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| Part A – APPLICANT Information |
| Applicant Name: |       |
| Contact Name: |       | **Contact Title:** |       |
| **Email Address:** |       |
| **Street Address:** |       |
| **City:** |       | **Zip Code:** |       | Phone Number: |       |
| **In what Iowa County do the vehicles/equipment to be replaced or repowered chiefly operate?** (largest percentage of miles or hours in operation)**What is the percentage of miles or hours in operation in that county?** |       |      % |

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| **Part b – project Category, APPLICATION PRIORITY, AND DETAIL** |
| **Please select a project category for this application. Remember: One category per application.** [ ]  Category 1 - Class 4-8 School Bus, Shuttle Bus, or Transit Bus  [ ]  Category 2 - Freight Trucks and Port Drayage Trucks  [ ]  Category 3 - Non-Road Transport and Equipment  |
| **If submitting more than one application during this funding cycle, what priority is this application among those submitted?** (1 = Highest priority, 2=Lower priority, and so on) |       |
| **Please indicate the number of proposed vehicles or pieces of equipment included in this application in the table below by vehicle or equipment type and fuel.** |
|  | *Diesel* | *Alternate Fuel/Hybrid* | *All-Electric* | *Electric Charging Infrastructure* |
| **REPLACEMENT** |  |  |  |  |
|  School or Shuttle Bus (Class 4-7) |       |       |       |       |
|  Transit Bus (Class 8) |       |       |       |       |
|  Class 4-7 Local Freight Trucks |       |       |       |       |
|  Class 8 Local Freight and Drayage Trucks |       |       |       |       |
|  Freight Switchers |       |       |       |       |
|  Airport Ground Support Equipment |       |       |       |       |
|  Forklifts and Port Cargo Handling Equipment |       |       |       |       |
| **REPOWER** |  |  |  |  |
|  All Class 4-8 Buses |       |       |       |       |
|  All Class 4-8 Trucks |       |       |       |       |
|  Freight Switchers |       |       |       |       |
|  Ferries/Tugs |       |       |       |       |
|  Airport Ground Support Equipment |       |       |       |       |
|  Forklifts and Port Cargo Handling Equipment |       |       |       |       |
| **INSTALLATION OF SHOREPOWER** |  |  |  |  |
|  Marine Vessels |       |       |       |       |

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| Part C – PROJECT COSTS |
| **Complete the Project Costs Form which is available as an Excel file at** [**https://www.iowadot.gov/vwsettlement**](https://www.iowadot.gov/vwsettlement)**. Transfer the total project costs and total funding request listed in the form (highlighted in yellow) to the space provided below.** Total costs may include purchase of vehicles or equipment, contracting for services such as installation, installation by the applicant’s own staff, etc. Administrative costs are NOT eligible for reimbursement and should not be included. Costs listed here should be *ESTIMATED* costs only. Actual costs are not to be incurred until an award is made and a funding agreement is executed. If you desire to request less than the maximum amount allowed or in case of a discrepancy between the Project Costs Form and the amount transferred below, the amount transferred below shall be considered the funding requested. |
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| **TOTAL ESTIMATED PROJECT COST:** | **$** |
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| **TOTAL VOLKSWAGEN SETTLEMENT****ENVIRONMENTAL MITIGATION TRUST FUNDING REQUEST:** | **$** |
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| **Are any federal, state, or other funds whether public or private and****external to the applicant involved in this project?** [ ]  **Yes** [ ]  **No** |
| If yes, please explain the source of funds, intended use of funds (scope) if different from this application, whether the funds are secured or anticipated (and when), and any conditions placed on the funds in the space provided below.*Example: $300,000 grant from Iowa DERA program. Awarded January 2018 for purchase of 1 electric bus. Must be* *completed by September 2019.* |
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| Part d – PROJECT timeline |
| **Please provide a timeline of your project milestones below.** At a minimum, please list an estimated date of when vehicles/engines/equipment are intended to be purchased/received, when a contractor will be hired (if applicable), when engines/equipment are installed and put into use, when engines/vehicles will be scrapped, and when the claim for reimbursement and closure of the project is expected. Add any additional milestones as appropriate. Remember: All projects must be complete two years following execution of the project funding agreement. |
| **DATE** | **PROJECT MILESTONE** |
| **April 1, 2019** | Execution of project funding agreement (approximate) |
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| **Part E – NARRATIVE QUESTIONS****Please provide a narrative response to each question in the space provided for each question below.*****BE AS CONCISE AS POSSIBLE*** |
| 1. **Detailed Description of the Project.** Please provide a detailed description of your project addressing the following:
2. The number and types of vehicles/engines/equipment included in your application.
3. If you already have the capability to refuel or recharge the vehicles/engines/equipment that are the subject of your application, please describe that capability? If not, what are your plans for providing fueling or charging infrastructure to serve the vehicles/engines/equipment?
4. If you have included the installation of electric charging infrastructure in your application for reimbursement, what type will you be purchasing and installing?
5. The Project Cost Form requires you to identify the source of your estimates used to calculate your total project costs. If you marked “Other”, please fully describe the source of your estimate.
6. Any other information that will help fully describe your project.
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| 1. **Demonstration of Previous Successes.** Please describe how this project will build on the successes of previous emission reduction projects you or your organization have completed. What previous replacement or repower initiatives have you completed? Does your organization have a policy or procedure for reducing emissions in your fleet or organization more broadly (not limited to transportation)? Describe how you measured that these past projects were successful.
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| 1. **Complements Other Programs.** Please describe how this project complements other public and/or private programs, initiatives, or partnerships to reduce emissions. Please list the programs, initiatives, or partnerships and explain their connection to this project.
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| 1. **Long-term Sustainability.** Please describe how this project will achieve or contribute to the long-term sustainability of your fleet or within your organization generally. How does this project fit into any sustainability initiative (goals, policies, plans, etc.) within your organization? Is this project part of a multi-phase initiative? If this project is a pilot, what is your goal and how will you determine whether these efforts will be expanded in future years?
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