### **APPENDIX A**

# Low Carbon Transportation Greenhouse Gas Reduction Fund (GGRF) Investments and Air Quality Improvement Program (AQIP) Application



California Environmental Protection Agency



STATE OF CALIFORNIA California Environmental Protection Agency AIR RESOURCES BOARD MSCD/ISB/AQIP\_97 (Rev. 08/13)

## **AQIP APPLICATION**

Please print clearly or type all information on this application.

1. Project: 36T				
Company Name/Air District/Organization Name/Individual Name: 36T				
3. Business Type: 36T				
4. Contact Name and Title: 36T				
Person with Contract Signing Authority (if different 36T	from above)/Air Pollution Control Officer (APCO):			
Mailing Address and Contact Information:				
Street: 36T				
City: 36T State: 3	Zip Code: 36T			
Phone: ( XXX ) XXX-XXX	Fax: ( \ \ \ \ \ )			
E-mail: 36T				
☐ I have read and understood the terms and condition	ions of the Sample Grant Agreement.			
I hereby certify under penalty of perjury that a	Il information provided in this application			
and any attachments are true and correct.				
Printed Name of Responsible Party or APCO:	Title: 36T			
36T				
Signature of Responsible Party or APCO:	Date:			
TI. 15 ( 0 (iii ii )				
Third Party Certification (if applicable)				
I have completed the application, in whole or	in part, on behall of the applicant.			
Printed Name of Third Party: 36T	Title: 36T			
Signature of Third Party:	Date:			
	Bato.			
Amount Being Paid for Application Completion in Whole or Part: 36T	Source of Funding to Third Party: 36T			

### Attachment 1: APPLICANT QUALIFICATIONS

- Qualifications Narrative: Provide an attachment describing your experience and expertise developing, implementing, or administering similar incentive projects and working with or outreaching to vehicle purchasers and lessees, vehicle manufacturers, vendors, and other stakeholders, and identify how this background will enable you to efficiently and effectively implement the Clean Vehicle Rebate Project (CVRP). This narrative should not exceed two pages.
- 2. <u>Staff Information</u>: Provide information for each staff member to be involved in developing, implementing, or administering CVRP. Clearly identify staff proposed for day-to-day project implementation. Attach resumes (personally identifiable information must not be included or must be redacted).

Name:	Hourly rate:
Phone:	Email:
Title:	
Expected duties:	
Name:	Hourly rate:
Phone:	Email:
Title:	
Expected duties:	
Name:	Hourly rate:
Phone:	Email:
Title:	
Expected duties:	

If more room is needed, this page may be copied or recreated.

3. <u>Subcontractor Information:</u> Applicants may partner with other entities. Responsibility for deliverables lies with the primary applicant. Provide the names and information for any and all subcontractors and partners. Attach resumes and letters of commitment.

Name:	Housely rote:
name:	Hourly rate:
Phone:	Email:
Title:	
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Expected duties:	
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Name:	Hourly rate:
Phone:	Email:
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Phone:	Email:
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#### Attachment 2: PROPOSED BUDGET

Please describe your proposed budget for completing the tasks of the CVRP Grantee, consistent with the Draft Sample Implementation Manual for the Fiscal Year 2016-17 Clean Vehicle Rebate Project (Sample Implementation Manual), the Air Quality Improvement Program (AQIP) and Low Carbon Transportation Investments from Greenhouse Gas Reduction Fund (GGRF) CVRP Draft Sample Grant Agreement FY 2016-17 (Sample Grant Agreement), your Project Implementation Plan, and the requirements of this solicitation.

Your proposed budget must include the total rebate processing fee, including all estimated labor and material costs associated with managing the project, records retention, and a description of any applicable commitments for in-kind services and match funding. The rebate processing fee must include total costs to cover all of FY 2016-17 and the closeout of FY 2016-17. Upon entering into a grant for either of the next two fiscal years, the Grantee will be required to provide an updated budget that includes the implementation of the next fiscal year, the closeout of that fiscal year, the beginning of the following fiscal year, and the costs to transfer all project data and website(s) to the next administrator. The rebate processing fee must not exceed seven percent of total project funding. Applicants may use the Sample Proposed Budget (on page 25) to summarize their proposed budget.

In-kind services refer to resources or services contributed by the Grantee to manage the project but not charged to CVRP. Please be as specific as possible when describing in-kind services (i.e. itemize staff time, infrastructure, or other costs that are being committed). In-kind services provided in the form of outreach efforts must be appropriate for a statewide rebate program. In-kind services committed in this application must be documented by the Grantee in the CVRP Final Report (see Section H (8) of Sample Grant Agreement).

Match funding refers to funds contributed by the Grantee to CVRP to fund additional eligible vehicles. Match funding does not include in-kind match (i.e. funding provided by the applicant for other similar incentive projects or programs). Only direct match funding contributed to CVRP will be considered in the scoring this application. An applicant may propose that match funding be used to fund only vehicles in a specific region (such as a county or air district). The applicant must include a letter describing and authorizing any proposed match funding commitment as part of this application (see Section E (9) of the Sample Grant Agreement for a more detailed description of Match Funding).

# 2-1: Sample Proposed Budget

(Applicant may modify this sample budget to meet their specific needs. This page may also be edited, or deleted if not used)

DIRECT LABOR	<u>HOURS</u>	RATE	TOTAL	IN-KIND MATCH
Program Manager	@			
Staff Assistant	@			
Technician	@			
Clerical	@			
			\$	\$
SUBCONTRACTOR(S) COST	ITEMIZED		\$	\$
INDIRECT COSTS (OVERHE	AD AND FRINGE	BENEFITS)		
Overhead Rate				
Fringe Benefits				
			\$	\$
DIRECT COSTS (EXCEPT LA	ABOR)		•	
Travel Costs				
Equipment and Suppli	es (Itemized)			
Other Direct Costs (Ite	emized)			
Records Retention				
			\$	\$
			Total	Total
REBATE PROCESSING FEE (Not to exceed 7% of total proj	ect funds)		TOTAL \$	
TOTAL COSTS		ΔPP	TOTAL \$	

### **Attachment 3: PROJECT IMPLEMENTATION PLAN**

Please provide your Project Implementation Plan for completing key tasks required of the CVRP Grantee as outlined in Exhibit A of the Sample Grant Agreement. The Project Implementation Plan should be no longer than five pages and must contain a clear and concise description of how key tasks will be completed. In addition, include a timeline for project completion.

Be specific. Where applicable, applicants should provide examples of past experiences in successfully completing similar tasks.

### Attachment 4: APPLICANT RESOURCES TO IMPLEMENT THE PROJECT

In no more than one page, identify the staff, infrastructure, funding or other resources you have available and will utilize to effectively and efficiently implement CVRP.

Personnel costs, fringe benefit costs, operating expenses including rent and supplies, equipment costs, overhead, records retention, or other rebate processing costs needed to implement the project should be detailed as part of your Proposed Budget (see Attachment 2).

### Attachment 5: CONFLICT OF INTEREST DECLARATION

All applicants must disclose any Conflict of Interest with their ability to fulfill the duties of the CVRP Grantee. Summarize your organization's or any subcontractor's (as identified in Attachment 1 of this application) current, ongoing, or pending direct or indirect interest, which poses an actual, apparent, or potential conflict of interest with your ability to fulfill the duties of the CVRP Grantee. These may include but are not limited to financial arrangements with or interest in zero-emission and plug-in hybrid vehicle manufacturers, dealers, fleets, or related organizations. ARB may consider the nature and extent of any potential or apparent conflict of interest in evaluating, considering, or scoring the application and may disqualify the applicant at ARB's sole discretion.

## Attachment 6: STD. 204 PAYEE DATA RECORD

Please fill out and submit as a part of this application the STD. 204 Payee Data Record:

http://www.dgs.ca.gov/dgs/ProgramsServices/Forms/FMC/search/resultsNumber.aspx?number=204