



# Reducing Pollution in Schools

## 2020 Community Air Protection Program Eligibility



For more information  
please contact the APCD at  
805-781-5912

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### 1. Eligible Projects:

Air Filter Systems:

- Public school in San Luis Obispo County in [AB 1550 community](#) or schools within the 2018 self-nominated areas on a case-by-case basis.
- Serving students in any grade from kindergarten through twelfth grade.
- Air filter panels with a MERV rating of 14 or greater.
- Standalone air ventilation unit with a MERV rating of 14 or greater and with a noise threshold at or below 45 decibels. Portable air cleaning units must include a clean air delivery rate (CADR) for tobacco smoke (0.09-1.0  $\mu\text{M}$ ) that is appropriate for the classroom size.

### 2. Competitive Ranking Process:

Once the application acceptance period is closed, eligible projects will be scored and ranked.

Projects that meet the following criteria will rank higher than others:

- Schools located in [AB 1550 communities](#) (parts of Paso Robles, San Luis Obispo, Morro Bay, Los Osos/Baywood, and Oceano)
- Schools experiencing the highest average annual concentration of particulate matter based on the APCD's Forecast Zones
- Schools that have the highest percentage of students that qualify for Free and Reduced-Price Meals

For more information regarding competitive scoring, visit:

[slocleanair.org/community/grants/caap.php](http://slocleanair.org/community/grants/caap.php)



Air Pollution Control District  
San Luis Obispo County

805-781-5912  
3433 Roberto Court  
San Luis Obispo, CA 93401

Reducing Pollution in School Projects  
Checklist & Application  
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### 3. Maximum Eligible Funding Amounts and Eligible Costs:

The following table shows typical funding percentages of eligible costs:

Types of Equipment*	Funding Amount**
Air Filters (MERV 14+)	Up to 100%
Standalone Systems with a MERV rating of 14 or greater and with a noise threshold at or below 45 decibels. Portable air cleaning units must include a clean air delivery rate (CADR) for tobacco smoke (0.09-1.0 µM) that is appropriate for the classroom size	Up to 90%

\* New Equipment must meet current CEC Building Energy Efficiency Standard Publication explained in Applicable Guidelines.

\*\*Initial installation costs, 5-year supply of new filters, sales tax, and reasonable delivery cost of materials for the equipment is also funded as part of this grant.

### 4. Impact Assessment:

An impact assessment must be conducted by the equipment owner or an HVAC engineer to ensure that the new filtration will not adversely affect the existing HVAC system(s). The assessment must include the following:

- HVAC information such as type of system and associated MERV rating filter.
- Estimated hours of use (based on normal duty-cycle) and maintenance downtime.
- Number of classrooms and students per classroom where air filtration is to be upgraded.
- Size (length, width, and height) of each room to be upgraded.
- Potential increase in energy costs for the new filtration (annual kilowatt-hr \* dollars per kW-hr = annual cost).
- If available, the total ventilation (m<sup>3</sup> /hr) for old and new air filtration systems.

**For more information regarding reducing pollution in school project grants contact Jacqueline Mansoor at: 805-781-5983 or [jmansoor@co.slo.ca.us](mailto:jmansoor@co.slo.ca.us).**

This information is a summary. The full program requirements are available from the California Air Resources Board (ARB) [at www.arb.ca.gov/msprog/moyer/guidelines/current.htm](http://www.arb.ca.gov/msprog/moyer/guidelines/current.htm).



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## 2020 Community Air Protection Program Application Checklist

Applicant Information	Dealer Information
School District name:	Dealership company:
Contact name:	Dealer rep:
Phone:	Phone:
Fax:	Fax:
E-mail:	E-mail:
<i>Option: Attach business card</i>	<i>Option: Attach business card</i>

✓	<b>Application Requirements for November 30, 2020 Deadline</b>
<input type="checkbox"/>	<p><b>Completed Application:</b> Complete and submit part A, B, C and D of the Application Form including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Completed HVAC assessment.</li> </ul>
<input type="checkbox"/>	<p><b>Price Quotes and Spec Sheet:</b> For the equipment and installation, material and labor quotes must be provided by the equipment manufacturer, manufacturer-approved dealer, or an approved contractor or installation professional.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Itemized quote of the parts, tax, shipping costs and labor to complete the project.</li> <li><input type="checkbox"/> All parts and equipment must be new. Remanufactured or refurbished equipment and parts are not eligible.</li> <li><input type="checkbox"/> Provide manufacturer's specification sheets for the new equipment.</li> <li><input type="checkbox"/> If applicable, new equipment must meet current CEC Building Energy Efficiency Standard Publication explained in <a href="#">CAP Incentive 2019 Guidelines</a>.</li> </ul>
<input type="checkbox"/>	<p><b>Authorization Letter:</b> Provide a letter from the school district governing board (or a duly authorized official with authority to make financial decisions) naming and authorizing an individual to sign the Grant Agreement on behalf of the school district.</p>
<input type="checkbox"/>	<p><b>W-9 Form:</b> Complete and submit IRS form W-9, available from the IRS web site: <a href="http://www.irs.gov/pub/irs-pdf/fw9.pdf">www.irs.gov/pub/irs-pdf/fw9.pdf</a>. APCD will issue form 1099 as required by law.</p>
<input type="checkbox"/>	<p><b>Applications completed by someone other than Applicant:</b> If application was completed by other than a school district employee who was compensated for completing the application, then attach details on the source of payment and the amount paid.</p>





# Reducing Pollution in Schools

## 2020 Community Air Protection Program Application Form

Please print clearly or type all information on this application. One application per school.

### A. APPLICANT INFORMATION

School district name		Mailing address			
City		Zip code		County	
Contact person		Title			
Cell number		Office number			
E-mail address*					
Authorized representative who will sign the Grant Agreement					
Name:			Title:		

**\*Please note:** Failure to provide a valid e-mail address may delay time-sensitive correspondence.

Project (School) name					
Project address					
City		Zip code		County	

### Contact person who filled out this application (if different from above)

Business or school district name					
Contact person					
Address					
City		State		ZIP code	
Phone		E-mail			



## B. Project Description & Existing Equipment

Please describe project below or include in impact assessment (e.g. include general project information such as number and type of air filter systems to be upgraded; how many classrooms or buildings benefitting from upgrade).

An impact assessment must be conducted by the equipment owner or an HVAC engineer to ensure that the new filtration will not adversely affect the existing HVAC system(s). Please attach assessment to application. The assessment must include the following:

- (1) HVAC information such as type of system and associated MERV rating filter.
- (2) Estimated hours of use (based on normal duty-cycle) and maintenance downtime.
- (3) Number of classrooms and students per classroom where air filtration is to be upgraded.
- (4) Size (length, width, and height) of each room to be upgraded.
- (5) Potential increase in energy costs for the new filtration (annual kilowatt-hr \* dollars per kW-hr = annual cost).
- (6) If available, the total ventilation (m<sup>3</sup> /hr) for old and new air filtration systems.

Current in-use air filter information:

- (1) Manufacturer: \_\_\_\_\_
- (2) Model: \_\_\_\_\_
- (3) Old equipment MERV rating and PM removal efficiency (percentage), if available:  
\_\_\_\_\_
- (4) Filter life (number of filters changed annually): \_\_\_\_\_
- (5) Size of filter: Length x Width x Height: \_\_\_\_\_
- (6) Filter material, if known: \_\_\_\_\_
- (7) Duration of filters being changed, if applicable: \_\_\_\_\_

Current in-use air filtration system, if applicable:

- (1) Annual usage (e.g., kilowatt-hours) (hours of use): \_\_\_\_\_
- (2) Manufacturer: \_\_\_\_\_
- (3) Model number: \_\_\_\_\_



(4) MERV rating: \_\_\_\_\_

(5) Pollutant removal efficiency (percentage): \_\_\_\_\_

(6) Type of system: \_\_\_\_\_

(7) Any unscheduled downtime, including duration of downtime and causes of downtime:  
 \_\_\_\_\_

(8) Service/maintenance: \_\_\_\_\_

(9) Warranty: \_\_\_\_\_

**C. New Equipment**

Air Filters:

(1) Manufacturer: \_\_\_\_\_

(2) Model: \_\_\_\_\_

(3) New equipment MERV rating and PM removal efficiency (percentage), if available: \_\_\_\_\_

(4) Annual usage/filter life (number of filters changed annually): \_\_\_\_\_

(5) Size: \_\_\_\_\_

(6) Filter material: \_\_\_\_\_

(7) Duration of filters being changed, if applicable: \_\_\_\_\_

Standalone Air Filtration System:

(1) Manufacturer: \_\_\_\_\_

(2) Model number: \_\_\_\_\_

(3) MERV rating (or certify HEPA if portable air cleaner): \_\_\_\_\_

(4) Clean air delivery rate (CADR): \_\_\_\_\_

(5) Pollutant removal efficiency (percentage): \_\_\_\_\_

(6) Type of system: \_\_\_\_\_

(7) Ventilation rate: \_\_\_\_\_

(8) Any unscheduled downtime, including duration of downtime and causes of downtime:  
 \_\_\_\_\_

(9) Service/maintenance: \_\_\_\_\_

(10) Warranty: \_\_\_\_\_

Public Funding Disclosure: Will the applicant apply for any other grants or public financial assistance for this project?

Yes     No



**D. APPLICANT'S STATEMENT – To be signed by company representative with contract signing authority**

- ❖ I hereby make an application to the San Luis Obispo County Air Pollution Control District (APCD) for emission reduction incentive funding and I understand and agree to the following:
  - In order to receive incentive funds, I must enter into a Grant Agreement (contract) with the APCD and there will be conditions placed upon receiving the grant award. I agree to refund the grant award, or a portion thereof as specified in the Grant Agreement, if it is found that at any time I do not meet those conditions and if directed to do so by the APCD or the California Air Resources Board (ARB).
  - I will not place orders, make purchases or begin any work associated with this project until notified by the APCD that all parties have signed the project's Grant Agreement and it is effective.
  - All information provided with this application will be used by the APCD and/or ARB to evaluate the eligibility of this application to receive incentive funds. APCD/ARB will at its sole discretion determine which program funds, if any, will be used for this project. APCD/ARB staff reserves the right to request additional information of the applicant and can deny the application if such requested information is not provided. APCD will contact applicants who submit incomplete or illegible applications and work with them to complete the application. If the applicant does not respond within 30 days, the application will be suspended; in such cases, the applicant can petition the APCD to re-initiate the application if they supply the previously identified missing information. The APCD may require the applicant to provide updated information.
  - To expedite application processing, APCD's preferred method of communication is through electronic mail. Failure by applicant to provide a valid e-mail address may delay time-sensitive correspondence.
  - Grant programs have limited funds and will terminate upon depletion of program funding. The APCD will honor projects that have been contracted but is under no obligation to honor applications prior to contracting.
  - The APCD will issue IRS form 1099 to grant recipients as required by law. It is the grant recipient's responsibility to determine their tax liability associated with their participation in the grant program.
- ❖ I have reviewed the information contained in this application and all attachments. I certify under penalty of perjury that the information contained in this application, including all attachments and the following statements, is complete, accurate and correct:
  - If the proposed project has been or may be considered for funding by any air district, the ARB, or any other public agency, then I have disclosed the specifics to the APCD.
  - The applicant entity is in compliance and will remain in compliance with all applicable federal, state, and local laws, air quality rules and regulations, and the applicant entity does not have any outstanding/unresolved/unpaid Notices of Violation (NOV) or citations for violations of any federal, state or local air quality regulation.
  - I have the legal authority to apply for incentive funding for the entity described in this application.
- ❖ I agree to the above statements by signing below.

Printed name of company representative with contract signing authority:	Title:
Signature:	Date:

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