Colusa County Air Pollution Control District

Incentive Program Grant Application Infrastructure Projects (Charging or Alternative-Fuel)

Company Name (must match Tax ID number):	Federal Tax ID Number or Social Security Number:
Contact Name:	
Mailing Address:	
Phone Number:	Email:
Project being proposed (Select One):	☐ Battery Charging Station ☐ Hydrogen Fueling Station ☐ Natural Gas Fueling Station
Is this a publicly accessible project:	□ Yes □ No
Will this project be powered by solar and/or wind power	er?
Will on-site solar or wind power generating systems be installed as part of this project?	e
Project address, if different from business address:	
All applications must include the following (check boxe	on page 3)
I certify that all information, attachments, and docuration authentic and correct.	mentation submitted with this application is
Applicant Signature:	Date:
Applicant Name & Company:	

1. Site Information	n:			
Address where the st	ation will be installed:			
Major cross streets or	f proposed site:			
Provide a detailed de	scription of where the	station(s) will be locate	ed within the parking l	ot or structure:
	•	, ,	1 0	
Is the proposed station	on site owned by the ap	plicant?		Yes □ No
F	1	-4	□ D t	
For publicly accessib	le sites, select any poir	its of interest nearby:	☐ Restaura	
			□ Park	Theater
			☐ Library	
			☐ Grocery	Store
			☐ Hospita	
			☐ Lodging	
T	****	1.11	☐ Other (s	pecify)
•	ill be available to the p			ibl-
	e strictly utilized for we e strictly utilized for res		will not be publicly acc	cessible.
	e publicly accessible 24		week	
	e available for public us	•		
	1	\ 1	3 /	
2. Station Informa	ation			
EV Charger Information				
Make	Model	Charger Level	Charger Type	Quantity
		☐ Level 2	☐ Single Port	
		Level 2	_ Single 1 of t	
		☐ Level 2 ☐ Level 2 ☐ Level 2	☐ Duel Port ☐ Single Port	

Make	Model	Charger Level	Charger Type	Quantity
		☐ Level 2	☐ Single Port	
		☐ Level 3	☐ Duel Port	
		☐ Level 2	☐ Single Port	
		☐ Level 3	☐ Duel Port	
		☐ Level 2	☐ Single Port	
		☐ Level 3	☐ Duel Port	

AND/OR

Alternate Fueling Station Information:

Make	Model	Fuel Type	Quantity

2	T 7	/T 4 11	T	4 •
4	Vendor	/Installer	Intorn	nation•

D'	
Business Name:	

Representative Name:	
Address:	
Phone Number: Email:	
4. Costs (Attach price quote from vendor/installer to substantiate claims ma	de in this table).
Cost of design and engineering:	\$
(i.e. labor, site preparation, Americans with Disabilities Act accessibility, signage).	
Cost of equipment:	\$
(i.e. charging/fueling units, electrical parts, energy storage equipment, materials).	
Cost of installation directly related to the construction of the station:	\$
Meter/data loggers:	\$
On-site power generation system that fuels of powers covered sources:	\$
(if applicable, i.e. solar and wind power generation equipment).	
Fees incurred pre-contract execution, license fees, environmental fees,	\$
commissioning fees (safety testing), and onsite required safety equipment:	
(i.e. permits, design, engineering, site preparation).	
Shipping and delivery costs of equipment:	\$
Tax	k: \$
Tota	l: \$
Competitive bids are required for certain projects: If your infrastructure pavailable for public use the vendor must be solicited and selected through a competitive instance that applicant must solicit bids through a competitive bid process, the applicant impartial bidding process based on the objective supplier selection criteria and allow that reasonable amount of time. Attach all bids received for the proposed project. Please indicate the vendors.	e bidding process. In the nt must establish an ne bid to remain open for
for this project and provide an explanation for selecting this vendor/installer.	mstaner mat was chosen
5. Anticipated usage:	
Please provide the anticipated usage per year in terms of projected throughput and/or r will be using the station(s) (e.g. kW/year or number of cars charged per year):	umber of vehicles that
☐ Attach any supporting document and/or an explanation to substantiate your	elaim.
6. Additional Required Application Attachments:	
☐ An aerial map of the proposed project location. (i.e. satellite view from an internet-based map or city/county map)	

Proof that the applicant can obtain all required land use permits from agencies needed to install/operate infrastructure.
Documentation demonstrating that the land on which the project will be located is either owned by the applicant or controlled by the applicant through a long-term lease, easement, or other legal arrangement for the duration of the project life. For applicants who do not own the land where the proposed project will be built, an executed lease agreement or letters of commitment lasting for the duration of the project life must be signed by the property owner(s) or authorized representative(s) can be attached to satisfy this criterion.
Proof that power or fuel is being provided to the site of the proposed project. (e.g. application to, payment to, or contract with the local utility company)
Equipment warranty documentation. Equipment must have a warranty, 1-year for battery charging, 3-year for alternative fuel. If the warranty is not provided with the equipment, the applicant must purchase extended warranty at own expense. Grant funds cannot be used for extended warranty.

ATTACHMENT A

Infrastructure Application Statement

Please initial each item to signify that you understand and agree with each statement. If you have questions on any of the statements, please call or email Casey Ryan, Air Pollution Standards Officer, at (530) 458-0583 or cryan@countyofcolusa.com.

Note: This statement will be attached to, and made part of, any Grant Agreement eventually reached for your projects.

Initials	s
	I have legal authority to apply for grant funding for the entity described in this application.
	For infrastructure projects, discretionary costs may be accrued by an applicant prior to contract execution, but applicant assumes all financial risks and costs accrued prior to contract execution are not reimbursable until I receive a Grant Agreement signed by the Air Pollution Control Officer.
	I have reviewed the sample grant agreement and it is acceptable, without revisions.
	I understand the grant will pay for a portion of the total costs and I must retain copies of receipts and cancelled checks to prove that I have paid my share of the costs.
	I understand that if projects costs are financed with borrowed money, I must use the grant funds to pay down the loan balance so that total liens on funded equipment do not exceed my share of the project's costs.
	I understand there are conditions placed on receiving a grant and agree to refund the grant or a pro-rated portion if it is found that at any time I do not meet those conditions. Such conditions may include, but is not limited to: reporting annual usage, reporting any unscheduled downtime or equipment, or reporting the amount of electricity generation by any on-site solar or wind power equipment. I understand I must document compliance with these conditions and submit reports annually.
	I understand I must complete the purchase, conversion, and/or expansion work specified in the application no later than 48 months after approval of the Grant Agreement in cases where a regulatory deadline is approaching. This deadline may be extended in some circumstances if requested by the applicant and approved in writing by the APCD.
	I understand that an IRS Form 1099 will be issued to me for incentive funds received under the Carl Moyer Program. I understand that it is my responsibility to determine the tax liability associated with participating in the Moyer Program.
	I certify that the proposed project has not been funded and is not being considered for Carl Moyer Program funds by another air district or any other public agency.
	I understand it is my responsibility to ensure that all technologies are either verified or certified by the California Air Resources Board (CARB) to reduce NOx and/or PM.
	I understand I will be prohibited from applying for any form of emission reduction credits for Moyer- funded equipment, including: Emissions Reduction Credit (ERC): Mobile Source Emission Reduction

Credit (MSERC) and/or Certificate of Advanced Placement (CAP), for all time, from the CCAPCD, CARB or any other Air Quality Management or Air Pollution Control District.

Initials	
	The proposed project is not required to be implemented by any local, state, and/or federal rule, regulation, or other legally binding requirement.
	I understand that disclosure is required of the value of any current financial incentive that directly reduces the project price, including tax credits or deductions, grants, or other public financial assistance.
	I certify that the requested funding does not include administrative costs. Administrative costs are defined as costs related to application preparation and submittal, project administration, monitoring, oversight, data gathering, and report preparation. I will include funds necessary to cover administrative costs and any required matching funds in my budget for the duration of the project.
	I understand the CCAPCD has the right to conduct unannounced inspections to ensure the project equipment is fully operational and at the activity level committed to in the grant agreement.
	I understand that the project must be installed and located in Colusa County.
	I understand that the project must comply with all applicable federal, State, and local laws and requirements including environmental laws, and State building, environmental, and fire codes.
	I understand that the air district may need to perform a California Environmental Quality Act (CEQA) review and obtain approval prior to funding a project.
	I understand that a publicly accessible infrastructure project must be solicited and selected through a competitive bidding process that has been approved by the air district board.
	I understand that all work must be performed by a licensed contractor.
	I understand that all equipment and parts must be new. Remanufactured or refurbished equipment and parts are not eligible for funding.
	I certify that Carl Moyer Program funds will not be used to purchase any required warranty or used to fund any ineligible project costs.
	I understand that the equipment will be required to be in operating condition through the term of the contract.
	I understand that, if during the project life the fuel/energy meter fails for any reason, the fuel/energy
	meter must be repaired or replaced as soon as possible and is considered a maintenance expense and therefore not an eligible cost for use of Carl Moyer funds.
	I understand that if any battery charging station installations are made, I must report the installation to the Department of Energy Alternative Fuel Date Center located at http://www.afdc.energy.gov/locator/stations/ .
	I understand that if any hydrogen fueling stations are installed, I must register and report to the Station Online Status System (SOSS) maintained by the California Fuel Cell Partnership (www.cafcp.org). Furthermore, I understand I must abide by the requirements of their reporting system.

I certify that no Carl Moyer Program funds	are the source for t	his preparation:
Compensation paid for application preparat	tion: \$	
Application Preparer's Name and Contact I	Information (please	print)
If an entity other than the applicant assisted in the information requested below.	the preparation of the	e application, please provide
Applicant's Name (please print)	Title	
Applicant's Signature	Date	
	d parties are required, and to certify that no	to list how much compensation, if any, they o Carl Moyer Program funds are being used
I certify to the best of my knowledge th application is authentic, true, and accura		nd documentation contained in this
Last,	·	
		usiness days to report the problem to the air are infrastructure equipment is operational.
For non-public accessible charging or fueling s	station:	
I understand that I must notify the air didistrict to ensure publicly accessible sta	-	me beyond the 48 hours and work with the .
I understand that, if equipment is not fu responsibility ensure that repairs are ma	-	-
I understand that publicly accessible inf rate with 24/7 customer service available		must maintain a 95% successful charging e telephone number.
I understand that publicly accessible sta regular business hours.	ations must at a minir	mum be accessible to the public daily during

ATTACHMENT B

Carl Moyer Program Disclosure Statement

□ Ye	you applied for or been awarded other grants list s, complete section below		
	 skip the remaining items in this table and sign be Applied to: 	below	
Date	of Application:		
	ng Amount: \$		
Status	s of Application: ☐ Cancelled ☐ Pending ☐	I Funded ☐ Other, explain:	
By sig	ning below, the Applicant hereby certifies the fol	lowing:	
(1)	Applicant has disclosed to the Grantor/District a directly or indirectly submitted to any other air p districts for the same specific engine(s).	•	
(2)	Applicant agrees not to submit other Carl Moyer Agreements for the same specific project with a other state or local air pollution district or the Casolicitation. Applicant further agrees and unders immediately terminated and may result in the Agaphications to any and all Carl Moyer Program management district if it is discovered that the Agaphical contracts or grant agreements, not prevent	ny other source of funds, including but not alifornia Air Resources Board for a multi- tands that this Grant Agreement shall, at a pplicant being banned from submitting fut administering air pollution control district applicant has submitted multiple application	limited to, district minimum, b ure or air quality
(3)	Applicant has disclosed the value of any curre project price, including tax credits or deductic certifies that the funding requested in the Grathis financial incentive.	ons, grants, or other public financial as	sistance and
(4)	Applicant understands that if it is found to be in Agreement and/or this Disclosure Statement, the seek criminal charges to the fullest extent allowed limited to the Business and Professional Code and	e California Air Resources Board may levy ed by law against the Applicant, including	fines and/orbut not
	Printed Name of Responsible Party:	Title:	
	Signature of Responsible Party:	Date:	