



Application Form: 2017 Alternative Fuel Vehicle (AFV) Conversion Grants

For Office Use Only:

Application Number: _____ *Date Received:* _____

Section 1. Contact Information for Applicant

Table 1-1. *Please provide contact information for the applicant organization's **Authorizing Agent** (person who is authorized to sign the grant contract on behalf of the organization). The applicant must be the legal entity who will own and register in Ohio the vehicle(s) proposed for purchase with grant funds, or the legal entity who owns and has already registered in Ohio the vehicle(s) proposed for conversion with grant funds.*

a. Full name of Organization:	
b. Federal Employer Identification Number (EIN):	
c. Street Address:	
d. City:	
e. State:	
f. Zip Code:	
g. County:	
h. Name of person serving as Authorizing Agent:	
i. Authorizing Agent Phone Number:	
j. Authorizing Agent E-mail Address:	

Table 1-2. *Contact Information for **Project Director** (person who will oversee the purchase or installation of equipment and implementation of the project).*

a. Project Director (Primary Contact):	
b. Title:	
c. Street Address:	
d. City:	
e. State:	
f. Zip Code:	
g. Phone:	
h. Fax:	
i. E-mail Address:	
j. Alternative or Additional Contacts (Name, Title, Phone, Email):	

Table 1-3. *Contact Information for applicant's **Fiscal Agent** (organization treasurer or person who will provide proof of purchase and payment for grant expenditures)*

a. Fiscal Agent:	
b. Title:	
c. Street Address:	
d. City:	
e. State:	
f. Zip Code:	
g. Phone:	
h. Fax:	
i. E-mail Address:	
j. Alternative or Additional Contacts (Name, Title, Phone, Email):	

Section 2. Applicant Certification Statement

*Instructions: Please have the Authorizing Agent (the person authorized to sign contracts on behalf of the applicant organization) read the Statement of Certification below, **check every applicable box, and sign** the certification statement in Table 2-1, row a. After the Authorizing Agent has signed, scan and save the entire application document with all attachments as a single PDF file, to be submitted via email to derg@epa.ohio.gov. If the project is selected for funding, this statement will become a legally binding exhibit in the grant agreement.*

Certification Questions

1. Does the applicant and/or company have any outstanding financial liabilities with state or local governments in Ohio? Does the applicant and/or company owe: a.) Any delinquent taxes to the State of Ohio (the "State"), a state agency or a political subdivision of the State such as a city or county? b.) Any monies to the State or a state agency for the administration or enforcement of the environmental laws of the State? c.) Any other monies to the State, a state agency or a political subdivision of the State that are past due? d.) Is the company the subject of any existing tax lien; e.) Is the company subject to any unresolved finding for recovery issued by the Ohio Auditor of State?
 Yes No
2. Has the applicant, related companies, or any officers: a.) been convicted of a felony b.) Been convicted of or enjoined from any violation of state or federal securities law? c.) been a party to any consent order or entry with respect to an alleged state or federal securities law violation? d.) been a defendant in a civil or criminal action?
 Yes No

If you have answered yes to any of the above, please provide a detailed explanation including, but not limited to, the location, amounts, and case identification numbers (if applicable) on a separate sheet.

Certification Statement

I certify that to the best of my knowledge the information contained in this application and in the supplemental material is correct and complete. I certify that the funding requested satisfies the eligibility requirements for this Program as represented in the Request for Proposals and related materials. I certify that I understand that the funding under this Program is subject to restrictions and other conditions listed in the Program Request for Proposals, including (inter alia):

- The applicant will use the funding under this Program for the specific purposes defined in the Program Request for Proposals.

- The applicant certifies that the vehicles to be purchased or converted to alternative fuel operation under this Program conform to the Program requirements defined in the Program Request for Proposals.
- The applicant will maintain the new or converted vehicle for a minimum period of five years from the date of delivery or installation.** As needed, the applicant will avail itself of the warranty in order to ensure that the vehicle or conversion equipment funded under this Program remains in good working order for at least five years following installation.
- The applicant will not use funding under this Program to purchase hardware or services for which the applicant has received, or will receive, payment from another source or under another program.
- The applicant attests that, of the total number of miles that the recipient or any employee or agent of the recipient will drive the alternative fuel vehicle, over half will be within the state of Ohio.**
- The applicant will provide the Ohio EPA access to vehicles and equipment being funded by this Program, facilities where the vehicles and equipment are located, and documentation related to funding received from this Program, based on reasonable notice of a request for such access.
- The applicant attests that any employee or agent of the recipient will use only fuel that is compatible with the equipment purchased or installed with funding from the Program, per the manufacturer's specifications.**
- The applicant has received approval from the organization's governing body, to apply and make use of the funding under this program.
- The applicant will follow applicable federal and State of Ohio laws to competitively procure the products and services funded under this project.
- Where applicable under ORC 3517.13(I) or ORC 3517.13(J), the applicant's Authorizing Agent or spouse has not made, within the two previous years, one or more contributions totaling in excess of \$1,000 to the Governor or his campaign committees.
- Where applicable, the applicant is in compliance with the Federal Drug-Free Workplace Act of 1988 (41 USC Section 701, et seq.); state ethics laws and conflict of interest laws; and state regulations covering non-discrimination in hiring and affirmative action (ORC 125.111).
- I authorize Ohio EPA to make any necessary inquiries to verify the information that I have presented. I acknowledge that the information in this application is not confidential and may be released as required by the Program.

As an authorized agent of the Applicant, I hereby submit this Application to the State of Ohio, Environmental Protection Agency. I understand that any false statement in this record may subject the Applicant and Signer to criminal prosecution. I understand that additional information may be requested. I also understand that this document in no way constitutes a commitment of funds by the State of Ohio for any of its programs.

I hereby represent and certify that the foregoing and attached information, to the best of my knowledge and belief, is true, complete and accurately describes the proposed activity/project for which the financial assistance is being sought. I am aware of Ohio Revised Code Sections 9.66(C) and 2921.13(D)(1) which outline penalties for falsification which could result in the return of all monies received and the forfeiture of all current and future financial assistance benefits as well as a fine of not more than \$1,000 and/or a term of imprisonment of not more than one hundred and eighty (180) days. I further agree to inform the Ohio Environmental Protection Agency of any changes in the foregoing information, which may occur prior to the time the Applicant, and the Ohio Environmental Protection Agency execute an Agreement. Further, I hereby authorize the Ohio Environmental Protection Agency to confirm statements contained within this application.

The undersigned warrants, certifies and represents that certain information in their application may be subject to the Open Public Records Act.

Table 2-1. Applicant Certification Signature

a. Signature of Applicant Authorizing Agent:	
b. Date:	
c. Name <i>(typed)</i> :	
d. Title or relationship to applicant organization:	
e. Contact Information <i>(If different than the person identified in Table 1-1 of the Application)</i> :	

Section 3. Project Information

Table 3-1. Type of Alternative Fuel Vehicle Project *Indicate the number of proposed vehicles in each category.*

	New Alternative Fuel Vehicle Purchase
	New Alternative Fuel Vehicle Lease
	New Bi-Fuel or Dual Fuel Vehicle Purchase
	New Bi-Fuel or Dual Fuel Vehicle Lease
	Gasoline Vehicle Conversion to Run Solely on Alternative Fuel
	Diesel Vehicle Conversion to Run Solely on Alternative Fuel
	Gasoline Vehicle Conversion to Run as a Bi-Fuel or Dual-Fuel Vehicle with Alternative Fuel _____
	Diesel Vehicle Conversion to Run as a Bi-Fuel or Dual-Fuel Vehicle with Alternative Fuel

Table 3-2. Type of Alternative Fuel To Be Used *Indicate the number of proposed vehicles in each category.*

	Solely on Compressed Natural Gas (CNG)
	Solely on Liquid Natural Gas (LNG)
	Solely on Liquid Petroleum Gas (LPG, including propane and butane)
	Bi-Fuel or Dual Fuel System with Compressed Natural Gas (CNG)
	Bi-Fuel or Dual Fuel System with Liquid Natural Gas (LNG)
	Bi-Fuel or Dual Fuel System with Liquid Petroleum Gas (LPG including propane and butane)

Table 3-3: Vendor Information *If using more than one vendor, please copy and paste this table as needed to provide complete information for each vendor. New alternative fuel vehicles must be purchased from an Original Equipment Manufacturer (OEM), automobile retailer, or after-market conversion facility. Alternative fuel conversions of traditional vehicles must be performed by an after-market conversion facility or someone appropriately trained to ensure the conversion meets the terms of the US EPA or California Air Resources Board certification. Attach a dated, detailed price quote from each proposed vendor, that clearly identifies the components that are eligible for reimbursement from the grant (adjusted purchase price for new alternative fuel vehicle purchases, or parts and equipment for alternative fuel conversions).*

a. Name of Vendor:	
b. Type of Vendor (original equipment manufacturer (OEM), automobile retailer, or after-market conversion facility):	
c. Full Address:	
d. Contact Name:	
e. Telephone Number:	
f. Email:	
g. Service or product being provided:	

Table 3-4: Fueling Information *Provide the primary location where the majority of new or converted vehicles funded will be refueled with the alternative fuel. Please add lines as needed to provide information on multiple fueling locations.*

a. Full Address:	
b. Operated by:	

Section 4: Project Budget

Supporting documentation for each cost is required to be submitted with your application. Applicants are encouraged to seek competitive pricing for these products, and must follow their own procurement procedures as established under state law. It is not required to attach more than one quote to this application, but the applicant should keep on file records of price quotes it considered, in order to be able to demonstrate upon request that competitive procurement was conducted. Attach a hard copy of a price quote from a vendor as supporting documentation in the Attachments section.

Please label the vendor price quotes as “Supporting Documentation for Section 4.” The price quote must be on the vendor’s letterhead. The price quote must include the name of the grant applicant, as well as a clear description of the services and equipment to be provided.

Table 4-1: Budget for New Vehicle Purchases Complete table only through line f if all vehicles proposed for purchase are offered at the same price. Add lines as needed if vehicles proposed for purchase are offered at more than two different prices.

Budget worksheet for New Alt Fuel Vehicle Purchases	Amount
a. Full purchase price per vehicle (from Vendor Quote) =	
b. Adjusted purchase price per vehicle (from Vendor Quote) = (See application guidelines for definition of adjusted purchase price.)	
c. Adjusted purchase price x 50% =	
d: enter the lessor of line c or \$25,000 =	
e. Number of new vehicles at this price =	
f. Grant Request for vehicles at this price: multiply (d) times (e) =	
g. Full purchase price per vehicle (from Vendor Quote) =	
h. Adjusted purchase price per vehicle (from Vendor Quote) = (See application guidelines for definition of adjusted purchase price)	
i. Adjusted purchase price x 50% =	
j: enter the lessor of line i or \$25,000 =	
k. Number of new vehicles at this price =	
l. Grant Request for vehicles at this price: multiply (j) times (k) =	
m. TOTAL Grant Request for New AVF Purchases = (sum of line f plus line l)	

Table 4-2: Budget for Traditional Vehicle Conversions Complete table only through line f if costs for conversion parts and equipment are the same for all vehicles requested. Add lines as needed if more than two different prices are anticipated for vehicle conversions.

Budget worksheet for traditional fuel vehicle conversions	Amount
a. Full conversion cost per vehicle (from Vendor Quote) =	
b. Eligible equipment cost per vehicle conversion (from Vendor Quote) =	
c. Eligible equipment cost x 50% =	
d: enter the lessor of line c or \$25,000 =	
e. Number of vehicles to be converted at this cost =	
f. Grant Request for vehicle conversions at this cost: multiply (d) times (e) =	
g. Full conversion cost per vehicle (from Vendor Quote) =	
h. Eligible equipment cost per vehicle conversion (from Vendor Quote) =	
h. Eligible equipment cost per vehicle conversion (from Vendor Quote) =	
i. Eligible equipment cost x 50% =	
j: enter the lessor of line i or \$25,000 =	
k. Number of vehicles to be converted at this cost =	
l. Grant Request for vehicle conversions at this cost: multiply (j) times (k) =	
m. TOTAL Grant Request for Vehicle Conversions = (sum of line f plus line l)	

Section 5. Project Schedule

The purpose of this section is to provide the schedule for completing all major project items within 18 months of the grant award (the grant project period). Some of the major milestones for the project are already listed in the Summary Schedule below. Please identify your expected completion dates for these items. In addition, you may choose to insert additional milestones and completion dates, as needed, using the blank rows provided. Please discuss in the project scope description narrative any scheduling issues that may prevent the project from being completed on schedule.

Table 5-1. Summary Project Schedule

Project Milestone	Completion Date <i>(Enter dates or number of days following approval of the application)</i>
Place order with vendor for the purchase of new alternative fuel vehicles, or schedule with vendor(s) to convert traditional vehicles to alternative fuel operation (due 90 days from notification of grant award).	
Initiate vehicle conversions	
Take delivery of new alternative fuel vehicles	
Complete vehicle conversions	
Submit Request for Payment and project documentation to Ohio EPA (required within 18 months from the date the grant agreement is executed).	

Section 6: Project Scope Description Narrative

Please use the space below, or attach separate pages to the application, to provide the information requested in Sections 4.2 and 4.3 of the Application Guidelines.

Section 7: List of Attachments

Please identify each attachment to your application in Table 7-1 below. Clearly label attachments with both the attachment name and the number of the section the attachment supports. Some of the expected attachments are listed below. Please add to the list as needed so that each of your application's attachments is identified.



Supporting Documentation

Table 7-2. List of Attachments

Name of Attachment	Supporting Documentation for which Application Section	Attached to Application?	Number of Pages in Attachment
Signed Applicant Certification Statement (only if scanning and submitting separately from the application form)	Section 2	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Fleet Data Reporting Spreadsheet for Proposed New Vehicle Purchases	Section 3	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Fleet Data Reporting Spreadsheet for Proposed Traditional Vehicle Conversions	Section 3	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Vendor Price Quotes	Section 4-1 or 4-2	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Project Scope Description Narrative (only if scanning and submitting separately from the application form).	Section 6	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Section	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Section	<input type="checkbox"/> Yes <input type="checkbox"/> No	