

Screenshots of Existing Clean School Bus (CSB) Rebate Application Form

The following photos are from the first prototype of the application form which is undergoing active development. Improved descriptions of fields, autofilling functionality, help text, and more will be added over the next month. The application form is the first of three forms that EPA will collect for the Clean School Bus Rebates. The purchase order form and close-out form will be provided to awarded applicants in a similar online format that will minimize burden by relying, where possible, on existing data submitted in this application form.

Summary of Changes for Clean School Bus Application Form

1. Checkboxes Related to Funding Amount:
 - Cost Share acknowledgement: certification that the applicant will identify other external funds that offset cost of electric school buses or supporting infrastructure, and thus is applying for a lower funding amount than eligible for
 - American Disabilities Act (ADA) equipment: indicating installation of ADA Equipment by bus line item
 - Shipping bus(es) to non-lower 48 states and territories: indicating funds are needed to ship one or more buses to non-lower 48 states and territories
2. Partnership Agreements
 - Document one (Utility Agreement): acknowledges and certifies utility planning requirements and coordination
 - Document two (School Board Agreement): applicant certifies school board is aware of the applicant pursuing the new bus project.
 - Document two (third party Vendor only): certifies that served school district is aware of third party applying on behalf of the served school district.
 - Labor/Workforce training: (Checkbox) allow applicants to indicate awareness of program requirements for electrician training and the importance of developing a workforce development plan
3. Existing Buses to Be Replaced
 - Scrappage: checkbox per bus line item to attest to meeting eligibility requirements for an exception to the scrappage requirement for the CSB Rebate Program.

1 of 9 **Welcome**

Welcome

Some introductory copy here. Consider including content like:

- What should the user have on hand as they fill out the form?
- How long will it take them to fill out?
- How can they save work and come back later?
- What should they expect to happen after they submit?
- Where does the data go and how will it be used?

* denotes required field

Applicant Organization Type *

Note: If you are an Indian Tribe or Tribal Organization, or Tribally Controlled School that is LEA, then select organization type 'Local Education Agency' (LEA).

Does your organization own the buses to be replaced? *

- Yes
- No

Are you applying to replace buses operated by a private bus fleet?

- Yes
- No

NOTE: Use of the browser back, forward, or refresh buttons will result in loss of work. Please navigate using the buttons at the bottom of the form.

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LEA Applicant Information

* denotes required field

LEA Name

NCES District ID

LEA Address

Street Address

City

State

Zip Code

County

LEA Contact Information

Contact Name

Contact Title

Business Phone Number

Business Email Address

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3 of 9 Applicant Information

Applicant Information

* denotes required field

NCES District ID

EIN

Local Education Agency Unique Entity Identifier (LEA UEI)

Organization Name *

Street Address

City

State

Zip Code

County

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4 of 9 **Type of LEA**

Type of LEA

* denotes required field

Is your LEA a charter school?

Yes

No

Please enter the estimated student poverty rate for your charter school.

Is your LEA an Indian Tribe or Tribal Organization, or Tribally Controlled School?

Yes

No

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5 of 9 Old Bus Information

Old Bus Information

* denotes required field

VIN ⓘ *

Manufacturer *

Select the bus manufacturer of the old bus to be replaced. Do not enter the engine manufacturer.

Model *

Model Year *

Enter the year format as YYYY.

Annual Mileage *

Annual Fuel Consumption *

Enter the number of gallons of fuel the bus(es) used in 2021.

Fuel Type *


Gross Vehicle Weight Rating (GVWR) in pounds (lbs.) ⓘ *

Attach the bus titles and registrations of buses to be replaced.

Any file types are allowed

| File Name | Size |
|-----------|------|
|-----------|------|

Drop files to attach, or [browse](#)

 No storage has been set for this field. File uploads are disabled until storage is set up.

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6 of 9 Replacement Bus Information

Replacement Bus Information

* denotes required field

Select the fuel type of the replacement bus. *

Estimate the Gross Vehicle Weight Rating (GVWR) of the replacement bus in pounds (lbs.) *

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Funding

* denotes required field

Rebate Amount Requested *

Source of Additional Funding

Total Amount of Additional Sources of Funding ?

Total Rebate Funds Requested

Total of Rebate and Other Funding

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Authorized Representative

* denotes required field

Primary Authorized Representative

Name *

Title *

Business Phone Number *

Business Email Address *

Alternate Authorized Representative

Name *

Title *

Business Phone Number *

Business Email Address *

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9 of 9 **Review and Sign**

Review and Sign

Some copy here explaining what you are signing, who should sign, what happens after you sign (can I still make edits, etc.).

* denotes required field

Signature *



Sign above

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