						Eligible Applicant (EPA Use Only) Yes Date Received (EPA Use Only)									
t I - Application to Res	erve F	unds													
ate Program ID Target Fleet							Re								
pplicant Information (All A	Applican	its)													
Organization Name						Employe	er/Taxpayer Nu	mber (EIN,	EIN/TIN) Organizational DUNS Code						
Advace						City			County/Pari	ch	State ZIP				
ddress						City	County/F			III3II State					
ligible Entity Information (Private Fleet Owner Applicants Only) rivate fleet owners are able to apply for funding from the National Clean Diesel Rebate Program if the vehicle(s) or equipm rigional, State, local, or tribal agency or port authority with jurisdiction over transportation or air quality. For additional info									lease refer to the rebate program's information docume						
I certify the fleet of vehicl information document.				nds are being re	equeste	d, meet the re	equirements fo	r private fl	eets as desci	ibed above and	d in the reb	oate progra	ım's		
iginal Vehicle/Equipmer	nt/Engi	ine (All Applicar	its)												
Vehicle Identification Number or Engine Serial Number	Engine Model Year	Vehicle Class	Engine Manufacturer	Engine Family Name	Engine Tier*	Annual Miles or Usage Rate (hrs)	Annual Fuel Consumption	Annual Idling Hours	Horsepowe	r* Location of County S	tion Rebate				
list additional vehicles to be repl	aced, rep	powered, or retrof	itted please use ta	able below.					Total Reb	ate Funds Reque	sted				
I certify that the vehicle(s), equipment, or engine(s) listed for replacement, retrofit, or repower are operational and meet the eligibility requirements defined in the rebate program's terms and conditions.															
I certify that the vehicle(s), equipment, or engine(s) listed for replacement or repower will be propactoring to the requirements defined in the program's terms and conditions.							ly disposed of	 							

Applicant Signature (All Applicants) By signing below, 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 assurances necessary for funding. Funding for the National Clean Diesel Rebate is subject to continuing federal appropriations. Please see the rebate program's information document for additional funding information. Authorized Representative Name Authorized Representative Signature Date

Additional Vehicle/Engine to be Retrofit/Replaced

	Vehicle Identification Number or Engine Serial Number	Engine Model Year	Vehicle Class	Engine Manufacturer	Engine Family Name	Engine Tier*	Annual Miles or Usage Rate (hrs)	Annual Fuel Consumption	Annual Idling Hours	Horsepower*	Location of Operation County State		Rebate Amount**
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