



## 2018 Oklahoma Clean Diesel Grant Program Application [EPA Agreement DS-01F36801]

Date of Application      /      /  
\_\_\_\_\_

\_\_\_\_\_  
Name of Organization

Address	City	State	Zip	County
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Contact Name	Title
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(    )    -	(    )    -	
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Telephone Number	Fax Number	Email Address
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Name of Project Manager (printed/typed) \_\_\_\_\_

Title of Project Manager \_\_\_\_\_

Signature \_\_\_\_\_

Telephone	(    )    -	Fax	(    )    -
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Email \_\_\_\_\_

Name of Technical Contact (printed/typed)  
(if different from the project manager) \_\_\_\_\_

Title of Technical Contact \_\_\_\_\_

Signature \_\_\_\_\_

Telephone	(    )    -	Fax	(    )    -
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Email \_\_\_\_\_

1. For each school bus you plan to replace, please list the gross vehicle weight rating (GVWR), engine model year (EMY), annual fuel gallons, annual miles traveled, and annual idling hours.

For each exhaust control device you plan to install, please list the vehicle type (e.g., transit bus, refuse hauler, school bus, etc.), upgrade type (e.g., diesel oxidation catalyst, selective catalytic reduction systems, etc.), EMY, GVWR, annual fuel gallons, annual miles traveled, and annual idling hours.

Additional sheets may be attached if necessary.

2. How many diesel vehicles do you plan to

replace? \_\_\_\_\_

retrofit exhaust controls? \_\_\_\_\_

3. Estimated award amount (cannot exceed percentage funded as specified in RFP): \$\_\_\_\_\_
4. Estimated amount of matching funds provided by awardee: \$\_\_\_\_\_
5. Estimated total project cost (Question 3 + Question 4): \$\_\_\_\_\_
6. What entity owns, operates, and maintains the vehicles? \_\_\_\_\_
7. What type of entity is this (public school, private school, government or government contractor, or private entity)? \_\_\_\_\_
8. What is the average age of the vehicles in your fleet? \_\_\_\_\_
9. At what age are vehicles in this fleet usually replaced? \_\_\_\_\_
10. Please provide the annual number of individuals riding the vehicles to be retrofitted or replaced.  
\_\_\_\_\_

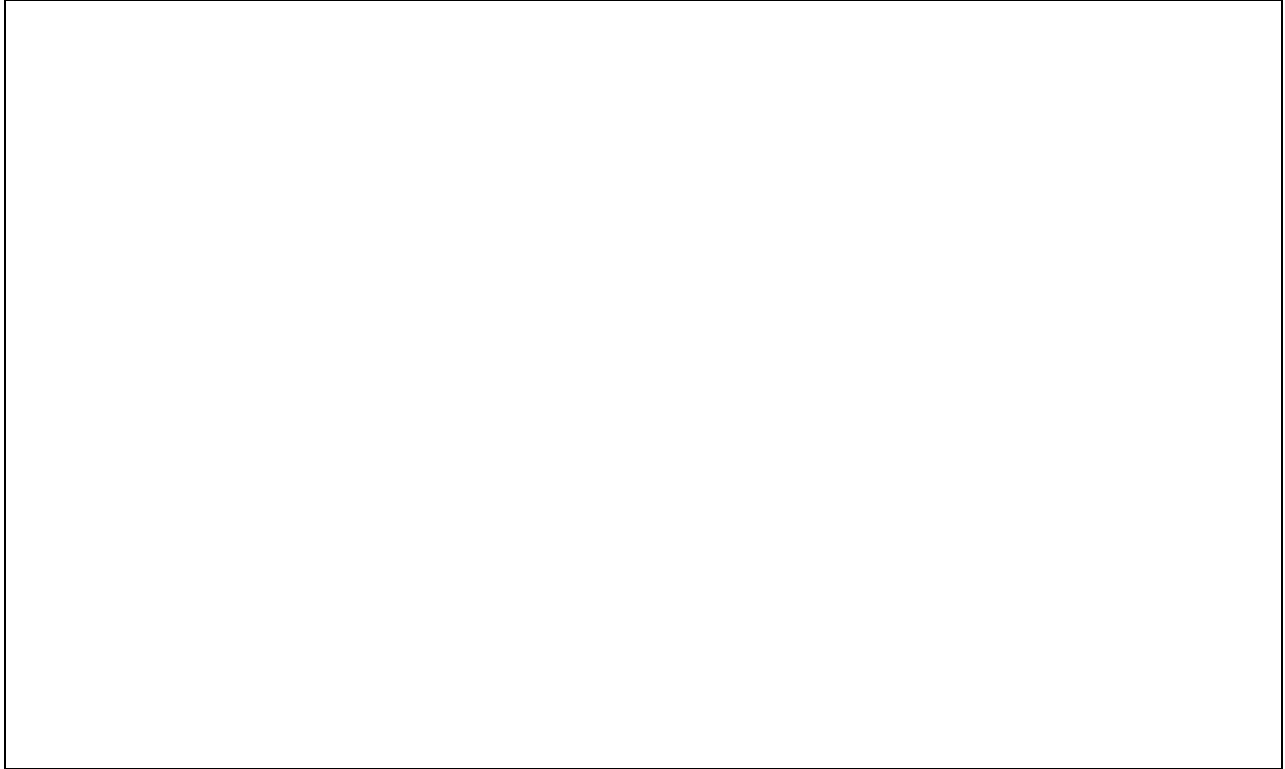
11. For projects affecting school buses, please provide the grade(s) of students the vehicle transports regularly. \_\_\_\_\_
12. For vehicles that function primarily in neighborhoods, please provide the number of households served annually by vehicles to be retrofitted or replaced. \_\_\_\_\_
13. Did you participate in the FY17 Clean Diesel program?  
Please check one:  Yes  No
14. Have you completed your FY17 Clean Diesel project?  
Please check one:  Yes  No  Not applicable
15. I understand that our fleet is required to keep the vehicle(s) replaced and/or equipment installed through this grant in service for a minimum of five years. If the vehicle(s) become(s) inoperable or is/are sold to another entity before the five years are up, DEQ must be notified of the change.  
Please check one:  Yes  No
16. I understand that matching funds are required and that the applicant is responsible for and has adequate funding for this request.  
Please check one:  Yes  No
17. I understand that documentation of scrappage must be provided prior to receiving funds.  
Please check one:  Yes  No
18. I understand that quarterly reporting will be required for one year from the project start date.  
Please check one:  Yes  No
19. I understand that registration (or renewal) with the System for Award Management (SAM) and acquisition of a registered Data Universal Numbering System (DUNS) number are required for all grant recipients.  
Please check one:  Yes  No
20. I understand that all eligible replacement projects must be early attrition projects. Early attrition refers to a project where a vehicle is replaced before that vehicle is scheduled to be replaced. Therefore, any replaced vehicle that is due to be replaced, scheduled to be replaced, or has a life expiration date before September 30, 2022 is not eligible for FY 2018 Oklahoma Clean Diesel Grant Program funds.  
Please check one:  Yes  No
21. I understand that outstanding projects or late completion of projects previously awarded under the Oklahoma Clean Diesel Program may affect eligibility for this funding opportunity.  
Please check one:  Yes  No

22. Provide a detailed project timeline. Please keep in mind that all projects need to be completed by September 1, 2019. Completed projects include all vehicles replaced and/or exhaust controls installed and invoices from subgrantee to DEQ submitted to DEQ. Vehicles and/or equipment must be obtained within 120 days of project start date, and old buses must be scrapped within 90 days of new vehicle acquisition. Reimbursement paperwork must be submitted for the project to be considered complete.

Additional sheets may be attached if necessary.

A large, empty rectangular box with a thin black border, intended for the user to provide a detailed project timeline as requested in the text above.

23. **(For schools and school contractors only)** Briefly describe your existing or proposed idle reduction policy. If no policy exists and you do not plan to instate one, please explain why. Failure to instate an idle reduction policy may be cause for disqualification as it is a requirement for school bus fleets.  
Additional sheets may be attached if necessary.



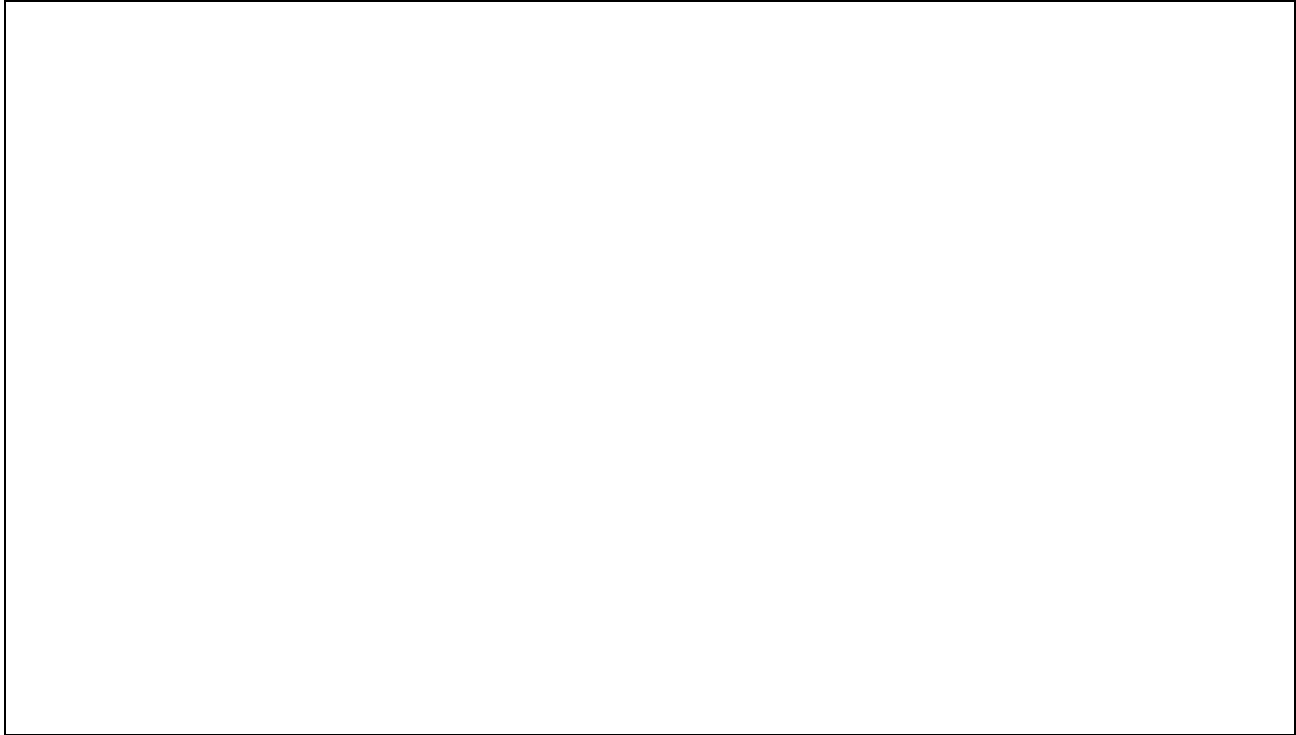
24. Briefly describe your procurement process and provide at least two quotes or price estimates for proposed vehicle replacements and/or exhaust control retrofits. Please refer to Section II.C.3 in the RFP for additional procurement information.  
Additional sheets may be attached if necessary.

25. In which counties does your school district, municipality, or company operate?

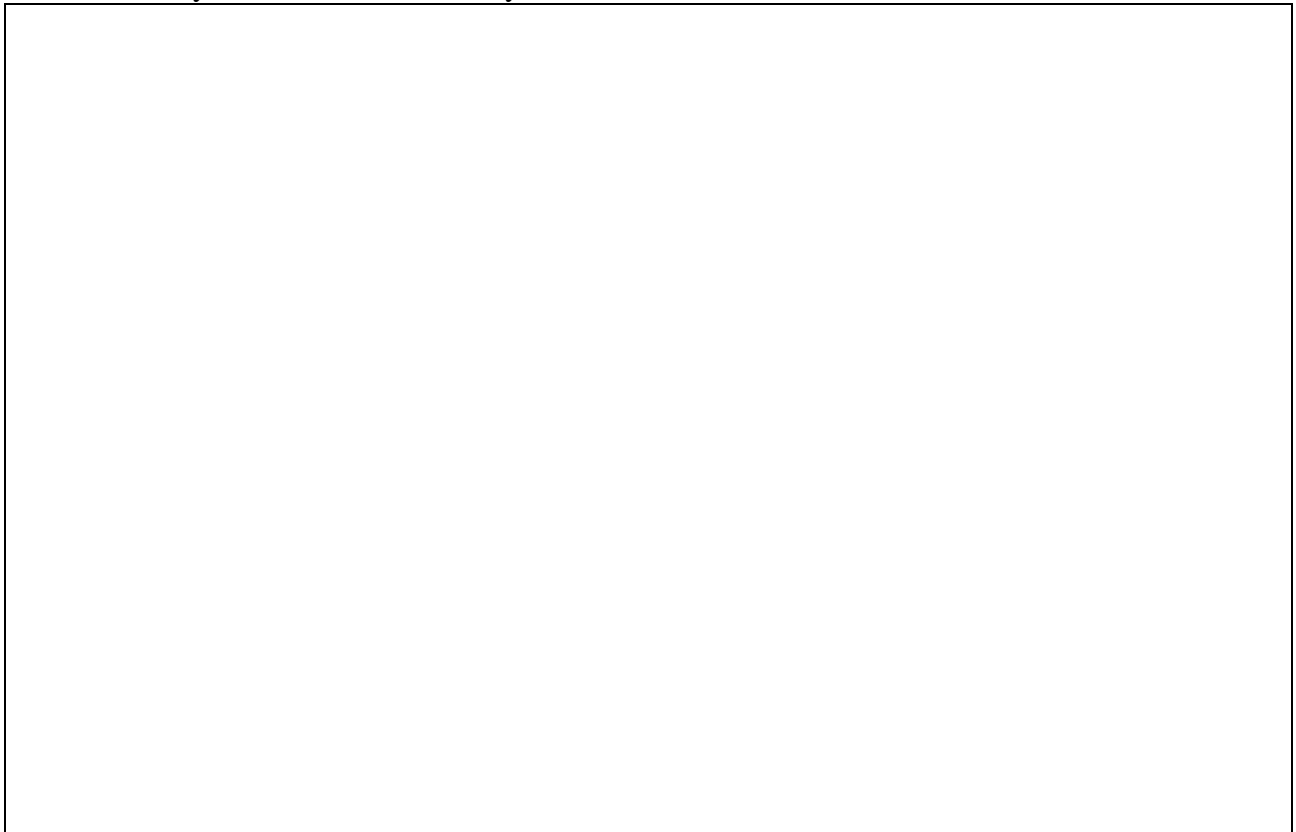
26. Explain the extent to which the proposed project will reduce environmental risks to populations with disproportionately high environmental impacts. Populations which receive disproportionately high environmental impacts include those which work or reside near heavy traffic or sources of high air pollution. Additional sheets may be attached if necessary.

27. Describe your ability to complete the project in a timely manner.

See timeline constraints in Question 22. Additional sheets may be attached if necessary.



28. Provide a thorough budget describing estimated costs for purchase and installation. Additional sheets may be attached if necessary.



29. Certification

The undersigned is an official authorized to represent the applicant. The person signing this document must have the authority to contractually bind the applicant or be the designated fiscal agent.

*I certify that all proposed activities will be carried out; that all grant money received will be utilized solely for the purposes for which it is intended; that records documenting the planning process and implementation will be maintained and submitted when requested, and DEQ is hereby granted access to inspect project sites and/or records. It is understood that if this project is selected a Memorandum of Agreement (MOA) with DEQ will be executed.*

\_\_\_\_\_  
Print Name of Authorized Representative

\_\_\_\_\_  
Title

/ /

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date

Taxpayer ID # \_\_\_\_\_

DUNS # : \_\_\_\_\_