

DERA School Bus Rebate Application

OMB Number: 2060-0686 Expiration Date: 4/30/2022

Applicant Information Funding Year: 2020 Target Fleet: School Bus Project Type: Vehicle Replacement

App	olicant Organization N	lame:								
App	licant Street Address	(No PO Boxe	<u>es</u>):							
City: Coun			unty:	ity:			•		Zip:	
Employer/Taxpayer No. (EIN/TIN):				DUN			S Number:			
Applicant Organization Type:										
	Total number of school buses in organization's fleet:									
Do the schools served by the buses listed below have an idle reduction policy?										
Additional Fields for <u>Private Fleets Only</u> : Private fleet owners can apply for funding from the National Clean Diesel Rebate Program if the vehicle(s) for which funding is being requested are currently contracted or leased to an eligible entity (e.g., public school). For additional information regarding private fleet applicants and eligible entities, please refer to the Program Guide.										
Type of eligible public entity vehicles are contracted with:										
Puk	olic Entity Name:									
Puk	olic Entity Street Addr	ess:					Public E	ntity City:		
Public Entity State: Public Entity County: Public Entity						ntity Zip:	[,] Zip:			
	Check box to certify that the privately-owned vehicle(s) listed below are contracted with and serve the public entity listed above.									
Original diesel vehicles(s) that will be scrapped and replacement bus fuel type:										
	17-Character Vehicle Identification Number (VIN) For Old Diesel Bus	Model (Gro	/WR oss Vehicle ght Rating s)	12-Character EPA Engine Family Name	2019 Miles Travele	Ī	2019 Fuel Use (gallons)	Estimated Remaining Life (yrs)	Replacement Bus Fuel Type	Rebate Amount
1							,			
2										
3										
4										
5										
6										
7										
8										
9										
10										
							Total	Funds Re	equested:	
	Check box to certify that the diesel school buses listed for replacement are (1) operational, (2) owned by the Applicant, (3) have accumulated 10,000 miles or more in either the previous 12 months or calendar year 2019, or have been in use at least three days per week transporting students between 9/1/2019 and 2/29/2020, and (4) will be scrapped if selected for funding. Checking box also certifies that, for participating applicants selected for funding, the replacement buses will not be ordered until after being notified of selection via a signed EPA selection letter.									
	By signing, I certify the statements and information provided in this application are true and accurate to the best of my knowledge. If selected for funding, I agree to provide the required documentation and assurance necessary for funding.									
Aut	horized Representativ	ve Name:								
Title: E				Email:					Phone:	
Authorized Representative Signature:									Date:	
Alternate Representative Name:										
Title:			Em	Email:					Phone:	



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Instructions for Filling Out Application						
Field	Entry					
Applicant Information:						
Applicant Organization Name	Enter the legal name of Applicant applying for the rebate.					
Applicant Address	Enter the street address where the Applicant is located.					
Employer / Taxpayer Number (EIN/TIN)	Enter the Employer or Taxpayer Identification Number (EIN or					
	TIN) as assigned by the Internal Revenue Service.					
DUNS Number	Enter the Applicant's 9-digit DUNS number received from Dun					
	and Bradstreet. To obtain a free DUNS number, please visit					
	www.dnb.com/duns-number.html					
Applicant Organization Type	Select "Public Fleet" for public school districts, "Private Fleet Under					
T	Contract with Public School", "Tribal Fleet", or "State Agency."					
Total School Bus Fleet Size	Enter the total number of school buses in the Applicant's fleet.					
	Fleets with 101 or more buses can submit two separate					
Idle Reduction Policy	<u>applications listing different buses to be replaced.</u> Indicate if the Applicant has an idle reduction policy for the					
idle Neduction Folicy	vehicle(s) to be replaced. Note: This field does not impact					
	eligibility.					
Type of Public Entity Under Contract with	For Private Fleet Applicants Only - In order to be eligible to					
Applicant	apply for rebate funding, the Applicant must be the owner of					
••	record of the vehicle, and that vehicle must be operated					
	pursuant to a contract with one of the following eligible public					
	entities with jurisdiction over transportation or air quality:					
	a fadoral department or agency					
	a. federal department or agency b. regional, state, local, or tribal government or agency					
	(including public school districts and municipalities)					
	(including public scribol districts and manicipalities)					
	List the type of the entity with which the Applicant has a					
	current contract for operation of the vehicle or fleet (e.g., "state					
	agency").					
Name of Public Entity Under Contract with	For Private Fleet Applicants Only - Enter the name of the					
Applicant	public school with which the Applicant has a current contract					
	for operation of the buses listed for replacement.					
Street Address of Public Entity Under	For Private Fleet Applicants Only - Enter the street address					
Contract with Applicant	where the public entity is located.					
Private Fleet Certification	For Private Fleet Applicants Only - Check the box to certify that the Applicant's fleet of vehicle(s), for which rebate funds					
	for replacement are being requested, meet the requirements					
	for private fleets as described above and in the 2020 Rebate					
	Program Guide.					



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Original Vehicle Information:				
Vehicle Identification Number	Enter the 17-character Vehicle Identification Number (VIN) of the original vehicle. Applicants can list up to 10 buses on the			
Engine Model Year	application. Enter the model year of the engine in the original vehicle. 2007			
Engine Moder Fear	and newer engines are not eligible. Note : The engine model			
	year often differs from the vehicle model year and can be found			
	on the engine nameplate.			
GVWR	Enter Gross Vehicle Weight Rating in pounds.			
EPA Engine Family Name	Enter the 12-character EPA engine family name from the engine nameplate. See Section 5 of the Program Guide for assistance.			
2019 Miles Traveled	Enter the vehicle miles traveled in calendar year 2019.			
2019 Fuel Use	Enter the fuel use in gallons in calendar year 2019.			
Estimated Remaining Life	Enter your best estimate of years of remaining useful life of the			
_	vehicle (including use by other fleets) were it not being scrapped.			
Replacement Bus Fuel Type	Enter the expected fuel type of the replacement bus.			
	Auto-populated based on Replacement Bus Fuel Type:			
Rebate Amount	\$20,000 for diesel and gasoline, \$25,000 for propane,			
	\$30,000 for CNG/LNG, and \$65,000 for battery or hydrogen			
	electric. Total Funds Requested is limited to \$300,000.			
Certification Checkboxes:				
School Bus Eligibility Certification	Check the box to certify that the vehicle(s) listed for			
	replacement are operational and meet the eligibility			
	requirements defined in the Program Guide.			
Statement Certification	Sign in the signature field to certify that the statements and			
	information provided in this application are true and accurate			
	to the best of the Applicant's knowledge. By signing, Applicant			
	agrees to provide the required documentation and assurances			
	necessary for funding.			
Authorized and Alternate Representative				
Name, Title, Email, Phone, Signature,	To be signed and dated by the authorized representative of			
Date	the Applicant organization. Enter the name (first and last name			
	required), title (required), email address (required), and			
	telephone number (required) of the person authorized to sign			
	for the Applicant. Enter contact information (required) for an			
	alternate representative who can be reached if the authorized			
	representative is unavailable.			
	of the title and registration for each bus. Please review the 2020			
	Application Checklist) to ensure all program requirements have			
been met before submitting application packages to <u>CleanDieselRebate@epa.gov</u> .				

The public reporting and recordkeeping burden for this collection of information is estimated to average 4 hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do <u>not</u> send the completed form to this address.