

GREAT BASIN UNIFIED AIR POLLUTION CONTROL DISTRICT

APPLICATION

HEAVY-DUTY ENGINE PROGRAM
AGRICULTURAL PUMP ENGINE COMPONENT

DIESEL ENGINE TO ELECTRIC MOTOR REPOWER OPTION

Please return all completed applications to:
SJVAPCD Emission Reduction Incentive Program
1990 East Gettysburg Avenue Fresno, CA 93726-0244

SECTION 1 - APPLICANT INFORMATION (PLEASE PRINT OR TYPE)

ORGANIZATION INFORMATION		
1. Organization, Company, or Proprietor's Name (as it appears on Form W-9):		
2. Business Type (check appropriate box): <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Government <input type="checkbox"/> Other:		
3. Tax ID: Taxpayer ID Number (TIN) _____ OR Social Security Number (SSN) _____		
4. Address:		
5. City:	6. State:	7. Zip Code:
8. Mailing Address (if different from above):		
9. City:	10. State:	11. Zip Code:
12. Number of diesel engines to be repowered:		
13. Have you applied to any other grant programs for any engines in this project? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please contact ERIP Staff at (559) 230-5800 before completing this application.		
PRIMARY CONTACT INFORMATION		
14. First and Last Name:		15. Title:
16. Phone Number:	17. Fax Number:	
18. Alternate Contact Number:	19. Email:	
CONTRACT SIGNING AUTHORITY INFORMATION		
20. First and Last Name:		21. Title:

*****COMPLETE A SEPARATE SHEET FOR EACH ENGINE*****

ENGINE ____ OF ____.

SECTION 2 - ACTIVITY INFORMATION (PLEASE PRINT OR TYPE)

1. Engine Address (or location by nearest cross streets):		
2. City:	3. Zip Code:	4. Well Site/Pump #:
5. County of Operation (check all that apply): <input type="checkbox"/> Alpine <input type="checkbox"/> Inyo <input type="checkbox"/> Mono <input type="checkbox"/> Other, specify: _____		
6. Primary Function of Engine: <input type="checkbox"/> Crop Irrigation <input type="checkbox"/> Other, explain: _____		
7. Date Engine was Originally Installed or Initially Operated at This Facility: Month _____ Year _____		
8. Engine Type: <input type="checkbox"/> Stationary Deep Well <input type="checkbox"/> Trailer Mounted Deep Well (transportable) <input type="checkbox"/> Stationary Booster <input type="checkbox"/> Trailer Mounted Booster (transportable) <input type="checkbox"/> Other, explain: _____		
9. Estimated Annual Operation (in hours):		
10. % Use in GBUAPCD:	11. % Use in CA:	
12. Is this engine operational? <input type="checkbox"/> Yes <input type="checkbox"/> No, this engine is ineligible for funding		
13. Utility Company (check one): <input type="checkbox"/> Pacific Gas & Electric (PG&E) <input type="checkbox"/> Southern California Edison (SCE) <input type="checkbox"/> Other, please specify: _____		
14. When would this engine be available for operational inspection? Time(s): <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon Day(s): <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri		

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1. Engine installed prior to 01/01/2004: <input type="checkbox"/> No <input type="checkbox"/> Yes

*****COMPLETE A SEPARATE SHEET FOR EACH ENGINE*****

ENGINE ____ OF ____.

SECTION 3 – EQUIPMENT INFORMATION (PLEASE PRINT OR TYPE)

CURRENT ENGINE	
1. Engine Make:	
2. Engine Model:	3. Model Year:
4. Intermittent Horsepower Rating:	
5. Serial Number (engines with unknown serial numbers are ineligible for funding):	
6. US EPA Engine Family Name (if available):	
7. Engine Tier: <input type="checkbox"/> Uncontrolled, Tier 0 (50 hp and greater ineligible) <input type="checkbox"/> Tier 1 <input type="checkbox"/> Tier 2 <input type="checkbox"/> Tier 3	
New Electric Motor	
8. Electric Motor Manufacturer:	
9. Electric Motor Model:	10. Model Year:
11. Horsepower Rating:	
12. If the horsepower rating of the new electric motor is greater than 125% of the current engine, please explain why the additional horsepower is needed:	
13. Motor Position: <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical	
14. Motor Efficiency: <input type="checkbox"/> Standard <input type="checkbox"/> Premium	
15. Total Cost of New Electric Motor Including Installation (should match quote):	

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2. Project Life:	3. Functioning Usage Meter? <input type="checkbox"/> No <input type="checkbox"/> Yes
4. Serial Number of New Electric Motor:	
5. Estimated Annual Energy Usage (kW-h):	
6. Is the Current Engine Under Moyer Agreement? <input type="checkbox"/> No <input type="checkbox"/> Yes, project number: _____ Date Installed: _____	

SECTION 4 – DEALER/INSTALLER INFORMATION (PLEASE PRINT OR TYPE)

DEALER		
1. Electric Motor Dealer Name:		
2. Address:		
3. City:	4. State:	5. Zip Code:
6. Contact Name:		
7. Phone Number:	8. Fax Number:	9. Email:
INSTALLER		
10. Electric Motor Installer Name (if different from above):		
11. Address:		
12. City:	13. State:	14. Zip Code:
15. Contact Name:		
16. Phone Number:	17. Fax Number:	18. Email:

THIRD PARTY INFORMATION

This section **must be completed** if any part of the application was filled out on your behalf, by a third party. Please sign and date in **blue ink**. (PLEASE PRINT OR TYPE)

1. Contact Name:	2. Title:
3. Business Name:	4. Phone Number:
5. Cost of Services (not eligible for funding reimbursement):	6. Source of Funds to Pay for Third Party Services:

I hereby certify that all information provided in this application and any attachments are true and correct to the best of my knowledge, and that GBUAPCD funds may not be utilized to compensate me for my services.

Third Party Signature

Date

CERTIFICATIONS

*****Please initial and sign in blue ink*****

I have read the Eligibility Criteria and Application Guidelines and agree to adhere to its requirements and **all** the following terms and conditions by **initialing each of the following sections**:

Initial _____ The emission reductions obtained through this program are **not** required by any federal, state, or local regulation, memorandum of agreement/understanding (MOA/MOU) with a regulatory agency, settlement agreement, mitigation requirement, or other legal mandate.

Initial _____ Projects funded by GBUAPCD will **not** be used as marketable emission reduction credits, to offset any emission reduction obligation, or for credit under any federal or state emission averaging, banking and trading program.

Initial _____ Proposed project(s) has not received funding or is under agreement with any other air district, ARB, or any other public agency. Any current financial incentive that directly reduces the project cost; including tax credits or deductions, grants, or other public financial assistance for the same engine or equipment; must be disclosed to the SJVAPCD. The consequences of submitting multiple applications for the same engine or equipment, and non-disclosure of any current financial incentive include: disqualification of the engine/equipment from participation in the project, disqualification of the applicant from submitting any future applications for any funding, and/or discipline up to and including civil or criminal penalties.

Initial _____ Seventy-five percent (75%) of the new electric motor’s annual usage will be within GBUAPCD boundaries.

Initial _____ Comply with the reporting requirements and keep appropriate records through the full term of the agreement, as determined by the SJVAPCD and ARB.

Initial _____ Maintain replacement value insurance on the new electric motor.

The maximum eligible incentive amount is based on the horsepower of the new electric motor. Funding is capped at the following horsepower levels for each new motor, not to exceed 85 percent of eligible costs:

Horsepower Rating	Dollar/Horsepower
26-99	\$150
100-199	\$130
200-499	\$140
500-600	\$150

Initial _____ The maximum eligible incentive amount is calculated up to the cost-effectiveness limit, and may not necessarily reflect the maximum funding allowed according to the dollar per horsepower funding cap. Additionally, the incentive amount may be reduced after the claim for payment has been finalized, depending on all eligible items invoiced. If the horsepower of the new electric motor is greater than 125% of the current engine, the maximum eligible incentive amount may be less than what is reflected on this table (see Eligibility Criteria and Application Guidelines).

Initial _____ I hereby certify that all information provided in this application and any attachments are true and correct to the best of my knowledge.

Initial _____ I agree not to purchase or install the new electric motor prior to agreement execution.

Contract Signing Authority Signature

Date

APPLICATION PACKET CHECKLIST

When submitting a project for consideration, submit a **complete** application packet. An incomplete application packet will lengthen the application processing time and delay possible incentive funding. A complete application packet includes the following items:

- Completed **Application**, all six (6) pages. All fields are required unless otherwise indicated. Any field that is left blank may result in an incomplete application, delaying the application process until the missing information is obtained or submitted.
- Completed **Certifications** section, page five (5), initialed and signed in **blue ink**.
- First page of IRS Request for Taxpayer Identification Number and Certification Form (**Form W-9**).
 - ❖ The information entered into Section 1 of the application must be **identical** to the information on the Form W-9, as this information will be used to generate all binding documents and be used to report incentive funding to the IRS.
 - ❖ A copy of the IRS Form W-9 can be downloaded at www.irs.gov or by calling 1-800-829-3676.
 - ❖ If your business is a Limited Liability Company (LLC), please follow the instructions found on the Form W-9.
- Copy of the completed corresponding **Electric Service Provider Application or Letter of Intent** (PG&E application, SCE letter of intent, etc.).
 - ❖ A copy of subsequent letters from the service provider which clarifies the requirements to install reduced-voltage starting equipment (i.e., PG&E Letter, SCE Engineering Report, etc.) will be requested by District staff at a later date. Please keep these letters available and ready for submittal.
- Dated and itemized dealer **quote** for the new electric motor and eligible equipment. The quote must, at a minimum, include the following:
 - ❖ The applicant/organization name and address. (Must match the information in Section 1 of this application)
 - ❖ The electric motor dealer name and address.
 - ❖ The electric motor make, model and horsepower.
 - ❖ A complete and detailed breakdown of all costs: new electric motor, additional equipment and materials (i.e., head shaft, service pole, pump panel, etc.), installation labor (including the total estimated labor hours and labor rate per hour for the project, but excluding any well work or irrigation plumbing), and sales tax with the percentage indicated (if applicable, indicate whether the sales tax is at an agricultural tax rate). Please list all additional equipment and materials separately in a line item format.
- If applicable, the completed **Third Party Information** section, signed in **blue ink**.
 - ❖ If a third party filled out any part of the application on your behalf, the Third Party Information section must be completely filled out and signed.
- For applicants who are municipalities, a copy of the **Board Resolution** which approves participation in the District's incentive program must be submitted.

Please retain a full copy of the completed application for your own records.

For additional assistance, please contact SJVAPCD staff in the Emission Reduction Incentive Program at (559) 230-5800.