



# Transit Bus Replacement

## 2019 Community Air Protection Program Eligibility

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

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### 1. Maximum Funding Amounts:

- Funding is available for the purchase of the new bus, up to a maximum of:
  - \$80,000 for zero-emission buses;
  - \$25,000 for optional low-NOx (near-zero emission CNG or propane) powered replacements.

### 2. Funding Limitations:

- Projects will be funded through AB 617 and are subject to the Carl Moyer guidelines, which have funding limitations based on cost-effectiveness (i.e. award is based on tons of emissions reduced over the term of the grant agreement), so your project may not qualify for the maximum award amount.
- For example, a 2007 (or older) model year bus must have annual operation of just over 30,000 miles to qualify for the maximum award. Fewer annual miles would result in a proportionally lower award and newer model years would be eligible for less funding. The annual mileage is based on the lowest one-year usage over the past two years.
- Actual awards may be limited as the maximum award amounts shown may exceed APCD's available funds.

### 3. Existing Bus Requirements:

- Bus must belong to a fleet of a public transit agency.
- Bus must be in operational condition and in regular use and must be in compliance with all applicable regulatory requirements.
- After delivery of the new bus, the old bus will be destroyed at an approved salvage yard.
- To qualify as benefitting an AB 1550 low-income community, the bus route must have at least one stop within the AB 1550 low-income map zone (see the map at: [ww3.arb.ca.gov/cc/capandtrade/auctionproceeds/lowincomemapfull.htm](http://ww3.arb.ca.gov/cc/capandtrade/auctionproceeds/lowincomemapfull.htm)).

### 4. Replacement Bus Requirements:

- Replacement engine/motor must be certified to an emissions level of 0.10 g/bhp-hr NOx, or cleaner.
- Must operate in a manner consistent with historic usage for the life of the Grant Agreement, with at least 51% of operation in California.



- Must have the same axle and body configuration, and be in the same weight class as the old bus.
- Replacement engine hp may not be greater than 125% of original rated hp of the old engine.
- Documentation of warranty with minimum coverage of 36 months or 50,000 miles, parts and labor, on engine/motor, drive train and batteries or energy storage.





# Transit Bus Replacement 2019 Community Air Protection Application Checklist

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

<input checked="" type="checkbox"/>	<b>Application Requirements for November 30, 2019 Deadline</b>
<input type="checkbox"/>	<b>Completed Application:</b> Complete and submit this checklist and ALL application pages, sign and date in ink.

<input checked="" type="checkbox"/>	<b>Additional Application Requirements, If Your Project is Selected for Funding</b>
<input type="checkbox"/>	<b>Demonstration of Benefit to Low-Income Community:</b> Provide a map and a schedule of stops for the route on which the replacement bus will typically be used.
<input type="checkbox"/>	<p><b>Participating Dealer Quote &amp; Supporting Documents for Replacement Bus:</b> Please work with a participating dealer to provide the following documentation:</p> <ul style="list-style-type: none"> <li>• Quote for the replacement bus, itemizing all standard equipment and options, including tax and shipping costs (warranty costs are not eligible for grant funding);</li> <li>• Manufacturer's specification sheet for replacement bus and engine, with drawing or image showing body style and dimensions;</li> <li>• Availability of the specified bus and the anticipated delivery schedule; and,</li> </ul> <p>Copy of CARB Emissions Executive Order for replacement engine, indicating the model of the engine.</p>
<input type="checkbox"/>	<b>Vehicle Title:</b> Copy of current vehicle title showing applicant's ownership, with no lienholders and no leases.
<input type="checkbox"/>	<p><b>Proof of Vehicle Liability Insurance:</b> Copy of insurance card for the last two years:</p> <p><input type="checkbox"/> Current &amp; <input type="checkbox"/> Prior Year</p>
<input type="checkbox"/>	<b>Certificates of Insurance:</b> Provide current certificates of insurance with your application as evidence of coverage for General Liability and Workers' Compensation.
<input type="checkbox"/>	<b>Authorization Letter:</b> Provide a letter from the transit agency's 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 transit agency.
<input type="checkbox"/>	<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.



<input type="checkbox"/>	<p><b>Applications completed by someone other than Applicant:</b> If application was completed by other than a transit agency employee who was compensated for completing the application, then attach details on the source of payment and the amount paid.</p>
<input type="checkbox"/>	<p><b>Vehicle Purchase:</b> Do not purchase or put any money down on the replacement bus until your grant agreement is fully executed.</p>
<input type="checkbox"/>	<p><b>Certificates of Insurance:</b> Funded projects will be required to provide certificates of insurance endorsing the APCD as additionally insured and loss payee for this project for General Liability, Vehicle Liability and Vehicle Comprehensive and Collision Insurance that covers the replacement cost of the new bus. When these policies, as well as your Workers' Compensation policy are renewed or changed, updated certificates must be submitted to the APCD until the Grant Agreement expires.</p>
<input type="checkbox"/>	<p><b>Vehicle Financing:</b> You may obtain financing via a conventional loan to assist in the purchase of the replacement bus (leasing is not allowed). You must provide a copy of the signed financing contract, and agree to the release of pertinent information by the finance company to the APCD. If the grant will be used as a down payment for the loan, then you must provide evidence that the grant reimbursement payment has been applied to the loan.</p>



**For more information regarding Bus Replacement grants contact Vince Kirkhuff:  
805-781-4247 or vkirkhuff@co.slo.ca.us**

Eligibility and other information presented in this application is supplemental to the full program guidelines which are available from the CARB at [www.arb.ca.gov/msprog/moyer/guidelines/current.htm](http://www.arb.ca.gov/msprog/moyer/guidelines/current.htm).





# Transit Bus Replacement

## 2019 Community Air Protection Application Form

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**Please print clearly or type all information on this application.**

### APPLICANT INFORMATION

Transit agency name		Mailing address			
Contact person		City		State	
Title		Zip code		County	
Phone number	<i>Fill in physical address below if different from mailing address</i>				
Fax number		Physical address			
E-mail address*		City		State	
Cell number		Zip code		County	
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.

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

Business or transit agency name					
Contact person					
Address					
City		State		ZIP code	
Phone		E-mail			

**Public Funding Disclosure**

What **other** grants or public financial assistance will be requested for this project?

Funding Source	Amount

**EXISTING BUS AND ENGINE INFORMATION**

Please complete a separate sheet for each bus if you are applying for multiple buses.

Bus make:	Model:	Model year:	GVWR*:
Vehicle identification number:	Fleet identification number:	License plate:	Odometer reading:
Bus type: <input type="checkbox"/> Transit <input type="checkbox"/> Over-the-road <input type="checkbox"/> Other _____			

\*Please provide the manufacturer's Gross Vehicle Weight Rating, found on a tag on the door frame or in the cab. **This weight rating often differs from what is found on the registration.**

**Existing Engine Information**

Engine make:	Model:	Model year:	Serial number:
Engine emission family number:			HP:
Is bus equipped with a CARB-verified diesel particulate filter? <input type="checkbox"/> No <input type="checkbox"/> Yes; Level 1 <input type="checkbox"/> Yes; Level 2 <input type="checkbox"/> Yes; Level 3			Fuel type:
Engine currently in daily operation? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, please explain):			

**ACTIVITY INFORMATION**

Please provide the following usage information for the past two years of operation of this bus:

Odometer reading approximately one year ago		Odometer reading approximately two years ago	
DATE	MILEAGE READING	DATE	MILEAGE READING
Percentage of miles traveled in California: _____    Percentage of miles in SLO County: _____			
Does this bus currently operate on a route that has at least one stop within an AB 1550 low-income community? (See the map at: <a href="http://ww3.arb.ca.gov/cc/capandtrade/auctionproceeds/lowincomemapfull.htm">ww3.arb.ca.gov/cc/capandtrade/auctionproceeds/lowincomemapfull.htm</a> ) <div style="text-align: center;"> <input type="checkbox"/> Yes    <input type="checkbox"/> No                 </div>			
Will the new bus operate on a route that has at least one stop within an AB 1550 low-income community? <div style="text-align: center;"> <input type="checkbox"/> Yes    <input type="checkbox"/> No                 </div>			

## REPLACEMENT BUS AND ENGINE INFORMATION

Please complete a separate sheet for each bus if you are applying for multiple buses.

Bus make:	Model year:
Bus model:	GVWR*:
Bus type: <input type="checkbox"/> Transit <input type="checkbox"/> Over-the-road <input type="checkbox"/> Other _____	

\*Please provide the manufacturer's Gross Vehicle Weight Rating, found on a tag on the door frame or in the cab. **This weight rating often differs from what is found on the registration.**

### Replacement Engine Information

Engine make:	Model:	Model year:	HP:
Type of Fuel: <input type="checkbox"/> Diesel <input type="checkbox"/> CNG <input type="checkbox"/> Propane <input type="checkbox"/> Electric <input type="checkbox"/> Other: _____			
<p><b>Note:</b> The replacement engine must meet the optional low-NOx certification level of 0.10 g/bhp-hr or cleaner. To verify the NOx level of the engine and confirm the award amount, the APCD must be provided with the emission family number or Executive Order number of the engine that will be installed in the replacement bus. Your dealer should be able to provide this emission information.</p>			

### PROJECT COST INFORMATION

Quoted cost for the new bus. Quote must itemize all standard equipment and options, including tax and shipping costs: \$ _____	<p><b>Note:</b> APCD will determine grant award amount and applicant cost share (if any) for the project from the documentation submitted with this application.</p>
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### FLEET INFORMATION

Number of buses in your fleet:
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### PSIP Compliance

I have read and understand that I am responsible for meeting the requirements of the Periodic Smoke Inspection Program (PSIP). I am either currently in compliance with PSIP requirements or I have paid all penalties for non-compliance and continue to meet requirements since payment. For more information on the PSIP program, see the following CARB web page: <a href="http://www.arb.ca.gov/enf/hdvp/advs351.pdf">www.arb.ca.gov/enf/hdvp/advs351.pdf</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**APPLICANT'S STATEMENT - To be signed by transit agency 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 (CARB).
  - 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.
  - The replacement bus and its certified emission system must operate in a manner consistent with historic usage of the old bus, with at least 51% of operation in California, for the life of the Grant Agreement.
  - All information provided with this application will be used by the APCD and/or CARB to evaluate the eligibility of this application to receive incentive funds. APCD/CARB will at its sole discretion determine which program funds, if any, will be used for this project. APCD/CARB 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 will deliver the old equipment specified in this application to an APCD-approved salvage yard to be permanently removed from service and destroyed within 14 days of the delivery of the new replacement equipment.
- ❖ 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:
  - The replacement bus will be of the same body and axle configuration and be used for essentially the same work as the old bus specified in this application.
  - At least 51% of the operation of the old bus over the past 24 months has been in California.
  - If the proposed project has been or may be considered for funding by any air district, the CARB, 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 transit agency representative with contract signing authority:	Title:
Signature:	Date: