

Mark Signature Page

Tractors and Trailers



Exhibit 5 SmartWay Mark Signature Page and Tractor/Trailer Equipment Checklist

OMB No: 2060-0663, Expiration Date: 04/30/2021

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: _____

OMB No: 2060-0663, Expiration Date: 04/30/2021

☑ CHECKLIST FOR SMARTWAY TRACTOR "SLEEPER"

	Equipment	☑ Quantity	(Documentation for SmartWay Brand Manager)
Required	BASE SMARTWAY TRACTOR*	<input type="checkbox"/>	_____
	Must be equipped with the following technology components:		Manufacturer, Model, Model Year
	<ul style="list-style-type: none"> <input type="checkbox"/> Current model year certified engine <input type="checkbox"/> Integrated cab w/ high roof fairing <input type="checkbox"/> 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 		_____
	<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
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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
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SELECT AN IDLING CONTROL EQUIPMENT OR STRATEGY:			
Required: Select either an equipment or strategy option	IDLING CONTROL EQUIPMENT		
	Auxiliary Power Unit or Generator Set	<input type="checkbox"/>	_____
	Fuel Operated Heater	<input type="checkbox"/>	_____
	Battery Operated Air Conditioning and/or Heating System	<input type="checkbox"/>	_____
	Thermal Storage System	<input type="checkbox"/>	_____
	Double Drivers	<input type="checkbox"/>	_____
	Driver Overnight hotel stay	<input type="checkbox"/>	_____
	Connects to Electrified Parking Space (Truck Stop Electrification)	<input type="checkbox"/>	_____
	Other strategy	<input type="checkbox"/>	_____

Day Cab Tractor Equipment



COMPANY NAME: _____

OMB No: 2060-0663, Expiration Date: 04/30/2021

CHECKLIST FOR SMARTWAY TRACTOR "DAY CAB"

Equipment	<input checked="" type="checkbox"/> Quantity	(Documentation for SmartWay Brand Manager)
BASE SMARTWAY TRACTOR*	<input type="checkbox"/> _____	_____ Manufacturer, Model, Model Year
Must be equipped with the following technology components:		
<ul style="list-style-type: none"> <input type="checkbox"/> Current model year certified engine <input type="checkbox"/> Integrated cab w/ high roof fairing <input type="checkbox"/> 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>		

TRACTOR STEER TIRES (Indicate tire models)	<input type="checkbox"/> _____	_____ Manufacturer, Model
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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
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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"/> _____	_____
Other strategy	<input type="checkbox"/> _____	_____ Describe or indicate idle-control strategy

Trailer Equipment Check List



COMPANY NAME: _____

OMB No: 2060-0663, Expiration Date: 04/30/2021

☑ CHECKLIST FOR SMARTWAY TRAILER

	☑	Quantity	(Documentation for SmartWay Brand Manager)
BASE TRAILER* (53 foot)	<input type="checkbox"/>	_____	_____ <small>Manufacturer, Model, Model Year</small>
<i>* Note: Indicate only one trailer manufacturer and model per page. Use multiple pages if necessary.</i>			
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 <small>(6% fuel savings or higher)</small>	<input type="checkbox"/> SmartWay <i>Elite</i> Trailer <small>(10% fuel savings or higher)</small>

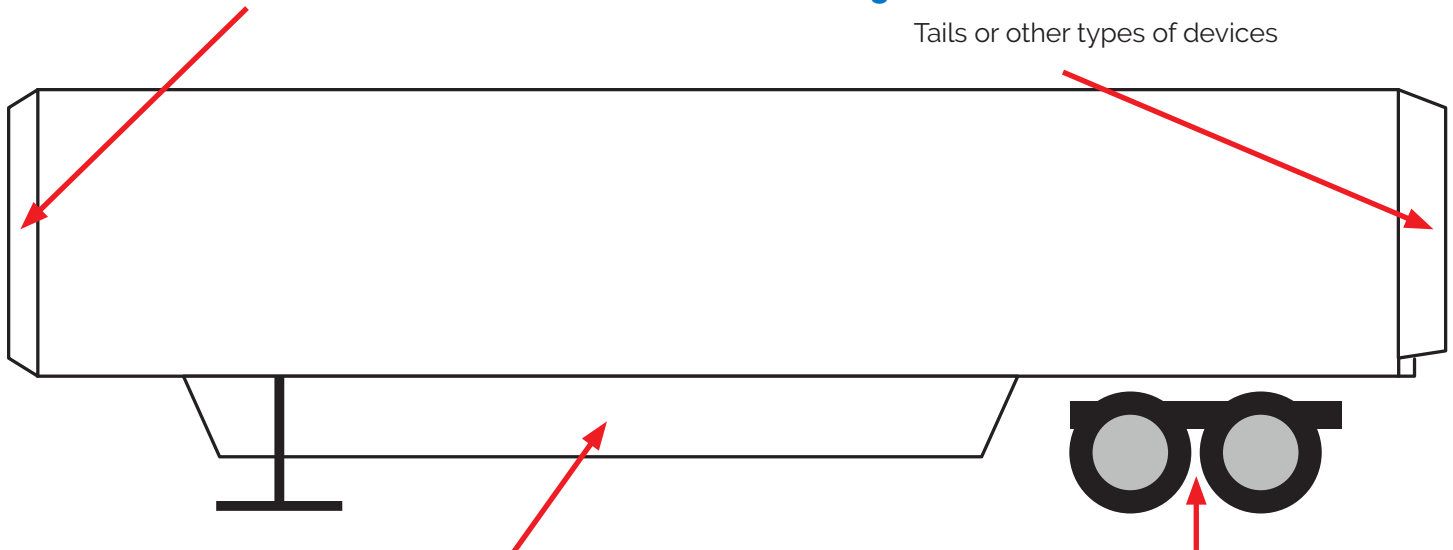
Required

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

1. TRAILER FRONT 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.

Required	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

Required	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.