

Mark Signature Page

Tractors and Trailers



OMB No: 5900-489, Expiration Date: 03/31/2025

EPA's SmartWay Transport® Partnership is an innovative program that recognizes Partners for setting and achieving greenhouse gas (GHG) reduction goals in freight transport.

By signing this agreement, _____ signifies that it has read and will comply with the SmartWay® Graphic Standard and Usage Guide. I further certify that my organization has or plans to purchase

_____ number(s) of U.S. EPA Designated SmartWay Tractors

_____ number(s) of U.S. EPA Designated SmartWay Trailers:

as part of my fleet. I also commit to maintain the SmartWay Tractors and SmartWay Trailers per the manufacturer's recommendations or replace them as necessary.

Indicate needed logo:

☐ SmartWay Tractor

☐ SmartWay Trailer

Briefly state the SmartWay logo dimensions and placement on fleet vehicles.

SmartWay Tractor Logo Dimensions: _____

SmartWay Tractor Logo Placement: _____

SmartWay Trailer Logo Dimensions: _____

SmartWay Trailer Logo Placement: _____

AUTHORIZED PARTNER OFFICIAL:

The undersigned, on behalf of _____, understands and agrees to the terms of the U.S. EPA SmartWay Graphic Standards and Usage Guide for use of the applicable SmartWay logo(s).

Signature: _____

Title: _____

Print Name: _____

Date: _____

KEY PARTNER/ORGANIZATION CONTACT FOR SMARTWAY: (may be different from above individual)

Name: _____

Title: _____

Address: _____

City : _____ State: _____ Zip: _____

E-mail: _____ Phone: _____ Fax: _____

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Sleeper Tractor Equipment



COMPANY NAME: _____

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☒ CHECKLIST FOR SMARTWAY TRACTOR "SLEEPER"

	Equipment	<input checked="" type="checkbox"/> Quantity	(Documentation for SmartWay Brand Manager)
Required	BASE SMARTWAY TRACTOR*	<input type="checkbox"/> _____	_____ Manufacturer, Model, Model Year
	Must be equipped with the following technology components:		
	<input type="checkbox"/> Current model year certified engine <input type="checkbox"/> Fully electric tractors certified to USEPA GHG standards <input type="checkbox"/> Integrated cab w/ high roof fairing Cab side extenders <input type="checkbox"/> Aero bumper <input type="checkbox"/> Aero mirrors <input type="checkbox"/> Fuel tank fairing <input type="checkbox"/> Low rolling resistance tires	_____ Manufacturer, Model, Model Year	
	<i>*Note: Indicate only one tractor manufacturer and model per page. Use multiple pages if necessary.</i>		
Required	TRACTOR STEER TIRES (Indicate tire models)	<input type="checkbox"/> _____	_____ Manufacturer, Model
Required	TRACTOR DRIVE TIRES (Indicate tire models)	<input type="checkbox"/> _____	_____ Manufacturer, Model
		<input type="checkbox"/> _____	_____ Manufacturer, Model
	TRACTOR ALUMINUM WHEELS (Optional)	<input type="checkbox"/> _____	_____ Manufacturer, Model
Required: Select either an equipment or strategy option	SELECT AN IDLING CONTROL EQUIPMENT OR STRATEGY:		
	IDLING CONTROL EQUIPMENT		
	Auxiliary Power Unit or Generator Set	<input type="checkbox"/> _____	_____ Manufacturer, Model
	Fuel Operated Heater	<input type="checkbox"/> _____	_____ Manufacturer, Model
	Battery Operated Air Conditioning and/or Heating System	<input type="checkbox"/> _____	_____ Manufacturer, Model
	Thermal Storage System	<input type="checkbox"/> _____	_____ Manufacturer, Model
	Double Drivers	<input type="checkbox"/> _____	_____ Please attach copy of company policy
	Driver Overnight hotel stay	<input type="checkbox"/> _____	_____ Please attach copy of company policy
Connects to Electrified Parking Space (Truck Stop Electrification)	<input type="checkbox"/> _____	_____ Describe or indicate idle-control strategy	
	Other strategy	<input type="checkbox"/> _____	_____ Describe or indicate idle-control strategy

Day Cab Tractor Equipment



COMPANY NAME: _____

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☒ CHECKLIST FOR SMARTWAY TRACTOR "DAY CAB"

	Equipment	<input checked="" type="checkbox"/> Quantity	(Documentation for SmartWay Brand Manager)
Required	BASE SMARTWAY TRACTOR*	<input type="checkbox"/> _____	_____ Manufacturer, Model, Model Year
	Must be equipped with the following technology components:		
	<input type="checkbox"/> Current model year certified engine		
	<input type="checkbox"/> Fully electric tractors certified to USEPA GHG standards		
	<input type="checkbox"/> Integrated cab w/ high roof fairing Cab side extenders		_____ Manufacturer, Model, Model Year
	<input type="checkbox"/> Aero bumper		
	<input type="checkbox"/> Aero mirrors		
	<input type="checkbox"/> Fuel tank fairing		
	<input type="checkbox"/> Low rolling resistance tires		
	<i>*Note: Indicate only one tractor manufacturer and model per page. Use multiple pages if necessary.</i>		
Required	TRACTOR STEER TIRES (Indicate tire models)	<input type="checkbox"/> _____	_____ Manufacturer, Model
Required	TRACTOR DRIVE TIRES (Indicate tire models)	<input type="checkbox"/> _____	_____ Manufacturer, Model
		<input type="checkbox"/> _____	_____ Manufacturer, Model
		<input type="checkbox"/> _____	_____ Manufacturer, Model
	TRACTOR ALUMINUM WHEELS (Optional)	<input type="checkbox"/> _____	_____ Manufacturer, Model
Optional: Select either an equipment or strategy option	SELECT AN IDLING CONTROL EQUIPMENT OR STRATEGY:		
	IDLING CONTROL EQUIPMENT Day cabs encouraged but not required to use idle control equipment or strategy. (Check applicable option)		
	Auxiliary Power Unit or Generator Set	<input type="checkbox"/> _____	_____ Manufacturer, Model
	Fuel Operated Heater	<input type="checkbox"/> _____	_____ Manufacturer, Model
	Battery Operated Air Conditioning and/or Heating System	<input type="checkbox"/> _____	_____ Manufacturer, Model
	Thermal Storage System	<input type="checkbox"/> _____	_____ Manufacturer, Model
	Double Drivers	<input type="checkbox"/> _____	_____ Please attach copy of company policy
	Driver Overnight hotel stay	<input type="checkbox"/> _____	_____ Please attach copy of company policy
	Connects to Electrified Parking Space (Truck Stop Electrification)	<input type="checkbox"/> _____	_____ Please attach copy of company policy
	Other strategy	<input type="checkbox"/> _____	_____ Describe or indicate idle-control strategy

Trailer Equipment Check List



COMPANY NAME: _____

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☒ CHECKLIST FOR SMARTWAY TRAILER

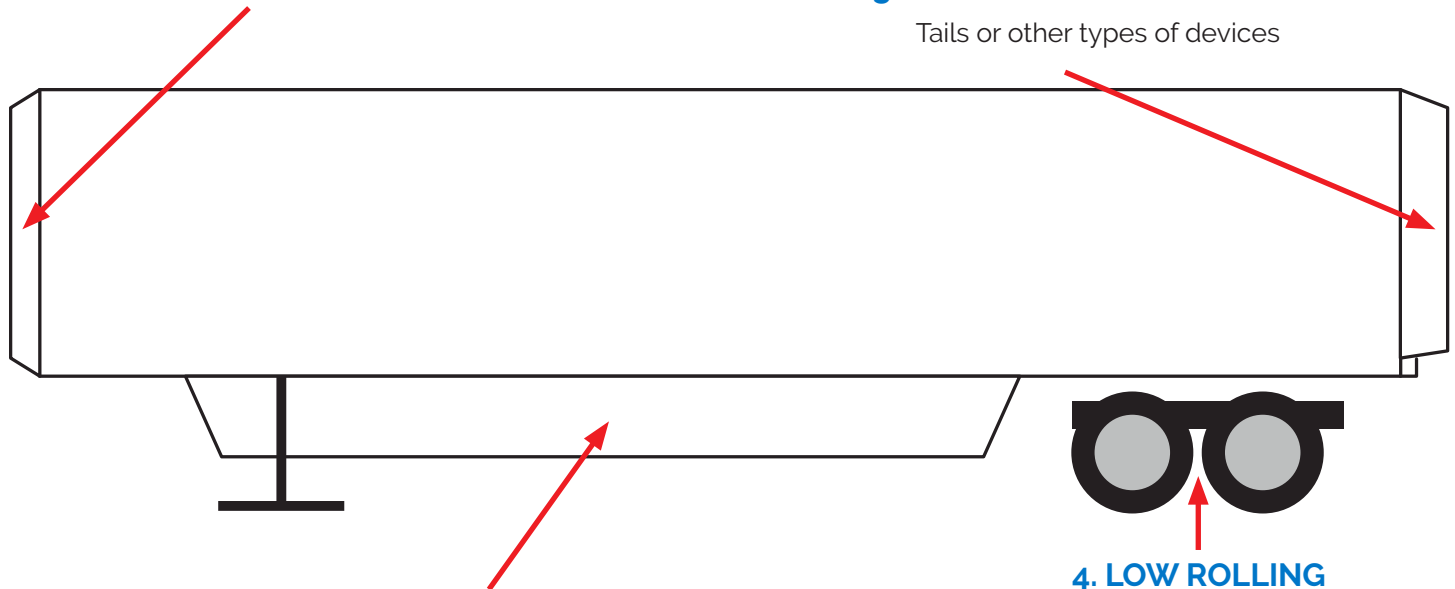
Equipment	<input checked="" type="checkbox"/> Quantity	(Documentation for SmartWay Brand Manager)
BASE TRAILER* (53 foot)	<input type="checkbox"/> _____	_____ Manufacturer, Model, Model Year
* Note: Indicate only one trailer manufacturer and model per page. Use multiple pages if necessary.		
SELECT WHICH TYPE OF TRAILER YOU'RE TRYING TO DESIGNATE:		
TRAILER TYPE: (Check One)	<input type="checkbox"/> Dry Van	<input type="checkbox"/> Refrigerated
DESIGNATED TYPE: (Check One)	<input type="checkbox"/> SmartWay Trailer (6% fuel savings or higher)	<input type="checkbox"/> SmartWay <i>Elite</i> Trailer (10% fuel savings or higher)

The following types of technologies may be used for your trailer:

1. TRAILER FONT FAIRING

3. TRAILER REAR FAIRING

Tails or other types of devices



2. TRAILER UNDER FAIRING

Skirts or other types of devices

4. LOW ROLLING RESISTANCE TIRES

(Aluminum wheels optional)

NOTE: Fleets are not required to have all four types of technologies to achieve the SmartWay Designation or the SmartWay *Elite* Designation.

Low rolling resistance new tires or retreads must be maintained on SmartWay Designated Trailers.

Trailer Equipment Check List



COMPANY NAME: _____

Indicate how fleet trailers are equipped in this section.

	TIRES	Check all that apply	Verified % Fuel Savings	
			(Circle One)	
Required	EPA Verified Device			
	Trailer Tires, New	<input type="checkbox"/>	1%	_____ Manufacturer, Model
	Trailer Tires, Retreaded	<input type="checkbox"/>	1%	_____ Manufacturer, Model
Optional	Trailer Aluminum Wheels (Optional)	<input type="checkbox"/>		_____ Manufacturer, Model
	Automatic Tire Inflation (Optional)	<input type="checkbox"/>		_____ Manufacturer, Model
	AERODYNAMICS	Check all that apply	Verified % Fuel Savings	
			(Circle applicable option)	
Required	EPA Verified Device*			
	1. Trailer Front Fairing	<input type="checkbox"/>	1%	_____ Manufacturer, Model
	2. Trailer Under Fairing	<input type="checkbox"/>	1%, 4%, or 5%	_____ Manufacturer, Model
	3. Trailer Rear Fairing	<input type="checkbox"/>	1%, 4%, or 5%	_____ Manufacturer, Model
	4. Other Device Type	<input type="checkbox"/>	1%, 4%, or 5%	_____ Manufacturer, Model
	5. 9% <i>Elite</i> Package	<input type="checkbox"/>	9%	_____ Manufacturer Aero Package name

TOTAL PROJECTED FUEL SAVINGS %: _____
(Tires + Aerodynamics)

NOTE: *Gap reducer technologies (e.g. nose fairing, front fairing, etc.) are not appropriate for reefer trailers.

Any *Elite* Packages that include a gap reducer is ineligible for reefer trailers.

Fleets may select individual devices that add to a designation threshold (i.e. 6% or 10%) or choose a single product from the 6% or 10% category.