



# BAY AREA AIR QUALITY MANAGEMENT DISTRICT

## **School Bus Electric Charging Infrastructure**

### **STEP-BY-STEP GUIDE FOR APPLICATIONS**

[www.baaqmd.gov/infrastructure](http://www.baaqmd.gov/infrastructure)

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Updated on 7/10/23

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## STEP-BY-STEP GUIDE FOR INFRASTRUCTURE APPLICATIONS

The [Moyer online system](#) was created to accept applications for equipment, vehicles, and their associated infrastructure. As a result, throughout the application, some questions will be specific to vehicles and equipment. Below are step-by-step directions for navigating this application system.

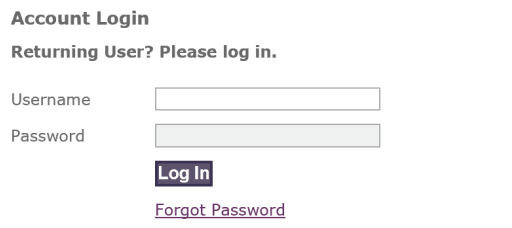
This guide includes figures for each page in the application, and these figures feature highlighted fields. These highlighted fields require you to provide specific information based on how it is highlighted. Please see Table 1: Description of highlighted fields.

Table 1: Description of highlighted fields.

Field Name	Description
<p><b>Project Category</b></p>  <p>Project Category * <input type="text" value="Off Road"/></p> <p>Project Subcategory * <input type="text" value="Equipment Replacement (with retrofit option)"/></p>	<p>Highlighted in yellow and framed by a dashed line means complete this field by inputting the exact answers you see provided in this step-by-step guide.</p> <p>For example: in this blank on your application, input “Off Road”</p>
<p><b>Proposal Name</b></p> <p><b>Proposal Info</b></p> <p>Proposal Name *</p> 	<p>Highlighted in blue and framed by a solid line means complete this field by providing project information for your specific project.</p> <p>For example: in this blank on your application, input the name of your project, e.g., “Company A Infrastructure.”</p>

## CREATE NEW ACCOUNT

If you do not already have an account, click on the link that says, “New User? Please create an account.”



**Account Login**

Returning User? Please log in.

Username

Password

**Log In**

[Forgot Password](#)

**[New User? Please create an account.](#)**

Figure 1: Login Page

If you are the applicant, click “Create Organization Account”. If you are a consultant working on behalf of another company, click on the “Create Third Party Account” link.

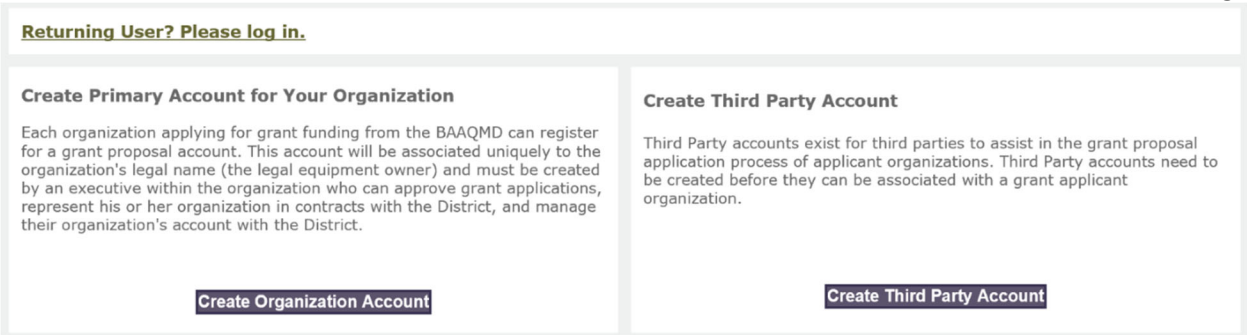


Figure 2: Create Organization or Third Party Account

Complete the information on the page, and a link will be emailed to you confirming your account was successfully created. Special characters such as &, %, \$, #, @, and ! are not allowed as part of the username and password. You will need to click the link in the account activation email to activate your account. Please check your junk mail inbox if you have not received the account activation email.

If you already have an account and have forgotten your password, enter your Username and click Forgot Password to reset it. A new password will be sent to the email associated with the existing account.

## CREATE NEW FUNDING PROPOSAL

This figure provides an overview of the "Account Home" page. To start the application, go to the menu titled "Proposal" and click on "Create a New Funding Proposal".

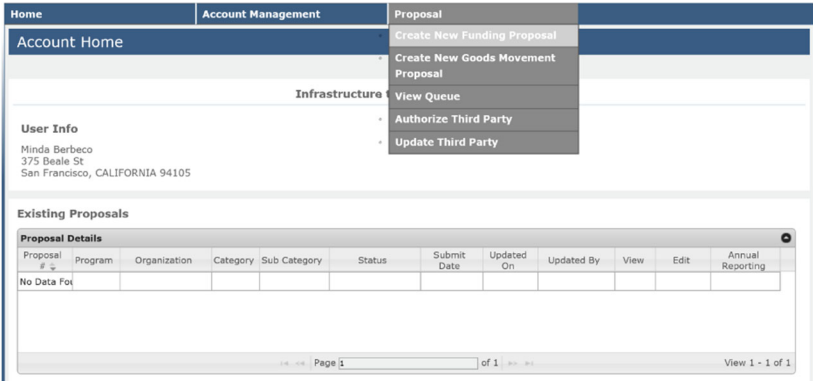


Figure 3: Account Home Page

Note that you can save and come back to your application at any time. Once the proposal has been created, it will appear on this same page listed under "Existing Proposals". If applying to put infrastructure charging in multiple locations, complete and submit a different proposal for each location.

## AUTHORIZE THIRD PARTY

This figure provides an overview of the "Authorize Third Party" page. Third parties can assist in the application process of applicant organizations.

**Please note that a third party cannot create or submit a proposal on behalf of the applicant.**

<b>Home</b>	<b>Account Management</b>	<b>Proposal</b>	
<b>Authorize Third Party</b>		o <b>Create New Funding Proposal</b>	
		o <b>Create New Goods Movement Proposal</b>	
<b>Third Party Accounts</b>		o <b>View Queue</b>	
Third Party accounts exist for third parties to assist in the grant proposal applications. Third Party accounts need to be created before they can be associated with a grant applicant organization.		o <b>Authorize Third Party</b>	
		o <b>Update Third Party</b>	
<b>Third Party Information</b>		o <b>Data Export</b>	

Note: Third Party accounts must be created in advance for organizations to authorize access to existing proposals. Please provide your email address to applicant organizations.

Please enter the email address associated with the Third Party user account you would like to authorize in adding and updating proposal information.

Email Address \*

Confirm Email Address \*

\* Indicates a required field

Please authorize which proposal(s) this account can access. If the intended proposal does not exist, please create it first.

Proposal Access Details	
Proposal Name	Grant Access

**Authorize Third Party**      **Cancel**

Figure 4: Authorize Third Party Page

To authorize a third party to access your application, go to the menu titled "Proposal" and click on "Authorize Third Party". Complete the information on the page. Be sure to put a check mark next to the application listed in "Proposal Access Details" that you want the third party to have access to.

# CREATE NEW PROPOSAL: GENERAL

This figure provides an overview of the "Create New Proposal" page. Instructions are on the pages that follow.

## Create New Proposal

---

**GENERAL** | Equipment | Fleet & Activity | Impacted Community | Engine & Activity | Attachment

---

### Proposal Info

Proposal Name \*

Organization

---

#### Primary proposal contact info

First Name \*

Last Name \*

Email Address \*

Phone Number \*

Fax Number

#### Person authorized to sign contracts for Organization

Same as primary.

First Name \*

Last Name \*

Email Address \*

Phone Number \*

Fax Number

---

### Mailing Address

Update Organization's Mailing Address.

Street address/ PO Box \*  Street Address Line 2

City \*  State \*

County \*  Zip \*

---

### Project Category

What kind of project would you like to apply for?

Project Category \*

Project Subcategory \*

Note: Agricultural applicants wanting to replace their "mobile equipment", please use "off-road equipment replacement" proposal type.

---

### General Information

Name of CARB Fleet Regulation equipment is subject to \*

Is your fleet compliant with the CARB regulation? \*  Yes  No

How many vehicles in this fleet? \*

Infrastructure costs associated with the purchase of zero-emission equipment may be eligible for partial grant funding. Does this project involve the purchase of fueling or electric charging infrastructure? Is infrastructure associated with Zero-emission vehicle (ZEV) or alt-fuel equipment project? \*  Yes  No

If yes, describe the proposed infrastructure: \*

If yes, what is the cost to purchase and install the infrastructure?

If yes, where will the infrastructure be located?

Street address \*  Street Address Line 2

City \*  State \*

Zip \*

Total project cost (all equipment and infrastructure) \*

---

Figure 5: Create New Proposal Page

**PROPOSAL INFO**

Please provide information on your proposal.

**PRIMARY PROPOSAL CONTACT INFO**

Please provide contact information for your primary point of contact on this proposal.

**PERSON AUTHORIZED TO SIGN CONTRACTS FOR ORGANIZATION**

Please provide contact information for the person authorized to sign contracts for your organization.

**MAILING ADDRESS**

Your mailing address is automatically populated for you. If you need to update your organization’s mailing address, you can do it here.

**PROJECT CATEGORY**

**Project Category**

What kind of project would you like to apply for?

Project Category \*

School Bus

Project Subcategory \*

Replacement

Figure 6: Project Category Section

Please complete the following fields as follows:

Field Name	Instructions or Input
Project Category	School Bus
Project Subcategory	Replacement

**GENERAL INFORMATION**

**General Information**

Name of CARB Fleet Regulation equipment is subject to \*

ARB Truck & Bus Regul: ▾  
 Yes  No

Is your fleet compliant with the CARB regulation? \*

How many vehicles in this fleet? \*

Infrastructure costs associated with the purchase of zero-emission equipment may be eligible for partial grant funding. Does this project involve the purchase of fueling or electric charging infrastructure? Is infrastructure associated with Zero-emission vehicle (ZEV) or alt-fuel equipment project? \*

Yes  No

If yes, describe the proposed infrastructure: \*

[Text area for describing infrastructure]

If yes, what is the cost to purchase and install the infrastructure?

[Input field for cost]

If yes, where will the infrastructure be located?

Street address \*

[Input fields for address]

Street Address Line 2

[Input field for Street Address Line 2]

City \*

State \*

CALIFORNIA ▾

Zip \*

Total project cost (all equipment and infrastructure) \*

[Input field for total project cost]

Figure 7: General Information Section

Please complete the following fields as follows:

Field	Instructions or Input
Name of CARB Fleet Regulation equipment is subject to	Select the appropriate regulation for the fleet the infrastructure will be supporting
Is your fleet compliant with the CARB regulation?	Select 'Yes' or 'No'.
How many vehicles in this fleet?	Enter the number of vehicles in your fleet or if you do not have a fleet, the number of vehicles that will be using the infrastructure
Infrastructure costs...	Yes
If yes, describe the proposed infrastructure:	Enter a detailed description of the project including the number and type of chargers, the kW of the chargers, type of vehicles that will be supported by the chargers and their primary vocation, and the site location.
If yes, what is the cost to purchase and install the infrastructure?	Enter the total eligible cost for the project.
If yes, where will the infrastructure be located?	Enter the site location.
Total project cost (all equipment and infrastructure)	Enter the total cost of this project including any vehicles that will be purchased.



# SCHOOL BUS REPLACEMENT: EQUIPMENT INFORMATION

This figure provides an overview of the “Equipment Information” page. Instructions are on the pages that follow.

## School Bus Replacement: Equipment Information

**EQUIPMENT** | Project Details | Impacted Community | Engine & Activity | Attachment

### Existing Equipment Information

Is 2 to 1 Replacement Applied? \*  Yes  No

Existing Vehicle Unit Number *	<input type="text"/>	ARB TRUCRS ID# for this fleet *	<input type="text"/>
Last CHP Inspection Date *	<input type="text"/>	Existing Bus Type *	<input type="text" value="Special needs bus"/>
Existing Vehicle VIN *	<input type="text"/>	Existing Vehicle Manufacturer GVWR *	<input type="text"/>
Existing Vehicle Make *	<input type="text"/>	Existing Vehicle Model *	<input type="text"/>
Existing Vehicle Model Year *	<input type="text"/>	Existing Vehicle License Plate *	<input type="text"/>
Existing Vehicle Operational? *	<input type="radio"/> Yes <input checked="" type="radio"/> No		

### Replacement Vehicle Information

Last CHP Inspection Date	<input type="text"/>	Replacement Vehicle CHP Number	<input type="text"/>
Replacement Bus Type *	<input type="text" value="Special needs bus"/>	Replacement Vehicle License Plate	<input type="text"/>
Replacement Vehicle Manufacturer GVWR *	<input type="text"/>	Replacement Vehicle Make *	<input type="text"/>
Replacement Vehicle Model *	<input type="text"/>	Replacement Vehicle Manufacture Date	<input type="text"/>
Replacement Vehicle Odometer Reading	<input type="text"/>	Replacement Vehicle Delivery Date *	<input type="text"/>
Replacement Vehicle Operational? *	<input type="radio"/> Yes <input checked="" type="radio"/> No	Replacement Vehicle Cost *	<input type="text"/>
Replacement Vehicle VIN	<input type="text"/>		

### Dealer/Vendor Information

Dealership/Vendor Name *	<input type="text"/>	Dealership/Vendor Contact Person (first and last name) *	<input type="text"/>
Dealership/Vendor Phone Number *	<input type="text"/>	Dealership/Vendor Fax Number	<input type="text"/>
Dealership/Vendor Email *	<input type="text"/>	Dealership/Vendor Address *	<input type="text"/>
Dealership/Vendor City *	<input type="text"/>	Dealership/Vendor Zip Code *	<input type="text"/>
Dealership/Vendor State *	<input type="text" value="CALIFORNIA"/>		

**Save & Continue** | **Exit without saving**

Figure 8: School Bus Replacement: Equipment Information Page

**EXISTING EQUIPMENT INFORMATION**

**Existing Equipment Information**

Is 2 to 1 Replacement Applied?\*

Yes  No

Existing Vehicle Unit Number \*

N/A

ARB TRUCRS ID# for this fleet \*

0

Last CHP Inspection Date \*

06/01/2023

Existing Bus Type \*

Special needs bus

Existing Vehicle VIN \*

0

Existing Vehicle Manufacturer GVWR \*

0

Existing Vehicle Make \*

N/A

Existing Vehicle Model \*

N/A

Existing Vehicle Model Year \*

2024

Existing Vehicle License Plate \*

N/A

Existing Vehicle Operational? \*

Yes  No

Figure 9: Existing Equipment Information Section

Please complete the following fields as follows:

Field Name	Instructions or Input
Is 2 to 1 Replacement Applied?	No
Existing Vehicle Unit Number	N/A
ARB TRUCRS ID# for this fleet	0
Last CHP Inspection Date	06/01/2023
Existing Bus Type	Select the type of bus(es) that will use this infrastructure
Existing Vehicle VIN	0
Existing Vehicle Manufacturer GVWR	0
Existing Vehicle Make	N/A
Existing Vehicle Model	N/A
Existing Vehicle Model Year	2024
Existing Vehicle License Plate	N/A
Existing Vehicle Operational?	Yes

**REPLACEMENT VEHICLE INFORMATION**

**Replacement Vehicle Information**

Last CHP Inspection Date	<input type="text"/>		Replacement Vehicle CHP Number	<input type="text"/>
Replacement Bus Type *	Special needs bus		Replacement Vehicle License Plate	<input type="text"/>
Replacement Vehicle Manufacturer GVWR *	0		Replacement Vehicle Make *	N/A
Replacement Vehicle Model *	N/A		Replacement Vehicle Manufacture Date	<input type="text"/>
Replacement Vehicle Odometer Reading	<input type="text"/>		Replacement Vehicle Delivery Date *	06/01/2023
Replacement Vehicle Operational? *	<input checked="" type="radio"/> Yes <input type="radio"/> No		Replacement Vehicle Cost *	0.00
Replacement Vehicle VIN	<input type="text"/>			

Figure 10: Replacement Vehicle Information Section

Please complete the following fields as follows:

Field Name	Instructions or Input
Replacement Bus Type	Special needs bus
Replacement Vehicle Manufacturer GVWR	0
Replacement Vehicle Make	N/A
Replacement Vehicle Model	N/A
Replacement Vehicle Delivery Date	06/01/2023
Replacement Vehicle Operational?	Yes
Replacement Vehicle Cost	0

**DEALER/VENDOR INFORMATION**

**Dealer/Vendor Information**

Dealership/Vendor Name *	N/A	Dealership/Vendor Contact Person (first and last name) *	N/A
Dealership/Vendor Phone Number *	(555) 555-5555 x _____	Dealership/Vendor Fax Number	<input type="text"/>
Dealership/Vendor Email *	N/A	Dealership/Vendor Address *	N/A
Dealership/Vendor City *	N/A	Dealership/Vendor Zip Code *	11111-_____
Dealership/Vendor State *	CALIFORNIA		

Figure 11: Dealer/Vendor Information Section

Please complete the following fields as follows:

<b>Field Name</b>	<b>Instructions or Input</b>
Dealership/Vendor Name	N/A
Dealership/Vendor Contact Person (first and last name)	N/A
Dealership/Vendor Phone Number	555-555-5555
Dealership/Vendor Email	N/A
Dealership/Vendor Address	N/A
Dealership/Vendor City	N/A
Dealership/Vendor Zip Code	11111
Dealership/Vendor State	CALIFORNIA



## SCHOOL BUS REPLACEMENT: IMPACTED COMMUNITIES

This figure provides an overview of the “Impacted Communities” section. Please complete this section with your project specific information.

### School Bus Replacement: Impacted Communities

Equipment

Project Details

**IMPACTED COMMUNITY**

Engine & Activity

Attachment

Projects that operate in Bay Area highly impacted communities will be prioritized for funding. To be considered for this prioritization, please answer the following questions.

Does this equipment operate in a Bay Area highly impacted community? \*  
(See the Priority Community map: [Please click here.](#))

Yes  No

If yes, please answer the following question. If no, skip to “Existing Engine Information”

Please use the Priority Community map to identify which impacted communities this equipment operates in, and indicate the percentage of time this equipment operates in each highly impacted community in the table below. BAAQMD staff may request that the grant applicant provide documentation to verify the information provided below. Use the “zoom in” tool on the electronic version of the map to enlarge the map to best identify boundaries.

Zone Number	Community	Percent Operation
1	Concord	<input type="text"/>
2	Richmond/San Pablo	<input type="text"/>
3	Western Alameda County	<input type="text"/>
4	San Jose	<input type="text"/>
5	Livermore	<input type="text"/>
6	Eastern San Francisco	<input type="text"/>
7	San Rafael	<input type="text"/>
8	Vallejo	<input type="text"/>
9	Antioch/Pittsburg	<input type="text"/>

Note: If the equipment currently operates in Impacted Communities and this proposal is funded, the contract between the grantee and the BAAQMD will require the grantee to continue to operate this equipment in Impacted Communities in the Bay Area.

[Previous Page](#)

[Save & Continue](#)

[Exit without saving](#)

Figure 13: School Bus Replacement: Impacted Communities Page

# SCHOOL BUS REPLACEMENT: ENGINE & RETROFIT INFORMATION

This figure provides an overview of the “Engine Information” page. Instructions are on the pages that follow.

## School Bus Replacement: Engine & Retrofit Information

Equipment	Project Details	Impacted Community	<b>ENGINE &amp; ACTIVITY</b>	Attachment
<b>Existing/Baseline Engine Information</b>				
<b>* Existing Engine Fuel Type</b>	<input type="text" value="Diesel"/>	<b>Existing Engine Make *</b>	<input type="text"/>	
<b>Existing Engine Model *</b>	<input type="text"/>	<b>Existing Engine Model Year *</b>	<input type="text"/>	
<b>Existing Engine Serial Number *</b>	<input type="text"/>	<b>Existing Engine Horsepower *</b>	<input type="text"/>	
<b>Existing Engine Family Number</b>	<input type="text"/>	<b>Existing Engine Operational? *</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No	
<b>Estimated Fuel Consumption Rate (gallon/hours)</b>	<input type="text"/>	<b>Existing Engine Displacement</b>	<input type="text"/>	
<b>Existing Engine Retrofit Information</b>				
<b>Does this vehicle have a diesel retrofit? *</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No			
<b>Replacement Engine Information</b>				
<b>Replacement Engine Fuel Type *</b>	<input type="text" value="Diesel"/>	<b>Replacement Engine Make *</b>	<input type="text"/>	
<b>Replacement Engine Model</b>	<input type="text"/>	<b>Replacement Engine Model Year *</b>	<input type="text"/>	
<b>Replacement Engine Serial Number</b>	<input type="text"/>	<b>Replacement Engine Horsepower *</b>	<input type="text"/>	
<b>Replacement Engine Family Number *</b>	<input type="text"/>	<b>Replacement Engine Emissions Standard (NOx standard) *</b>	<input type="text" value="0.2 g/mi"/>	
<b>Replacement Engine CARB EO Number</b>	<input type="text"/>	<b>Replacement Engine Duty Cycle</b>	<input type="text" value="Heavy Duty Otto cycle (H)"/>	
<b>Previous Page   Save &amp; Continue   Exit without saving</b>				

Figure 14: School Bus Replacement: Engine & Retrofit Information Page

**EXISTING/BASELINE ENGINE INFORMATION**

**Existing/Baseline Engine Information**

<p>* Existing Engine Fuel Type</p> <p>Existing Engine Model *</p> <p>Existing Engine Serial Number *</p> <p>Existing Engine Family Number</p> <p>Estimated Fuel Consumption Rate (gallon/hours)</p>	<p><input type="text" value="Diesel"/></p> <p><input type="text" value="N/A"/></p> <p><input type="text" value="N/A"/></p> <p><input type="text"/></p> <p><input type="text"/></p>	<p>Existing Engine Make *</p> <p>Existing Engine Model Year *</p> <p>Existing Engine Horsepower *</p> <p>Existing Engine Operational? *</p> <p>Existing Engine Displacement</p>	<p><input type="text" value="N/A"/></p> <p><input type="text" value="2024"/></p> <p><input type="text" value="0"/></p> <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p><input type="text"/></p>
---	--	---	---

Figure 15: Existing/Baseline Engine Information Section

Please complete the following fields as follow:

Field Name	Instructions or Input
Existing Engine Fuel Type	Diesel
Existing Engine Make	N/A
Existing Engine Model	N/A
Existing Engine Model Year	2024
Existing Engine Serial Number	N/A
Existing Engine Horsepower	0
Existing Engine Operational?	No

**EXISTING ENGINE RETROFIT INFORMATION**

**Existing Engine Retrofit Information**

Does this vehicle have a diesel retrofit? \*

Yes  No

Figure 16: Existing Engine Retrofit Section

Please complete the following fields as follow:

Field Name	Instructions or Input
Does this vehicle have a diesel retrofit?	No



**REPLACEMENT ENGINE INFORMATION**

**Replacement Engine Information**

Replacement Engine Fuel Type *	<input type="text" value="Diesel"/>	Replacement Engine Make *	<input type="text" value="N/A"/>
Replacement Engine Model	<input type="text"/>	Replacement Engine Model Year *	<input type="text" value="0"/>
Replacement Engine Serial Number	<input type="text"/>	Replacement Engine Horsepower *	<input type="text" value="0"/>
Replacement Engine Family Number *	<input type="text" value="0"/>	Replacement Engine Emissions Standard (NOx standard) *	<input type="text" value="Zero emissions"/>
Replacement Engine CARB EO Number	<input type="text"/>	Replacement Engine Duty Cycle	<input type="text" value="Electric"/>

Figure 17: Replacement Engine Information Section

Please complete the following fields as follow:

Field Name	Instructions or Input
Replacement Engine Fuel Type	Diesel
Replacement Engine Make	N/A
Replacement Engine Model Year	0
Replacement Engine Horsepower	0
Replacement Engine Family Number	0
Replacement Engine Emissions Standard (NOx standard)	Zero emissions
Replacement Engine Duty Cycle	Electric

## SCHOOL BUS REPLACEMENT: ENGINE ACTIVITY INFORMATION

This figure provides an overview of the “Engine Activity Information” page. Please complete this section with the provided answers.

### School Bus Replacement: Engine Activity Information

Equipment
Project Details
Impacted Community
ENGINE & ACTIVITY
Attachment

Current vehicle odometer reading (miles) \* 0

Existing Engine - Annual operation details \*

	2023 (Year to Date) *	2022 *	2021 *	Estimated Annual Future Usage *
Annual miles travelled	0	0	0	0

Previous Page
Save & Continue
Exit without saving

Figure 18: School Bus Replacement: Engine Activity Information Page

Please complete the following fields as follow:

Field Name	Instructions or Input
Current vehicle odometer reading (miles)	0
Annual miles travelled: 2023 (Year to Date)	0
Annual miles travelled: 2022	0
Annual miles travelled: 2021	0
Annual miles travelled: Estimated Annual Future Usage	0

To proceed to the next page, click **Save & Continue** then **No, Continue Navigating** and **Continue to Submit Proposal**.

**Proposal Action** ✕

Do you want to add new engine?

Yes, Add New Engine
No, Continue Navigating.
Cancel

➔

**Proposal Action** ✕

What do you want to do next?

Continue to Submit Proposal
Cancel

Add new Equipment

Figure 19: After Clicking "Save & Continue" on Engine Activity Information Page

## ATTACHMENTS: SCHOOL BUS REPLACEMENT

This figure provides an overview of the “Attachments” page. Please add the required documents in this section and select the correct Attachment Type. If the document is not listed as one of the available Attachment Types, please select “Other miscellaneous attachments” and include a description of the document in the Comments. A list of required attachments is on the [solicitation website](#).

### Attachments: School Bus Replacement

[Previous Page](#) [Continue](#) [Exit](#)

The following attachments may be submitted for this proposal:

- Equipment ownership & registration records
- Equipment usage records or documentation
- Engine (or retrofit) Executive Order(s) or EPA Engine Certification
- Insurance documentation
- Quotes
- Vehicle fleet compliance documentation
- Other miscellaneous attachments
- ARB Approval Letter or Conversion Certification (hybrid, zero-emissions only)
- Charging/fueling infrastructure proposal, quotes, required documentation (if requesting infrastructure funds)

Regulatory Compliance Statement: <http://www.baaqmd.gov/~media/Files/Strategic%20Incentives/Regulatory%20Compliance%20Statement.ashx>

Please attach this documentation as "Other misc. attachments" document type.

If you do not attach the proper documents to your application file, you will be required to submit them to BAAQMD before your application will be considered complete. Required documents can be submitted by mail, e-mail, or fax, or attached to this electronic file at a later time by returning to this page and following the onscreen upload instructions.

**NOTE:** Please do NOT upload files with punctuation in the file name. If your attachment name contains punctuation, please rename the file before attaching it to your proposal.

Attachment Type \*  
required if attaching documents

File Name

Comments

File Name	Submitted By	Submitted On	Attachment Type	Comments	Remove

[Previous Page](#) [Continue](#) [Exit](#)

Figure 20: Attachments: School Bus Replacement Page

## PROPOSAL SUMMARY: SCHOOL BUS REPLACEMENT

This figure provides an overview of the “Proposal Summary” page. Please review the proposal and click **Continue**.

Proposal Summary: School Bus Replacement

Note: All sections of your application must be completed prior to submittal. Please complete any items marked as incomplete with the **X** before continuing.

- Company S Infrastructure
  - ✓ [N/A General Information](#)
  - ✓ [N/A Fleet Regulations Information](#)
  - ✓ [N/A Impacted Communities and Activity Info](#)
  - ✓ [Main/Existing Engine1](#)
  - ✓ [Activity Info](#)

[Previous Page](#) [Continue](#) [Customer Survey](#) [Exit](#)

✓ This section is complete.  
✗ This section is incomplete.

Figure 21: Proposal Summary: School Bus Replacement Page

## PROPOSAL SURVEY: SCHOOL BUS REPLACEMENT

This figure provides an overview of the “Proposal Survey” page. Please complete the survey and click **Save and Continue**.

Proposal Survey: School Bus Replacement

**Comments**

Would you like to add any comments for the District staff about your proposal?

**Survey Info**

How did you hear about the Carl Moyer Program?

Did the applicant or anyone associated with this application (primary contact, employee of owner, Third Party) attend a Carl Moyer Program Application Workshop, a meeting or other event where information was presented about BAAQMD grant programs?

Yes  No

Event Location

Event Date

Was this application easy to follow?

Yes  No

If not, do you have any recommendations for making it easier to understand?

[Previous Page](#) [Save and Continue](#) [Exit without Save](#)

Figure 22: Proposal Survey: School Bus Replacement Page

# PROPOSAL SUBMITTAL: SCHOOL BUS REPLACEMENT

This figure provides an overview of the "Proposal Submittal" page. Please complete the form and click **Sign & Submit** to submit your application.

## Proposal Submittal: School Bus Replacement

Please read and check each item below to indicate understanding and agreement:

- I understand that this application is for evaluation purposes only and does not guarantee project funding. Only a fully executed Grant Agreement or Voucher between the equipment owner and the Air District constitutes an obligation to fund a project.
- I understand and agree that the Air District or its designee will conduct an inspection of the equipment, vehicle(s) and/or vessel(s) that are the subject of this application prior to an award in order to verify eligibility and compliance with the applicable Funding Program guidelines and Air District policies.
- 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 applicant to implement any portion of the project that would be funded by the Air District.
- I have disclosed to the Air District the value and source of all other private or public financial incentives applied for or used for this Project. I will not apply for, or receive other private or public financial incentives for the Project without prior approval from the Air District. I understand that the receipt of additional public funding for the Project Equipment could result in a reduction of the Total Grant Funds Awarded and that failure to disclose other incentive funds associated with this project could disqualify this project from funding consideration.
- I understand and agree that any equipment, vehicle(s), and/or vessel(s) that receive Air District grant funding may not be used for credit under any Federal or State emission averaging, banking or trading program and may not be used as marketable emission reduction credits, or to offset any emission reduction obligation of any person or entity.
- I certify that neither the owner nor equipment identified in the project application has any outstanding violations of applicable Federal, State, or local air quality regulations, and will remain in compliance with these regulations.
- I certify that I am the legal owner of the equipment described in this application or that I have the legal signing authority to apply for funding for this equipment as or on behalf of the equipment owner and that I am authorized to sign this application as or on behalf of the equipment owner.
- I understand and agree that, if my application is approved for replacement vehicle(s)/equipment/engine(s) purchase, my existing vehicle(s)/equipment/engine(s) identified on this application will be destroyed.
- Under penalty of perjury, I certify to the best of my knowledge that the information contained in this application, and in any documentation accompanying this application or submitted in furtherance of this application is true and accurate.
- I have attached documentation showing that my organization carries the appropriate insurance (i.e. General Liability, Workers Compensation, Automobile Liability, and Automobile Comprehensive & Collision/Physical Damage Insurance).
- I understand and certify that accepting grant funds may lead to tax liability and that by signing the Grant Agreement or Voucher for the Project, I agree to accept this liability.
- I understand and agree that no equipment is to be ordered, and no work is to begin until there is a fully executed Grant Agreement or Voucher in place between the equipment owner and the Air District, and Air District staff or their designee has successfully conducted a pre-project inspection of the project equipment. No costs or financial commitments (e.g. purchase order) associated with the project that were incurred or undertaken before the date of execution of the Grant Agreement or Voucher will be accepted by the Air District for reimbursement.

Please type in your full name (first and last name):

The [person authorized to sign contracts for your organization](#) must type their full name.

"I certify that I:

- am the legal owner of the equipment described in this application or I have the legal signing authority to submit this application for funding on behalf of the applicant entity;
- am not prohibited from applying for grant funds from the Air District by an agreement, or role served with the Air District;
- am not a third-party; and,
- am submitting this proposal from my user account of which I have sole control."

[Previous Page](#) [Sign & Submit](#) [Exit without Submit](#)

Figure 23: Proposal Submittal: School Bus Replacement Page

Once your application is submitted, you will receive an email confirmation with your project number. The Air District will verify the completeness of your application and follow up with you in five business days.

Please contact [grants@baaqmd.gov](mailto:grants@baaqmd.gov) if you did not receive a confirmation email or if you have any questions.