach to this application form!

- 1. All applicants must attach completed and signed <u>Disclosures</u> form attached to this application.
- 2. All applicants must attach proof of truck ownership (example: copy of title or most recent DMV registration).
- 3. **Drivers with IRP (or Apportioned) plates must attach** proof of California-based plates for a full twelve (12) months (example: from today's date in 2008 up to today).
- 4. **All applicants must attach** documentation showing that the truck owner carries required insurance (example: insurance card, insurance certificate, proof of worker's compensation insurance if applicable).
- 5. All applicants must attach a vendor quotation containing: all costs associated with this project, verification of datalogging, and other necessary information provided by the vendor.
- 6. **All applicants must attach** documentation of mileage sufficient to calculate a full year of mileage for the truck described in this application, examples include:
 - Vehicle inspection records, maintenance records, manifests or driver logs containing clearlylegible odometer readings (submit only enough records to calculate annual mileage),
 - Part IV or Part V of U.S. Federal Tax form Schedule C showing claimed mileage or deducted annual diesel fuel expenses,
 - Any records similar to those above that show a clearly-legible odometer reading or daily miles driven (examples: driver log or safety booklet)
 - o If applicant does not have records as listed above, please contact District staff.
- **7.** All applicants must attach documentation of port or rail visits in California for a minimum of 3 months. Examples of accepted documentation include:
 - Driver manifest or log listing each pick-up and drop location of containers hauled each day, or similar records listing pick-up and drop location for containers hauled
 - Printed motor carrier report of containers hauled by the truck described in this application, preferably listing pick-up and drop locations
 - If records similar to those above are not available, any similar records showing containers hauled each day is acceptable; this may include pay or settlement statements listing containers hauled during the pay period
 - If applicant does not have records as listed above, please contact District staff.

Disclosures

Applicant must read and initial each item below to indicate understanding and agreement:

- a. I certify that once the equipment owner signs this application, the owner shall not submit applications to fund the same truck project under another publically-funded Program: Initial: ______
- b. I certify that this application is for equipment that has not already been funded, nor is currently under consideration for funding by another air district, the California Air Resources Board (CARB) or by any other public agency (including Federal agencies).
 Initial: ______
- c. If funding has been received to update emissions equipment for this truck, the following describes the other source(s) of funding. This disclosure shall identify the Source of funds: _____

How much applied for or received: _____

What the funding will be used for:

Initial: _____ [If no other funds have been applied for or received, simply initial here]

- I certify that the equipment owner will pay any project costs beyond the grant amount awarded for this project, and that these matching funds will be available within a reasonable timeframe to complete this project.
 Initial: ______
- e. I hereby 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 project:

Initial: _____ [if none, simply initial here]

- f. I certify that neither the equipment owner nor the equipment identified in this application has any outstanding violations of ARB regulations (example: idling or air control violations).
 Initial: ______
- g. I understand and agree that BAAQMD may conduct an inspection of the project equipment described in this application prior to an award in order to verify eligibility and compliance with the 2009 Port Truck Retrofit Program. Initial:
- h. I certify that the proposed project is not required by any local, State or Federal rule or regulation; judicial order, or agreement, memorandum of understanding, contract, or other binding obligation that requires the project equipment to implement any portion of the project that would be funded by BAAQMD under the 2009 Port Truck Retrofit Program. Initial: ______
- i. I have attached documentation to this application showing that my organization carries the appropriate insurance (e.g., Workers Compensation, Vehicle Liability, and Vehicle Physical Damage Insurance.)

Initial:	

- j. I certify that I have the legal authority to apply for funding for the project equipment described in this application, or on behalf of the equipment owner and that I am authorized to sign this application on behalf of the equipment owner. Initial:
- k. I understand that this application is for evaluation purposes only and does not guarantee project funding.
 Initial: ______
- I understand that new equipment funded by this Program can only be purchased or ordered once a grant agreement is fully-executed, meaning that both parties (the equipment owner and BAAQMD) have signed the agreement. Initial: ______
- I certify that to the best of my knowledge, the information contained in this application and in any documentation accompanying this application or submitted in furtherance of this application is true and accurate.
 Initial: ______

Signed:

Date: _____

(Equipment Owner or Person with Equipment Contract Signing Authority)

Name (Please Print):_____

Job Title: _____