

Project Quarterly AND Final Reporting Template

Burden Statement for EPA Form 5900-683

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Instructions

Per grant agreement terms and conditions, this reporting template should be submitted 1) quarterly throughout the project period of performance and 2) a Final Report (120-days after) the completion of the grant period. Please work with relevant parties (i.e., transportation contractor, bus dealer, etc.) to ensure information submitted is accurate. Information that is submitted on quarterly reports should NOT be changed in future quarterly report submissions unless approved by EPA. Please only update information for the specific quarter in which this report is being submitted. The grant recipient only needs to fill out shaded cells highlighted **blue** with a diagonal pattern (///). Cells highlighted **yellow** are automatically populated based on previous responses in this spreadsheet. Additionally, some fields will automatically hash out (///) in the event they are inapplicable based on previous descriptions. Please complete tabs in this workbook according to the instructions below; all fields are required, unless otherwise stated.

Excel Workbook Tab	Description
1. Instructions	Basic instructions for all worksheets in this reporting workbook.
2. Work Plan	The tab should be completed by the time you submit your first quarterly report and reflects the approved work plan. Please complete shaded cells highlighted blue . Cells highlighted yellow are automatically populated based on previous responses in this spreadsheet; note for Table 1b, these responses will be autocompleted based on your entries on the Fleet Description tab (tabs 9a and 9b) and Infrastructure tab (10). For school district applicants, only the first row of Table 2 will be completed. Refer to the Data Dictionary tab 12 for additional guidance on each field.
3. Amendments	The Amendments tab should be used to update any changes in vehicle numbers, charger numbers, and/or funding amounts post-award. Please update this tab on an annual basis at the end of each year of project performance and at project closeout using the shade cells highlighted in blue . Cells highlighted yellow are automatically populated based on previous responses in this spreadsheet.
4. Financial Summary	Financial summary for the entire grant period of performance. Please complete shaded cells highlighted blue that contain grantee and original project budget information. Yellow cells on this worksheet will automatically feed from information in tabs 5-7 (Year 1-Year 3). If a modification to the grant is approved, please update the financial tabs accordingly.
5. Year 1	Financial summary for the first year of the project period. For each quarterly report, please complete all financial and narrative descriptive cells highlighted blue for each quarter the report is submitted. Cells highlighted yellow are automatically populated based on previous responses in this spreadsheet. Below the financial information, please ensure to complete the programmatic questions regarding the grant.
6. Year 2	Financial summary for the second year of the project period if grant period of performance is longer than one year. For each quarterly report, please complete all shaded financial and narrative descriptive cells highlighted blue for each quarter the report is submitted. Cells highlighted yellow are automatically populated based on previous responses in this spreadsheet. Below the financial information, please ensure to complete the programmatic questions regarding the grant.
7. Year 3	Financial summary for the third year of the project period if grant period of performance is longer than two years. For each quarterly report, please complete all shaded financial and narrative descriptive cells highlighted blue for each quarter the report is submitted. Cells highlighted yellow are automatically populated based on previous responses in this spreadsheet. Below the financial information, please ensure to complete the programmatic questions regarding the grant.

8. CHDV Priorities	<p>The tab should be completed based upon community engagement, project sustainability, workforce development, climate impact resiliency, and/or leveraging of additional external funds commitments defined in the finalworkplan. Please complete this tab QUARTERLY, if the final workplan committed to ANY, community engagement, project sustainability, workforce development, climate impact resiliency, and/or leveraging of additional external funds commitments as referred to in the evaluation metrics defined in the NOFO. During each quarterly reporting period of the project period of performance, please complete updates on these defined project commitments. The final report submission for the project should contain the end results of community engagement, project sustainability, workforce development, climate impact resiliency, and/or leveraging of additional external funds commitments completed during the project period.</p>
9. Fleet Description (9a and 9b)	<p>The Fleet Description should detail all vehicles impacted under the project. The Fleet Description should be updated quarterly with all vehicle upgrades completed during that quarter. Please fill out shaded cells highlighted blue. Cells highlighted yellow are automatically populated based on previous responses in this spreadsheet. You do NOT need to make a separate worksheet for each school district or fleet. This Fleet Description is broken into two tabs: Tab 9a. Current Vehicle Information and Tab 9b. New Vehicle Upgrade Information. Each sheet has capacity for up to 250 vehicles. Please refer to the Fleet Description data definitions on tab 12 (Data Dictionary) for additional guidance on each field.</p>
10. Infrastructure	<p>The Infrastructure Description should detail all electric vehicle supply equipment (EVSE) and other eligible supporting infrastructure purchased under the project. The Infrastructure worksheet should be updated quarterly as EVSEs and other eligible supporting infrastructure are procured and installed. Please fill out shaded cells highlighted blue and add additional rows as needed to capture all units. Cells highlighted yellow are automatically populated based on previous responses in this spreadsheet. Please refer to the Infrastructure data definitions on Tab 12 (Data Dictionary) for data field definitions. Reminder: All Level 2 EVSEs must be ENERGY STAR certified. All EVSE and infrastructure must comply with Build America, Buy America (BABA) requirements.</p>
11. Final Report	<p>Final project details including actual programmatic results. Please complete shaded cells highlighted blue. Cells highlighted yellow are automatically populated based on previous responses in this spreadsheet.</p>
12. Data Dictionary	<p>Please refer to the dictionary on this tab for support in completing the Current and New Fleet Descriptions (tab 9a and tab 9b) and the Infrastructure tab (tab 10).</p>

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant
Work Plan

Instructions

Please complete Tables 1-4 below on this tab using information from your approved workplan. The grant recipient must fill out shaded cells highlighted **blue**. Cells highlighted **yellow** are automatically populated based on previous responses in this spreadsheet or from fields that will be populated in the Financial Summary tab (Tab 4.)

Table 1a. Project Overview	
Field	Response
Grant Recipient	
Grant Number	
Project Period of Performance - Start date (mm/dd/yyyy)	
Project Period of Performance - End date (mm/dd/yyyy)	
Project Title	
Project Sub-Program	
EPA Project Award Amount	
Estimated EPA Funds for All Vehicles	\$ -
Estimated EPA Funds for Class 6 or 7 Electric School Buses	
Estimated EPA Funds for Class 6 or 7 Vocational Battery Electric Vehicles	
Estimated EPA Funds for Class 6 or 7 Hydrogen Fuel Cell Vocational Vehicles	
Estimated EPA Funds for EV Chargers and/or H2 Fueling Infrastructure	\$ -
Estimated EPA Funds for AC Level 2 Chargers	
Estimated EPA Funds for DC Level 3 Chargers	
Estimated EPA Funds for H2 Fueling Infrastructure	
Estimated EPA Funds for Other Infrastructure (BESS, On-Site Power Generation, or other eligible infrastructure components)	

Table 1b. Project Summary and Approach	
Question	Answer
Did any planned activities or commitments change between the submitted application and the approved workplan? If yes, please provide context and details to the approved changes (example: the number of electric vehicles was reduced due to partial funding).	
Does the project include school buses?	
Does the project include non-school-bus zero-emission Class 6/7 vehicles?	
If you intend to purchase hydrogen fuel-cell electric vehicles (FCEV), may we contact you about them?	
Please use the space provided to add a short narrative description of the project summary and approach to cover anything not captured in Table 2. Work Plan. Language from the Project Summary and Approach section of the application may be used here.	

Table 1c. Financial Summary (Values will be auto-populated based on values entered into the Financial Summary Tab and Annual Reporting Tabs (Tabs 4-7).)

Award Component	Value
Federal Project Award Amount	\$ -
Reported EPA Funds for Vehicles	\$ -
Reported EPA Funds for Class 6 or 7 Electric School Buses	
Reported EPA Funds for Class 6 or 7 Vocational Battery Electric Vehicles	
Reported EPA Funds for Class 6 or 7 Hydrogen Vocational Vehicles	
Reported EPA Funds for Infrastructure	\$ -
Reported EPA Funds for EV Chargers	\$ -
Reported EPA Funds for AC Level 2 Chargers	\$ -
Reported EPA Funds for DC Level 3 Chargers	\$ -
Reported EPA Funds for H2 Fueling Infrastructure	\$ -
Reported EPA Funds for Other Infrastructure (BESS, On-Site Power Generation, or other eligible infrastructure components)	\$ -

Table 2. Work Plan

Please complete the following table of information. For school district applicants, only the first row in Table 2a. will be completed. For state, other m information for each school district that will be served by the new buses in Table 2a. and all non-school-bus grantees in Table 2b. Please refer to the

Table 2a: School District Summary

[illegible]

◀ Access additional rows to Table 2b by selecting the "+" button here.

Table 2b: Non-School-Bus Grantee Summary[illegible]

◀ Access additional rows to Table 2b by selecting the "+" button here.

Table 3. CHDV Priorities	
CHDV Priority	Question
A. Community Engagement	Does the workplan demonstrate actions and/or commitments to engage communities? <i>If no, please jump to the next section, "Project Sustainability." If yes, please complete the rest of this section.</i>
A. Community Engagement	1. How does the workplan demonstrate engagement with the communities identified above, especially local residents, to ensure their meaningful participation with respect to the design, planning, and performance of the project?
B. Project Sustainability	Does the workplan demonstrate actions and/or commitments to promote sustainable project results and benefits? <i>If no, please jump to the next section, "Workforce Development." If yes, please complete the rest of this section.</i>
B. Project Sustainability	1. How does the workplan demonstrate that project results and benefits will be sustainable and that the applicant and project partners have the ability to promote and continue efforts to reduce emissions from vehicles after EPA funding for the project has ended?
C. Workforce Development	Does the workplan demonstrate actions and/or commitments to promote workforce development? <i>If no, please jump to the next section, "Project Resilience to Climate Impacts." If yes, please complete the rest of this section.</i>
C. Workforce Development	1. How does the workplan demonstrate a plan to prepare the workforce for the project?
D. Project Resilience to Climate Impacts	Does the workplan demonstrate actions and/or commitments to promote project resilience to climate impacts? <i>If no, please jump to the next section, "Leveraging of Additional External Funds". If yes, please complete the rest of this section.</i>
D. Project Resilience to Climate Impacts	1. How does the workplan demonstrate planning or action taken towards building project resilience and reducing vulnerabilities to climate impacts?
E. Leveraging of Additional External Funds	Does the workplan demonstrate that the recipient has leveraged or plans to leverage additional external funds in order to support proposed project activities? <i>If no, please jump to the next table, "Timeline and Milestones". If yes, please complete the rest of this section.</i>
E. Leveraging of Additional External Funds	1. How does the workplan demonstrate that the recipient has leveraged or plans to leverage additional external funds in order to support proposed project activities, as well as how these funds will be used to contribute to the performance and success of the project?

Table 4. Timeline and Milestones	
<p>Please use the rows below to indicate key project milestones and activities, the timeline for each, and the responsible party for each milestone and a represented either as the expected month(s) each activity/milestone will take place (ex., September 2024, September 2024 - December 2024, etc.), or represented with descriptors such as "continuous," "ongoing," or otherwise described in relation to other activities and milestones (ex., 1 month after Additional rows may be accessed by selecting the "+" at the bottom of the table.</p>	
Timeline	Responsible Party

◀ Access additional rows to Table 4 by selecting the "+" button here.

Agency
ant Program

Municipality, and nonprofit school transportation association applicants, please provide Data Dictionary (tab 12) for additional guidance on each field.

[illegible][illegible]

Answer 1	Answer 2
(Y or N or N/A)	
(Y or N or N/A)	
(Y or N or N/A)	
(Y or N or N/A)	
N/A	

activity. Timeline can be or, if applicable, can be for activity X). Note:
Milestone/Activity

[illegible][illegible]

[illegible][illegible]



[illegible][illegible]

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Clean Heavy-Duty Ve
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Instructions

Recipients must agree to carry out the project in accordance with the final approved workplan. Recipients are required to r defined in 2 CFR §200.308. Proposed modifications to the approved workplan, including additions, deletions, or changes in approval. Depending on the type of changes, a formal amendment to the award may be necessary. **If the EPA project offic captured in the this tab. Fill out this tab at the end of each year of project performance and select the relevant year of ti from the EPA project officer. The Amendments tab does not need to be completed if the project is carried out in accordance**

Table 5a. Post-Award Amendments			
Update Year	Type of Amendment	Grantee Name	NCES ID (If applicable)
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		
(Select Year)	(Select Amendment Type)		

Table 5b. Change in funding by project year (Values will auto-populate based on data entered in table 5a)		
Project Year	Number of Amendments By Year	Change in Funding Amount by Year
Project Year One	0	0
Project Year Two	0	0
Project Year Three	0	0

Environmental Protection Agency
Highway Vehicles (CHDV) Grant Program
Amendments

request prior written approval from EPA for any budget or program plan revisions, as the schedule, shall be submitted in a timely manner to the EPA project officer for **he approves modifications to the approved workplan, any changes must be he update.** The Amendments tab does not supersede or replace written approval with the final approved workplan.

[illegible]

[illegible]

Change in Funding Amount	
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant Program
Financial Summary - Project Lifetime

Instructions

Financial summary for the entire grant period of performance. Please complete shaded cells highlighted **blue** that contain grantee and original project budget information. **Yellow** cells on this worksheet entered in tabs 5-7 (Year 1-Year 3). If a modification to the grant is approved, please update the financial tabs accordingly.

Table 6. Summary Rate of Expenditure

Record project budget funds ONLY from approved final workplan. All other numbers will reflect automatically from subsequent tabs.

Financial Summary	Project Budget				Total Expenses to Date				EPA Funds Remaining Balance
	EPA Funds Project Budget	Mandatory Cost Share Project Budget	Voluntary Cost Share Project Budget	Total Project Cost Project Budget	EPA Funds Expenses to Date	Mandatory Cost Share Expenses to Date	Voluntary Cost Share Expenses to Date	Total Project Cost Expenses to Date	
Personnel				\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Fringe Benefits				\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Travel				\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Equipment				\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Supplies				\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Contractual				\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Construction				\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other				\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Direct Cost Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Indirect Charges				\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Table 6a. Summary Rate of Expenditure of Other Leveraged Funds

	Project Budget	Total Expenses to Date	Remaining Balance
Other Leveraged Funds			

Table 7. Annual Rate of Expenditure

No Entry Needed - ALL numbers will reflect automatically from subsequent tabs.

Financial Summary	Year 1				Year 2				EPA Funds Year 3
	EPA Funds Year 1	Mandatory Cost Share Year 1	Additional Leveraged Funds Year 1	Total Project Cost Year 1	EPA Funds Year 2	Mandatory Cost Share Year 2	Additional Leveraged Funds Year 2	Total Project Cost Year 2	
Personnel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Fringe Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Contractual	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Construction	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Direct Cost Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Indirect Charges	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

TOTALS	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
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Table 7a. Annual Rate of Expenditure of Other Leveraged Funds

	Year 1		Year 2		Year 3
Other Leveraged Funds					

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et will automatically populate based on information

Remaining Balance		
Mandatory Cost Share Remaining Balance	Voluntary Cost Share Remaining Balance	Total Project Cost Remaining Balance
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -

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Year 3 (if applicable)		
Mandatory Cost Share Year 3	Additional Leveraged Funds Year 3	Total Project Cost Year 3
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -

\$	-	\$	-	\$	-

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Instructions

Financial summary for the first year of the project period. For each quarterly report, please complete all financial and narrative descriptions for the quarter the report is submitted. Cells highlighted **yellow** are automatically populated based on previous responses in this spreadsheet. Please ensure to complete the programmatic questions regarding the grant.

Table 8. Year 1 Annual Rate of Expenditure

Record and update project expenses at each interval according to the reporting cadence determined by your Project Officer. Previous field

Reporting Period	Jan-June of Year 1		
Enter Dates For this Reporting Period in the <i>blue</i> cells			
	EPA Funds Reporting Period 1	Mandatory Cost Share Reporting Period 1	Voluntary Cost Share Reporting Period 1
Personnel			
Fringe Benefits			
Travel			
Equipment			
Supplies			
Contractual			
Construction			
Other			
Direct Cost Total	\$ -	\$ -	\$ -
Indirect Charges			
TOTALS	\$ -	\$ -	\$ -

Table 8a. Year 1 Other Leveraged Funds

Reporting Period	Jan-June of Year 1	
Other Leveraged Funds		

Table 9. Project Updates - Narrative Responses

Record and update project updates below.

Please paste the planned activities, outputs, and outcome from the submitted workplan information. Provide updates and if any changes the dropdown to indicate if the activity is 1) Not yet started, 2) In progress, or 3) Completed.

[illegible]

Table 10. Project Questions

Please provide programmatic and narrative financial updates on the project. As quarterly reports are submitted, indicate updates or changes for each quarter. For each quarter, please indicate if there was a change from the previous quarter. If yes, please provide an explanation in the subsequent cell.

Question	Jan-June of Year 1 Update	July-Sept of Year 1 Update	Oct-Dec of Year 1 Update
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1. Provide a comparison of actual accomplishments to the objectives established for the reporting period.			
2. If anticipated outputs/outcomes and/or timelines/milestones are not met, why not? Did you encounter any problems during the reporting period which may interfere with meeting project objectives?			
3. If any additional voluntary leveraged funds are reported for this Reporting Period in Table 8 above, identify the source of the funds.			
4. Have there been any major personnel changes during this reporting period?			
5. Did any public relations events regarding this grant take place during the reporting period?			
6. Are you using websites or other tools used to relay information about this grant to the public?			
7. What project activities are planned for the next reporting period?			
8. Was any program income generated during the reporting period? Identify amount of program income, how it was generated, and how the program income was/will be used.			
9. Have any vehicles or activities changed from those included in the final workplan?			
10. Do you have any other comments or feedback?			

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant Program
Financial and Narrative Summary - Year 1

ve cells highlighted blue for each
below the financial information,

ds should remain and edits should be made to the whenever interannual reports are submitted.

July-Sept of Year 1

Total Project Cost Reporting Period 1	EPA Funds Reporting Period 2	Mandatory Cost Share Reporting Period 2	Voluntary Cost Share Reporting Period 2
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -	\$ -	\$ -	\$ -
\$ -			
\$ -	\$ -	\$ -	\$ -

July-Sept of Year 1

occurred, please provide that information accordingly. In the 'Progress to Date' column, please use

Progress Notes

July-Sept of Year 1	Oct-Dec of Year 1	Write below, as appropriate.

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	Oct-Dec of Year 1		
Total Project Cost Reporting Period 2	EPA Funds Reporting Period 3	Mandatory Cost Share Reporting Period 3	Voluntary Cost Share Reporting Period 3
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -	\$ -	\$ -	\$ -
\$ -			
\$ -	\$ -	\$ -	\$ -
	July-Sept of Year 2		

Total Project Cost9 Reporting Period 3	
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-

Instructions

Financial summary for the second year of the project period if grant period of performance is longer than one year. For each quarterly report, please complete all shaded financial and narrative descriptive cells highlighted blue for each quarter the report is submitted. Cells highlighted yellow are automatically populated based on previous responses in this spreadsheet. Below the financial information, please ensure to complete the programmatic questions regarding the grant.

Table 11. Year 2 Annual Rate of Expenditure

Record and update project expenses at each interval according to the reporting cadence determined by your Project Officer. Previous field

Reporting Period	Jan-March of Year 2		
Enter Dates For this Reporting Period in the <i>blue</i> cells			
	EPA Funds Reporting Period 1	Mandatory Cost Share Reporting Period 1	Voluntary Cost Share Reporting Period 1
Personnel			
Fringe Benefits			
Travel			
Equipment			
Supplies			
Contractual			
Construction			
Other			
Direct Cost Total	\$ -	\$ -	\$ -
Indirect Charges			
TOTALS	\$ -	\$ -	\$ -

Table 11a. Year 2 Other Leveraged Funds

Reporting Period	Jan-March of Year 2	
Other Leveraged Funds		

Table 12. Project Updates - Narrative Responses

Record and update project updates below.

Please paste the planned activities, outputs, and outcome from the submitted workplan information. Provide updates and if any changes activity is 1) Not yet started, 2) In progress, or 3) Completed.

[illegible]

Table 13. Project Questions

Please provide programmatic and narrative financial updates on the project. As quarterly reports are submitted, indicate updates or changes from the previous quarter. If yes, please provide an explanation in the subsequent cell.

Question	Jan-March of Year 2 Update	April-June of Year 2 Update	July-Sept of Year 2 Update
1. Provide a comparison of actual accomplishments to the objectives established for the reporting period.			
2. If anticipated outputs/outcomes and/or timelines/milestones are not met, why not? Did you encounter any problems during the reporting period which may interfere with meeting project objectives?			
3. If any additional voluntary leveraged funds are reported for this Reporting Period in Table 8 above, identify the source of the funds.			
4. Have there been any major personnel changes during this reporting period?			
5. Did any public relations events regarding this grant take place during the reporting period?			
6. Are you using websites or other tools used to relay information about this grant to the public?			
7. What project activities are planned for the next reporting period?			
8. Was any program income generated during the reporting period? Identify amount of program income, how it was generated, and how the program income was/will be used.			
9. Have any vehicles or activities changed from those included in the final workplan?			
10. Do you have any other comments or feedback?			

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant Program
Financial and Narrative Summary - Year 2

ds should remain and edits should be made to the whenever interannual reports are submitted.

April-June of Year 2

Total Project Cost Reporting Period 1	EPA Funds Reporting Period 2	Mandatory Cost Share Reporting Period 2	Voluntary Cost Share Reporting Period 2
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -	\$ -	\$ -	\$ -
\$ -			
\$ -	\$ -	\$ -	\$ -

April-June of Year 2

occurred, please provide that information accordingly. In the 'Progress to Date' column, please use the dropdown to indicate if the

			Progress Notes
April-June of Year 2	July-Sept of Year 2	Oct-Dec of Year 2	Write below, as appropriate.

ages for each quarter. For each

Oct-Dec of Year 2 Update

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	July-Sept of Year 2		
Total Project Cost Reporting Period 2	EPA Funds Reporting Period 3	Mandatory Cost Share Reporting Period 3	Voluntary Cost Share Reporting Period 3
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -	\$ -	\$ -	\$ -
\$ -			
\$ -	\$ -	\$ -	\$ -

	July-Sept of Year 2		

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	Oct-Dec of Year 2		
Total Project Cost⁹ Reporting Period 3	EPA Funds Reporting Period 4	Mandatory Cost Share Reporting Period 4	Voluntary Cost Share Reporting Period 4
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -	\$ -	\$ -	\$ -
\$ -			
\$ -	\$ -	\$ -	\$ -

	Oct-Dec of Year 2

Total Project Cost Reporting Period 4	
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-

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Instructions

Financial summary for the third year of the project period if grant period of performance is longer than two years. For each quarterly report, please complete all shaded financial and narrative descriptive cells highlighted blue for each quarter the report is submitted. Cells highlighted yellow are automatically populated based on previous responses in this spreadsheet. Below the financial information, please ensure to complete the programmatic questions regarding the grant.

Table 14. Year 3 Annual Rate of Expenditure

Record and update project expenses at each interval according to the reporting cadence determined by your Project Officer. Previous field

Reporting Period	Jan-March of Year 3		
Enter Dates For this Reporting Period in the blue cells			
	EPA Funds Reporting Period 1	Mandatory Cost Share Reporting Period 1	Voluntary Cost Share Reporting Period 1
Personnel			
Fringe Benefits			
Travel			
Equipment			
Supplies			
Contractual			
Construction			
Other			
Direct Cost Total	\$ -	\$ -	\$ -
Indirect Charges			
TOTALS	\$ -	\$ -	\$ -

Table 14a. Year 2 Other Leveraged Funds

Reporting Period	Jan-March of Year 3	
Other Leveraged Funds		

Table 15. Project Updates - Narrative Responses

Record and update project updates below.

Please paste the planned activities, outputs, and outcome from the submitted workplan information. Provide updates and if any changes activity is 1) Not yet started, 2) In progress, or 3) Completed.

[illegible]

Table 16. Project Questions

Please provide programmatic and narrative financial updates on the project. As quarterly reports are submitted, indicate updates or changes from the previous quarter. If yes, please provide an explanation in the subsequent cell.

Question	Jan-March of Year 3 Update	April-June of Year 3 Update	July-Sept of Year 3 Update
1. Provide a comparison of actual accomplishments to the objectives established for the reporting period.			
2. If anticipated outputs/outcomes and/or timelines/milestones are not met, why not? Did you encounter any problems during the reporting period which may interfere with meeting project objectives?			
3. If any additional voluntary leveraged funds are reported for this Reporting Period in Table 8 above, identify the source of the funds.			
4. Have there been any major personnel changes during this reporting period?			
5. Did any public relations events regarding this grant take place during the reporting period?			
6. Are you using websites or other tools used to relay information about this grant to the public?			
7. What project activities are planned for the next reporting period?			
8. Was any program income generated during the reporting period? Identify amount of program income, how it was generated, and how the program income was/will be used.			
9. Have any vehicles or activities changed from those included in the final workplan?			
10. Do you have any other comments or feedback?			

April-June of Year 3

EPA Funds FY 2019		EPA Funds FY 2020	
Total Project Cost Reporting Period 1	EPA Funds Reporting Period 2	Mandatory Cost Share Reporting Period 2	Voluntary Cost Share Reporting Period 2
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -	\$ -	\$ -	\$ -
\$ -			
\$ -	\$ -	\$ -	\$ -

	April-June of Year 3	

occurred, please provide that information accordingly. In the 'Progress to Date' column, please use the dropdown to indicate if the

[illegible]

ages for each quarter. For each

Oct-Dec of Year 3 Update

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	July-Sept of Year 3		
Total Project Cost Reporting Period 2	EPA Funds Reporting Period 3	Mandatory Cost Share Reporting Period 3	Voluntary Cost Share Reporting Period 3
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -	\$ -	\$ -	\$ -
\$ -			
\$ -	\$ -	\$ -	\$ -

	July-Sept of Year 3		

|

	Oct-Dec of Year 3		
Total Project Cost⁹ Reporting Period 3	EPA Funds Reporting Period 4	Mandatory Cost Share Reporting Period 4	Voluntary Cost Share Reporting Period 4
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -			
\$ -	\$ -	\$ -	\$ -
\$ -			
\$ -	\$ -	\$ -	\$ -
	Oct-Dec of Year 3		

Total Project Cost Reporting Period 4	
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-
\$	-

Please complete this tab if your organization committed to ANY community engagement, project sustainability, workforce development will automatically populate based on information entered in earlier tabs. Please use the drop downs for columns to indicate any update question is on row 127 of this sheet.

Table 17. Community Engagement	
Question	Answer 1
Did the workplan demonstrate actions and/or commitments to engage communities? If no, please jump to Table 18. If yes, please complete the rest of this section.	(Y or N or N/A)
1. How did the workplan demonstrate engagement with the communities identified above, especially local residents, to ensure their meaningful participation with respect to the design, planning, and performance of the project?	0
	(Y or N or N/A)
2. Did the workplan for this project demonstrate that the recipient and/or project partner(s) has an existing clear point of contact in a public platform (e.g., newsletter, website) for community issues and complaints (specific to air quality or broader) and a publicly documented policy or process to engage communities and get their input on operations and projects that impact air quality? The process could be a meeting in the past year and/or a policy or process to have a meeting or otherwise get input (e.g., a standing citizens advisory committee). Please include any narrative details in question 3.	
2.a. If no, did the workplan for this project demonstrate that the recipient and/or project partner(s) commit to completing one before the end of the project period?	(Y or N or N/A)
2.b. To date, has the recipient and/or project partner(s) completed this commitment?	
3. Please provide any additional details and/or a status update to be provided for this category, including but not limited to the URL(s) where the public can find the clear point of contact and policy or process; a description of the point of contact and policy or process; and any other relevant information. Please use the drop downs under 'Please Select One' to indicate which quarter.	
Community Engagement Update 1	
Community Engagement Update 2	
Community Engagement Update 3	
Community Engagement Update 4	
Community Engagement Update 5	
Community Engagement Update 6	
Community Engagement Update 7	

Community Engagement Update 8	
Community Engagement Update 9	
Community Engagement Update 10	
Please provide any additional details or comments regarding community engagement	

Table 18. Project Sustainability	
Question	Answer 1
Did the workplan demonstrate actions and/or commitments to promote sustainable project results and benefits? If no, please jump to Table 19. If yes, please complete the rest of this section.	(Y or N or N/A)
1. How did the workplan demonstrate that project results and benefits will be sustainable and that the applicant and project partners have the ability to promote and continue efforts to reduce emissions from vehicles after EPA funding for the project has ended?	0
2. Zero-Emission Projects For non-ZE projects, skip to question 3.	
2a. Did the workplan for this project demonstrate coordination and/or consultation with utilities on the feasibility of the project? This could include, but is not limited to, discussion with utilities on project charging needs, project upgrade needs, project costs, rates for future service, and/or the timeframe for necessary upgrades. Please include any narrative details in question 4.	(Y or N or N/A)
2b. If no, did the workplan for this project demonstrate that the recipient and/or project partner(s) commit to such coordination before the end of the project period?	(Y or N or N/A)
3. To date, has the recipient and/or project partner(s) completed this commitment?	
4. Please provide additional details and any relevant status updates for this section, including but not limited to describing the extent of coordination with utilities, noting the timing and frequency of discussions with utilities, and any project decisions impacted by these discussions. Please use the drop downs under 'Please Select One' to indicate which quarter.	
Project Sustainability Update 1	
Project Sustainability Update 2	
Project Sustainability Update 3	
Project Sustainability Update 4	
Project Sustainability Update 5	
Project Sustainability Update 6	
Project Sustainability Update 7	
Project Sustainability Update 8	

Project Sustainability Update 9	
Project Sustainability Update 10	
Please provide any additional details or comments regarding project sustainability	

Table 19. Workforce Development	
Question	Answer 1
Did the workplan demonstrate actions and/or commitments to promote workforce development? If no, please jump to Table 20. If yes, please complete the rest of this section.	(Y or N or N/A)
1. How did the workplan demonstrate a plan to prepare the workforce for the project?	0
2. Did the workplan for this project demonstrate that current drivers, mechanics, electricians, and other essential personnel have received training to safely operate and maintain the new vehicles and infrastructure? This could include the establishment of workforce training programs for zero emission vehicles and charging infrastructure. Please include any narrative details in question 6.	(Y or N or N/A)
2.a. If no, did the workplan for this project demonstrate that the recipient and/or project partner(s) commit to ensuring current drivers, mechanics, electricians, and other essential personnel receive training to safely operate and maintain the new vehicles and infrastructure before the end of the project period?	(Y or N or N/A)
2.b. To date, has the recipient and/or project partner(s) completed this commitment?	
3. Did the workplan for this project demonstrate that the recipient and/or project partner(s) have clarified protections to ensure existing workers are not replaced or displaced because of new technologies? Please include any narrative details in question 6.	(Y or N or N/A)
3.a. If no, did the workplan for this project demonstrate that the recipient and/or project partner(s) commit to clarifying protections to ensure existing workers are not replaced for displaced because of new technologies before the end of the project period?	(Y or N or N/A)
3.b. To date, has the recipient and/or project partner(s) completed this commitment?	
4. Did the workplan for this project demonstrate that the recipient and/or project partner(s) have increased the availability of domestic manufacturing and workforce for zero-emission vehicles, engines, and other key components (e.g., batteries)? Please include any narrative details in question 6.	(Y or N or N/A)
4.a. If no, did the workplan for this project demonstrate that the recipient and/or project partner(s) commit to increasing the availability of domestic manufacturing and workforce for zero- and near-zero emission vehicles, engines, and other key components (e.g., batteries) before the end of the project period?	(Y or N or N/A)
4.b. To date, has the recipient and/or project partner(s) completed this commitment?	
5. Did the workplan for this project demonstrate that the recipient and/or project partner(s) have other measures and/or policies in place to promote workforce development? If yes, please describe the other measures and/or policies in more detail below. Please include any narrative details in question 6.	(Y or N or N/A)
5.a. If no, did the workplan for this project demonstrate that the recipient and/or project partner(s) commit establishing measures and/or policies to promote workforce development before the end of the project period?	(Y or N or N/A)
5.b. To date, has the recipient and/or project partner(s) completed this commitment?	

6. Please provide additional details and any relevant status updates for this section, including but not limited to details on training programs, protections for existing workers, measures taken to increase the availability of domestic manufacturing and workforce, and/or descriptions of any additional policies and measures to promote workforce development, as well as any changes made to these throughout the project period. Please use the drop downs under 'Please Select One' to indicate which quarter.	
Workforce Development Update 1	
Workforce Development Update 2	
Workforce Development Update 3	
Workforce Development Update 4	
Workforce Development Update 5	
Workforce Development Update 6	
Workforce Development Update 7	
Workforce Development Update 8	
Workforce Development Update 9	
Workforce Development Update 10	
Please provide any additional details or comments regarding workforce development.	

Table 20. Project Resilience to Climate Impacts	
Question	Answer 1
Did the workplan demonstrate actions and/or commitments to promote project resilience to climate impacts? If no, please jump to Table 21. If yes, please complete the rest of this section.	(Y or N or N/A)
1. How did the workplan demonstrate planning or action taken towards building project resilience and reducing vulnerabilities to climate impacts?	0
	(Y or N or N/A)
2. Did the workplan for this project demonstrate that the recipient and/or project partner(s) have assessed and implemented climate change adaptation considerations to help ensure that the project achieves its expected outcomes even as the climate changes? This could include assessing project vulnerability to local climate impacts when making siting decision and operational plans, ensuring fleets and equipment are protected from climate change impacts, and/or protecting infrastructure from storm damage. Please include any narrative details in question 4.	
	(Y or N or N/A)
2.a. If no, did the workplan for this project demonstrate that the recipient and/or project partner(s) commit to assessing and implementing climate change adaptation considerations before the end of the project period?	
2.b. To date, has the recipient and/or project partner(s) completed this commitment?	

3. Did the workplan for this project demonstrate that the recipient and/or project partner(s) have other measures and/or policies in place to promote project resilience to climate impacts? If yes, please describe the other measures and/or policies in more detail below. Please include any narrative details in question 4.	(Y or N or N/A)
3.a. If no, did the workplan for this project demonstrate that the recipient and/or project partner(s) commit establishing measures and/or policies to promote project resilience to climate impacts before the end of the project period?	(Y or N or N/A)
3.b. To date, has the recipient and/or project partner(s) completed this commitment?	
4. Please provide additional details and any relevant status updates for this section, including but not limited to details on climate impact assessments, descriptions of project decisions impacted by these assessments, and/or descriptions of any additional policies and measures to promote project resilience to climate impacts, as well as any changes made to these throughout the project period. Please use the drop downs under 'Please Select One' to indicate which quarter.	
Project Resilience to Climate Impacts Update 1	
Project Resilience to Climate Impacts Update 2	
Project Resilience to Climate Impacts Update 3	
Project Resilience to Climate Impacts Update 4	
Project Resilience to Climate Impacts Update 5	
Project Resilience to Climate Impacts Update 6	
Project Resilience to Climate Impacts Update 7	
Project Resilience to Climate Impacts Update 8	
Project Resilience to Climate Impacts Update 9	
Project Resilience to Climate Impacts Update 10	
Please provide any additional details or comments regarding resiliency to climate impacts.	

Table 21. Leveraging of Additional External Funds	
Question	Answer 1
Did the workplan demonstrate that the recipient has leveraged or plans to leverage additional external funds in order to support proposed project activities? If yes, please complete the rest of this section.	N/A
1. How did the workplan demonstrate that the recipient has leveraged or plans to leverage additional external funds in order to support proposed project activities, as well as how these funds will be used to contribute to the performance and success of the project?	0

<p>2. Please provide updates on proposed or secured additional external funds using the rows below. This should include additional external leveraged funds, but should not include applicant funds. Place the Source Name in the 'Answer 1' field and refer to the following definitions when selecting Status:</p> <p>"Not Yet Started:" Funding is proposed but the application process has not yet begun "In Progress:" The funding application or selection process is underway, but funds have not been awarded "Awarded:" Funding has been officially awarded "Not Awarded:" Funding that had been applied for was not awarded</p>	
External leveraged funds source 1	
External leveraged funds source 2	
External leveraged funds source 3	
External leveraged funds source 4	
External leveraged funds source 5	
External leveraged funds source 6	
External leveraged funds source 7	
External leveraged funds source 8	
External leveraged funds source 9	
External leveraged funds source 10	
<p>3. Are there any updates to be provided or additional information for any proposed or secured additional external funds? If yes, please provide additional details and a status update below, including a description of how any secured funds are being used to support proposed project activities and how they are contributing to the performance and success of the project. If any proposed funding was not awarded, use the space provided to indicate your plans to make up for these funds. Please use the drop downs under 'Please Select One' to indicate which quarter.</p>	
Leveraging of Additional External Funds Update 1	
Leveraging of Additional External Funds Update 2	
Leveraging of Additional External Funds Update 3	
Leveraging of Additional External Funds Update 4	
Leveraging of Additional External Funds Update 5	
Leveraging of Additional External Funds Update 6	
Leveraging of Additional External Funds Update 7	
Leveraging of Additional External Funds Update 8	
Leveraging of Additional External Funds Update 9	
Leveraging of Additional External Funds Update 10	
Please provide any additional details or comments regarding leveraged additional external funds of the project.	

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant Program
CHDV Priorities

Instructions

ent, climate impact resiliency, or leveraging of additional external funds actions or commitments in your application, as referred to in the evaluation me
tes that occurred during the reporting period indicating continued progress towards commitments. At the end of each of the sections below, there is a

Status Update	Quarter Completed
Select Status	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter

	Select Quarter
	Select Quarter
	Select Quarter

Status Update	Quarter Completed
Select Status	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter

	Select Quarter
	Select Quarter

Status Update	Quarter Completed
Select Status	Select Quarter
Select Status	Select Quarter
Select Status	Select Quarter
Select Status	Select Quarter
Select Status	Select Quarter

	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter

Status Update	Quarter Completed
Select Status	Select Quarter

Select Status	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter
	Select Quarter

Status Update	Quarter Completed	Amount (\$)

Select Status	Select Quarter	
Select Status	Select Quarter	
Select Status	Select Quarter	
Select Status	Select Quarter	
Select Status	Select Quarter	
Select Status	Select Quarter	
Select Status	Select Quarter	
Select Status	Select Quarter	
Select Status	Select Quarter	
Select Status	Select Quarter	
	Select Quarter	
	Select Quarter	
	Select Quarter	
	Select Quarter	
	Select Quarter	
	Select Quarter	
	Select Quarter	
	Select Quarter	
	Select Quarter	

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metrics defined in section V.A. Evaluation Criteria in the NOFO. Only cells shaded in blue need to be filled out; cells shaded in yellow cell to provide additional narrative responses, as appropriate. Please take care to ensure all questions are answered; the final

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U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHD)
Current Fleet Description

Instructions

The Current Fleet Description table should detail all vehicles that will be scrapped, sold, or donated under this project. The Current Fleet Description table should be filled out for all vehicles that will be replaced by a single ZE vehicle. The Current Vehicle needs to be paired with the replacement vehicle, if two or more vehicles will be replaced by a single ZE vehicle, list each vehicle on a separate line and New Vehicle 1, New Vehicle 1 would be selected multiple times from the dropdown in column C. The sheet has capacity for 300 vehicles on each field.

Note: the Current Vehicle Activity Data data should be included in the reporting template during the first reporting period in which the vehicle is replaced. Contact your PO for further guidance.

Table 22. CURRENT VEHICLE INFORMATION

22a. Basic Fleet Information

Vehicle	Is this vehicle a part of a group of vehicles that will be replaced by a single ZE vehicle? (vocational vehicles sub-program only)	Corresponding New Vehicle (select 'New Vehicle XX' from 'New Fleet Description' table, provided in dropdown)	Group Name
Example Vehicle	Example: No	Example: New Vehicle 67	Example: ESBs for District A
Current Vehicle 1			
Current Vehicle 2			
Current Vehicle 3			
Current Vehicle 4			
Current Vehicle 5			
Current Vehicle 6			
Current Vehicle 7			
Current Vehicle 8			
Current Vehicle 9			
Current Vehicle 10			
Current Vehicle 11			
Current Vehicle 12			
Current Vehicle 13			
Current Vehicle 14			
Current Vehicle 15			
Current Vehicle 16			
Current Vehicle 17			
Current Vehicle 18			
Current Vehicle 19			
Current Vehicle 20			
Current Vehicle 21			
Current Vehicle 22			
Current Vehicle 23			
Current Vehicle 24			
Current Vehicle 25			
Current Vehicle 26			
Current Vehicle 27			
Current Vehicle 28			
Current Vehicle 29			
Current Vehicle 30			
Current Vehicle 31			
Current Vehicle 32			
Current Vehicle 33			
Current Vehicle 34			
Current Vehicle 35			
Current Vehicle 36			
Current Vehicle 37			
Current Vehicle 38			
Current Vehicle 39			
Current Vehicle 40			
Current Vehicle 41			
Current Vehicle 42			

Current Vehicle 43			
Current Vehicle 44			
Current Vehicle 45			
Current Vehicle 46			
Current Vehicle 47			
Current Vehicle 48			
Current Vehicle 49			
Current Vehicle 50			
Current Vehicle 51			
Current Vehicle 52			
Current Vehicle 53			
Current Vehicle 54			
Current Vehicle 55			
Current Vehicle 56			
Current Vehicle 57			
Current Vehicle 58			
Current Vehicle 59			
Current Vehicle 60			
Current Vehicle 61			
Current Vehicle 62			
Current Vehicle 63			
Current Vehicle 64			
Current Vehicle 65			
Current Vehicle 66			
Current Vehicle 67			
Current Vehicle 68			
Current Vehicle 69			
Current Vehicle 70			
Current Vehicle 71			
Current Vehicle 72			
Current Vehicle 73			
Current Vehicle 74			
Current Vehicle 75			
Current Vehicle 76			
Current Vehicle 77			
Current Vehicle 78			
Current Vehicle 79			
Current Vehicle 80			
Current Vehicle 81			
Current Vehicle 82			
Current Vehicle 83			
Current Vehicle 84			
Current Vehicle 85			
Current Vehicle 86			
Current Vehicle 87			
Current Vehicle 88			
Current Vehicle 89			
Current Vehicle 90			
Current Vehicle 91			
Current Vehicle 92			
Current Vehicle 93			
Current Vehicle 94			
Current Vehicle 95			
Current Vehicle 96			
Current Vehicle 97			
Current Vehicle 98			
Current Vehicle 99			
Current Vehicle 300			

← Click + to access additional rows. Please do not insert or delete rows.

ction Agency

IV) Grant Program

Description

The Description tab should be updated quarterly with any new information that becomes available during the quarter. The user should add or delete a vehicle listed on the New Fleet Description tab by selecting the 'New Vehicle' from the dropdown in column C. For each new vehicle added, the user must select the corresponding New Vehicle in column C. For example, if Current Vehicles 1-3 were going to replace Current Vehicles 4-6, the user would select the corresponding New Vehicle in column C. For additional guidance, refer to the Current Fleet Description data definitions in the Data Dictionary (Tab 12) for additional guidance.

e data become available and are only reported once during the project. If you do not have data available, please

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant
New Fleet Description

Instructions

The New Fleet Description should detail all vehicles that will be purchased under the project. The New Fleet Description should be with a diagonal pattern (///). The sheet has capacity for 250 vehicles. Please refer to the Fleet Description data definitions on tab 1. Note: the New Vehicle Activity Data data should be included in the reporting template during the first reporting period in which the available, please contact your PO for further guidance.

Table 23. NEW REPLACEMENT VEHICLE INFORMATION

23a. Upgrade Vehicle Information

Vehicle	Group Name (optional)	Year of Upgrade Action	New Vehicle Fleet Owner
Example Vehicle	Example: ESB for District A	Example: 2025	Example: Walton School District
New Vehicle 1			
New Vehicle 2			
New Vehicle 3			
New Vehicle 4			
New Vehicle 5			
New Vehicle 6			
New Vehicle 7			
New Vehicle 8			
New Vehicle 9			
New Vehicle 10			
New Vehicle 11			
New Vehicle 12			
New Vehicle 13			
New Vehicle 14			
New Vehicle 15			
New Vehicle 16			
New Vehicle 17			
New Vehicle 18			
New Vehicle 19			
New Vehicle 20			
New Vehicle 21			
New Vehicle 22			
New Vehicle 23			
New Vehicle 24			
New Vehicle 25			
New Vehicle 26			
New Vehicle 27			
New Vehicle 28			
New Vehicle 29			
New Vehicle 30			
New Vehicle 31			
New Vehicle 32			
New Vehicle 33			
New Vehicle 34			
New Vehicle 35			
New Vehicle 36			
New Vehicle 37			
New Vehicle 38			
New Vehicle 39			
New Vehicle 40			
New Vehicle 41			
New Vehicle 42			
New Vehicle 43			
New Vehicle 44			
New Vehicle 45			

New Vehicle 46			
New Vehicle 47			
New Vehicle 48			
New Vehicle 49			
New Vehicle 50			
New Vehicle 51			
New Vehicle 52			
New Vehicle 53			
New Vehicle 54			
New Vehicle 55			
New Vehicle 56			
New Vehicle 57			
New Vehicle 58			
New Vehicle 59			
New Vehicle 60			
New Vehicle 61			
New Vehicle 62			
New Vehicle 63			
New Vehicle 64			
New Vehicle 65			
New Vehicle 66			
New Vehicle 67			
New Vehicle 68			
New Vehicle 69			
New Vehicle 70			
New Vehicle 71			
New Vehicle 72			
New Vehicle 73			
New Vehicle 74			
New Vehicle 75			
New Vehicle 76			
New Vehicle 77			
New Vehicle 78			
New Vehicle 79			
New Vehicle 80			
New Vehicle 81			
New Vehicle 82			
New Vehicle 83			
New Vehicle 84			
New Vehicle 85			
New Vehicle 86			
New Vehicle 87			
New Vehicle 88			
New Vehicle 89			
New Vehicle 90			
New Vehicle 91			
New Vehicle 92			
New Vehicle 93			
New Vehicle 94			
New Vehicle 95			
New Vehicle 96			
New Vehicle 97			
New Vehicle 98			
New Vehicle 99			
New Vehicle 250			

← Click + to access additional rows. Please do not insert or delete rows.

Agency	
Grant Program	

updated quarterly with all vehicle upgrades completed. Please fill out all shaded cells highlighted blue 2 (Data Dictionary) for additional guidance on each field.

The data become available and are only reported once during the project. If you do not have data

[illegible]

9b. New Fleet Description
70 of 224

[illegible]

[illegible]

23f. Warranty Information

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

Below are three tables (22-24). Please complete all three. The EVSE Equipment Information (Table 22) should detail all electric vehicle infrastructure needs to be listed by school district and/or city. That is, if School District A and School District B are procuring the updated semi-annually as EVSEs and supporting infrastructure are procured and installed. Please only fill out shaded cells highlighting ENERGY STAR certified.

On November 15, 2021, the Infrastructure Investment and Jobs Act ("IIJA"), Pub. L. No. 117-58, which includes the Build America, Buy American Act, requires that if award recipient will be installing, upgrading, or replacing "infrastructure," with funds included in the assistance agreement funding and not included as cost share in any federal grant are not subject to BABA; cost share is defined in 2 CFR 200.306. For those recipient is encouraged to use goods, products, and materials produced in the United States, to the maximum extent, consistent with the Act.

Table 24: Electric Vehicle Service Equipment Information		
	Table 24a. EVSE Information Overview and Funding Source	
	Type of Charger	If Level 2, is it ENERGY STAR certified
Example EV Infrastructure	Example: AC Level 2	Example: Yes
EVSE Group 1		
EVSE Group 2		
EVSE Group 3		
EVSE Group 4		
EVSE Group 5		
EVSE Group 6		
EVSE Group 7		
EVSE Group 8		
EVSE Group 9		
EVSE Group 10		
EVSE Group 11		
EVSE Group 12		
EVSE Group 13		
EVSE Group 14		
EVSE Group 15		

EVSE Group 16		
EVSE Group 17		
EVSE Group 18		
EVSE Group 19		
EVSE Group 20		
EVSE Group 21		
EVSE Group 22		
EVSE Group 23		
EVSE Group 24		
EVSE Group 25		
EVSE Group 26		
EVSE Group 27		
EVSE Group 28		
EVSE Group 29		
EVSE Group 30		

Table 25. On-Site Power Generation Equipment Information		
Note: If the on-site power generation includes an energy storage system, information for such system needs to be documented in the Table 25a. On-Site Power Generation Equipment Overview, Cost, and Installation		
	Type of energy generation	Manufacturer of On-site Power Generation
Example On-site Power Generation	Example: Solar	Example: Manufacturer Name
On-site Power Generation 1		
On-site Power Generation 2		
On-site Power Generation 3		
On-site Power Generation 4		
On-site Power Generation 5		

On-site Power Generation 6		
On-site Power Generation 7		
On-site Power Generation 8		
On-site Power Generation 9		
On-site Power Generation 10		

Table 26. Battery Energy Storage System (BESS) Equipment Information		
Table 26a. Battery Energy Storage System (BESS) Equipment Overview, Cost, and In		
	Type of Battery	Manufacturer of BESS
BESS Example	Example: Lithium-Ion	Example: Manufacturer Name
BESS Group 1		
BESS Group 2		
BESS Group 3		
BESS Group 4		
BESS Group 5		
BESS Group 6		
BESS Group 7		
BESS Group 8		
BESS Group 9		
BESS Group 10		

Table 27. Hydrogen Fueling Station Information		
Table 27a. Hydrogen Fueling Station Inf		
	Type of Station (select from dropdown)	Type of Hydrogen Storage (select from dropdown)
Example: Hydrogen Fueling Station	Example: Gas	Example: Above Ground

Hydrogen fueling station 1		
Hydrogen fueling station 2		
Hydrogen fueling station 3		
Hydrogen fueling station 4		
Hydrogen fueling station 5		
Hydrogen fueling station 6		
Hydrogen fueling station 7		
Hydrogen fueling station 8		
Hydrogen fueling station 9		
Hydrogen fueling station 10		

<p>Are there any other infrastructure projects associated with this grant that are not listed above?</p> <p>If no, <i>please leave the following section blank</i>. If yes, please provide details in the box below on the infrastructure project, EPA funds use compliance was determined.</p> <p>Other Infrastructure Description:</p> <div></div>
--

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant Program
Infrastructure Description

Instructions

le supply equipment (EVSE) and supporting infrastructure purchased under the project. Table 23 focuses on on-site power. In the same EVSE, the EVSE will appear as two separate EVSE Groups. Similarly, for large school districts, if EVSE are being installed blue with a diagonal pattern (///); however, additional rows may be add as needed to capture all equipment. Please refer

Build America, Buy America (BABA) requirements

Buy America Act (BABA), Public Law 117-58, §§ 70901-52, was signed into law. BABA requires that on or after May 14, 2022, if EPA funds), then BABA requirements apply to the infrastructure project. The assistance agreement includes all funds in the grant. Non-federal funds not subject to BABA and included as “other leveraged resources” in the grantee’s workplan, the grant is not subject to BABA. For more information, please visit <https://www.epa.gov/cwsrf/build-america>.

[illegible]

the table below this one.

[illegible]

[illegible]

Refilling Pressure <i>(select from dropdown)</i>	Refilling Pressure: If Other, specify below	Total Hydrogen Storage Tank Capacity (kg)
Example: H35		Example: 1,200

Select Yes or No
ed for this infrastructure, and describe how BABA
EPA Funds for Other Eligible Infrastructure not listed in tables above:

[illegible]10. Infrastructure
100 of 224

Equipment Cost <i>only</i> Per Power Generation System	Are Federal funds being used to purchase on-site power generation equipment? (Yes/No)	Are Applicant funds being used to purchase on-site power generation equipment? (Yes/No)
Example: \$45,000	Example: Yes	Example: No

[illegible]

Total Number of Dispensers	Maximum Dispensing Flow Rate per Hose (kg/min)	Total Dispensing Capacity of the Station (kg/min)
Example: 6	Example: 2	Example: 12

[illegible]

Are State funds being used to purchase on-site power generation equipment? (Yes/No)	Are Local funds being used to purchase on-site power generation equipment? (Yes/No)	Are Other funds being used to purchase on-site power generation equipment? (Yes/No)
Example: No	Example: Yes	Example: No

Are State funds being used to purchase BESS equipment? (Yes/No)	Are Local funds being used to purchase BESS equipment? (Yes/No)	Are Other funds being used to purchase BESS equipment? (Yes/No)
Example: No	Example: Yes	Example: No

Total Number of Cooling Systems	Total Number of Compressors	Number of Storage Tanks
Example: 2	Example: 2	Example: 3

[illegible]

Is Program Income being used to purchase on-site power generation equipment? (Yes/No)	Total EPA Funds Expended Per on-site power generation equipment	Total Other Leveraged Funds Expended for on-site power generation:
Example: No	Example: \$45,000	Example: \$0.00
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -

		\$ -
		\$ -
		\$ -
		\$ -
		\$ -

Is Program Income being used to purchase BESS equipment? (Yes/No)	Total EPA Funds Expended Per Unit	Total Other Leveraged Funds Expended Per Unit
Example: No	Example: \$20,000	Example: \$25,000
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -

Table 27b. H2 Dispenser Pedestal Details		
Number of Dispenser Pedestals	Number of Hoses per Pedestal	H2 Dispenser Pedestal Manufacturer
Example: 3	Example: 2	Example: H2 Hoses & Co.

[illegible]

Total Funds Expended Installation Cost	Are Federal funds being used for Installation Cost? (Yes/No)	Are Applicant funds being used for Installation Cost? (Yes/No)	Are State funds being used for Installation Cost? (Yes/No)
Example: \$7,000	Example: Yes	Example: No	Example: No

[illegible]

Table 27c. H2 Storage Tank			
H2 Dispenser Pedestal Model	H2 Dispenser Pedestal Manufacture Year	H2 Storage Tank Manufacturer	H2 Storage Tank Model
Example: Magic Hose 1	Example: 2023	Example: H2 Super Tank	Example: ST001

Total EPA Funds Expended for EVSE	Total Other Leveraged Funds Expended for EVSE	Date of EVSE Manufacture (mm/dd/yyyy)
Example: \$24,000	Example: \$8,000	Example: 5/27/2024
\$ -	\$ -	
\$ -	\$ -	
\$ -	\$ -	
\$ -	\$ -	
\$ -	\$ -	
\$ -	\$ -	
\$ -	\$ -	
\$ -	\$ -	
\$ -	\$ -	
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\$ -	\$ -	

Are Local funds being used for Installation Cost? (Yes/No)	Are Other funds being used for Installation Cost? (Yes/No)	Is Program Income being used for Installation Cost? (Yes/No)
Example: Yes	Example: No	Example: No

Are Local funds being used for Installation Cost? (Yes/No)	Are Other funds being used for Installation Cost? (Yes/No)	Is Program Income being used for Installation Cost? (Yes/No)
---	---	---

Example: Yes	Example: No	Example: No
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	Table 27d. H2 Compressor	
--	--------------------------	--

H2 Storage Tank Manufacture Year	H2 Compressor Manufacturer	H2 Compressor Model
Example: 2023	Example: Cool Engineering Co.	Example: H2+HD

[illegible]

Total EPA Funds Expended - Installation Cost	Total Other Leveraged Funds Expended - Installation Cost	Date(s) On-Site Power Generation Equipment was Manufactured
Example: \$5,000	Example: \$2,000	Example: equipment: 3/2024; housing: 6/2023
	\$ -	
	\$ -	
	\$ -	
	\$ -	
	\$ -	

	\$ -	
	\$ -	
	\$ -	
	\$ -	
	\$ -	

Total EPA Funds Expended - Installation Cost:	Total Other Leveraged Funds Expended - Installation Cost	Date(s) BESS and related Equipment was Manufactured
Example: \$10,000	Example: \$2,000	Example: battery: 3/2024; housing: 6/20
	\$ -	
	\$ -	
	\$ -	
	\$ -	
	\$ -	
	\$ -	
	\$ -	
	\$ -	
	\$ -	

Table 27e. H2 Cooling System (refrigeration and heat exchanger)		
H2 Compressor Manufacture Year	H2 Cooling System Manufacturer	H2 Cooling System Model
Example: 2023	Example: Cool and Beyond	Example: Cool H2+ Mark I

[illegible]

		Table 25b. Location of On-site Power Generation
Date the On-site Power Generation was Installation (mm/dd/yyyy)	Date the On-site Power Generation was Operational (mm/dd/yyyy)	State
Example: 6/28/2024	Example: 7/31/2024	Example: VA

[illegible]

Table 27f. Service Details		
H2 Cooling System Manufacture Year	Annual Total H2 Dispensed (kg)	Who owns the H2 Fueling Station?
Example: 2023	Example: 200,000	Example: Port of Houston

[illegible]

Generation Infrastructure

County	City	Zip Code
Example: Arlington County	Example: Alexandria	Example: 22305

[illegible]

Table 27g. Location of H2 Station		
State (select from dropdown)	County (select from dropdown)	City
Example: VA	Example: Arlington County	Example: Alexandria

[illegible]

Table 25c. Ownership and Anticipated Use	
Street Address	Who owns the equipment?
Example: 400 1st Street	Example: Walton School District

Table 26c. Ownership and Anticipated Use	
Street Address	Who owns the equipment?
Example: 400 1st Street	Example: Walton School District

Zip Code	Street Address
Example: 22305	Example: 400 1st Street

[illegible]

Users of On-Site Power Generation Infrastructure

Anticipated Users of On-Site Power Generation Infrastructure	If serving school districts, Name of the School District(s) the On-site Power Generation will serve	If serving school districts, NCES ID of School District that the On-site Power Generation will serve
Example: Walton School District & NoVA Community College	Example: Walton School District	Example: 1234567

[illegible]

Table 27h. Installation Details		
Description of H2 Fueling Station Installation Work Performed	H2 Fueling Station Installation Performed by:	Date of H2 Fueling Station Installation (mm/dd/yyyy)
Please describe	Example: XYZ H2 Solutions	Example: 6/28/2024

[illegible]

Table 25d. BABA Compliance			
Is the on-site Power Generator subject to BABA? (Purchased with EPA Funds)	Is the on-site Power Generator BABA Compliant? (Select Options)	Is a waiver being used to fulfill BABA compliance for the On-site Power Generation?	If 'Yes - Other EPA Waiver' selected, explain
Example: Yes	Example: Yes - This infrastructure is BABA compliant	Example: No - Infrastructure meets all BABA requirements	Please describe
No			
No			
No			
No			
No			

No			
No			
No			
No			
No			

Table 26d. BABA Compliance			
Is the BESS subject to BABA? (Applies to infrastructure purchased with EPA Funds)	Is the BESS BABA Compliant?	Is a waiver being used to fulfill BABA compliance for the BESS?	If 'Yes - Other EPA Waiver' selected, explain
Example: Yes	Example: Yes - This infrastructure i	Example: No - Infrastructure meets	Please describe
No			
No			
No			
No			
No			
No			
No			
No			
No			
No			

Table 27i. Funding Details			
Date H2 Fueling Station Operational (mm/dd/yyyy)	H2 Fueling Infrastructure equipment Cost	Are Federal funds being used to purchase H2 Fueling Infrastructure equipment? (Yes/No)	Are Applicant funds being used to purchase H2 Fueling Infrastructure equipment? (Yes/No)
Example: 8/28/2024	Example: \$16,000	Example: Yes	Example: No

[illegible]

Totals			
Total EPA Funds Expended - Equipment and Installation		Total Other Leveraged Funds Expended - Equipment and Installation	
Example: \$50,000		Example: \$2,000	
\$	-	\$	-
\$	-	\$	-
\$	-	\$	-
\$	-	\$	-
\$	-	\$	-

\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -

Totals	
Total EPA Funds Expended - Equipment and Installation	Total Other Leveraged Funds Expended - Equipment and Installation
Example: \$30,000	Example: \$27,000
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -

Are State funds being used to purchase H2 Fueling Infrastructure equipment? (Yes/No)	Are Local funds being used to purchase H2 Fueling Infrastructure equipment? (Yes/No)	Are Other funds being used to purchase H2 Fueling Infrastructure equipment? (Yes/No)	Is Program Income being used to purchase H2 Fueling Infrastructure equipment? (Yes/No)
Example: No	Example: Yes	Example: No	Example: No

Total EPA Funds Expended for EVSE Installation Costs	Total Other Leveraged Funds Expended for EVSE Installation Costs	Does the Infrastructure Equipment Cost Include Installation?
Example: \$7,000.00	Example: \$5,000.00	Example: No
	\$ -	
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	\$	-	

Total EPA Funds Expended for H2 Fueling Infrastructure Equipment	Total Other Leveraged Funds Expended for H2 Fueling Infrastructure Equipment	Total Funds Expended for H2 Fueling Infrastructure Installation
Example: \$24,000	Example: \$8,000	Example: \$12,000

	\$	-	
	\$	-	
	\$	-	
	\$	-	
	\$	-	
	\$	-	
	\$	-	
	\$	-	
	\$	-	
	\$	-	
	\$	-	

[illegible]

Does the H2 Fueling Infrastructure Equipment Cost Include Installation?	Are Federal Funds being used for H2 Fueling Infrastructure Installation costs? (Yes/No)	Are Applicant Funds being used for H2 Fueling Infrastructure Installation costs? (Yes/No)
Example: No	Example: Yes	Example: No

Is the infrastructure subject to BABA? (Applies to infrastructure purchased with EPA Funds)	Is this infrastructure BABA Compliant? (Select Options)	Is a waiver being used to fulfill BABA compliance for the Infrastructure Project
Example: Yes	Example: Yes - This infrastructure is BABA compliant	Example: No - Infrastructure meets all BABA requirements
No		
No		
No		
No		
No		
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No		

Are State Funds being used for H2 Fueling Infrastructure Installation costs? (Yes/No)	Are Local Funds being used for H2 Fueling Infrastructure Installation costs? (Yes/No)	Are Other Funds being used for H2 Fueling Infrastructure Installation costs? (Yes/No)
Example: No	Example: Yes	Example: No

Table 24f. EVSE Cost Summary		
If 'Yes - Other EPA Waiver' selected, explain	Total EPA Funds Expended on EVSE Equipment and Installation	Total Other Leveraged Funds Expended on EVSE Equipment and Installation
Please describe	Example: \$31,000	Example: \$13,000.00
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
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Is Program Income being used for H2 Fueling Infrastructure Installation costs? (Yes/No)	Total EPA Funds Expended for H2 Fueling Infrastructure Installation Costs	Total Other Leveraged Funds Expended H2 Fueling Infrastructure Installation Costs
Example: No	Example: \$7,000.00	Example: \$5,000.00

		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -

[illegible]

Table 27j. H2 Fueling Infrastructure BABA Compliance		
Is the Hydrogen Fueling Infrastructure subject to BABA? (Applies to infrastructure purchased with EPA Funds)	Is the Hydrogen Fueling Infrastructure BABA Compliant? (select from dropdown)	Is a waiver being used to fulfill BABA compliance for the H2 Fueling Infrastructure? (select from dropdown)
Example: Yes	Example: Yes - This Infrastructure is BABA Compliant	Example: No - Infrastructure meets all BABA requirements

No		
No		
No		
No		
No		
No		
No		
No		
No		
No		

[illegible]

[illegible]

Table 27k. H2 Fueling Infrastructure Cost Summary		
If 'Yes - Other EPA Waiver' selected, explain	Total EPA Funds Expended on H2 Fueling Infrastructure Equipment and Installation	Total Other Leveraged Funds Expended on H2 Fueling Infrastructure Equipment and Installation
Please describe	Example: \$31,000	Example: \$13,000.00

	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -

[illegible]

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant Program
Final Report: Financial and Narrative Summary

Table 28. Project Updates - Narrative Responses
Record final project information.

Please paste the planned activities, outputs, and outcome from the last quarterly report. Please indicate the final results below.

Activities	Anticipated Outputs	Anticipated Outcomes	ACTUAL Results

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant Program
Final Report: Financial and Narrative Summary

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Table 29: Additional Questions

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant Program
Final Report: Financial and Narrative Summary

Please provide programmatic and narrative financial results on the project.

Question	Answer
1. Provide a narrative description of the project.	
2. Explain the reason for any differences in proposed versus actual outputs/outcomes identified in Table 25 above.	
3. Provide a narrative discussion of the actual project results (outputs and outcomes) and how the results are quantified. These may include, but are not limited to: <ul style="list-style-type: none"> • Number of replaced vehicles; • Dissemination of the project information and increased knowledge via list serves, websites, journals, and press/outreach events (provide web links where applicable); • Widespread adoption of the implemented technology; • Increased public awareness of project and results • Other 	
4. Provide information on subrecipients and vendors: <ul style="list-style-type: none"> • Sub-recipient information (name, award amount, project description); • Vendor information (name, payment amount, good/services provided); 	
5. Provide a narrative discussion of the successes and lessons learned for the entire project.	

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant Program
Final Report: Financial and Narrative Summary

6. If any cost-share or additional External funds are reported, identify the source of the funds.

7. Was any program income generated during the project period? Identify amount of program income, how it was generated, and how the program income was used.

8. Please provide:

a) Evidence that the replacement activity is an "early replacement," and would not have occurred during the project period through normal attrition (i.e. without the financial assistance provided by EPA). Supporting evidence can include verification that the vehicles replaced had useful life left and fleet characterization showing fleet age ranges and average turnover rates per the vehicle or fleet owner's budget plan, operating plan, standard procedures, or retirement schedule; and

b) Evidence of appropriate scrappage, sale, or vehicle donation (if applicable) including the engine serial numbers and/or the vehicle identification numbers (VIN). **Include Attachments as Necessary; refer to the CHDV Eligibility and Scrappage Statement for details.*

9. For projects that take place in an area affected by, or that include affected vehicles affected by, Federal, State or local law mandating emissions reductions, provide evidence that emission reductions funded with EPA funds were implemented prior to the effective date of the mandate and/or are in excess of (above and beyond) those required by the applicable mandate. **Include Attachments as Necessary*

10. Did you include at least one photo of successful, new vehicle(s) employed? If yes, please indicate if you approve of permission for EPA's future use of the photo(s) in future internal and external documents including, but not limited to Reports to Congress and case studies highlighting CHDV success stories.

U. S. Environmental Protection Agency
Clean Heavy-Duty Vehicles (CHDV) Grant Program
Final Report: Financial and Narrative Summary

11. Do you have any other comments or feedback?

Fleet Description Data

Prioritized

Self-Certified as Prioritized

Non-Attainment or Maintenance Area

EPA Funds

Other Leveraged Funds

Is this vehicle a part of a group of vehicles that will be replaced by a single ZE vehicle? (vocational vehicles sub-program only)

Corresponding New Vehicle (select 'New Vehicle XX' from 'New Fleet Description' table, provided in dropdown)

Group Name

Current Fleet Owner

Publicly or Privately Owned (select from dropdown)

Vehicle Type (select from dropdown)

Vehicle Class (select from dropdown)

Vehicle Vocation (select from dropdown)

Vehicle Group Sector (select from dropdown)

Vehicle Identification Number

Vehicle Manufacturer

Vehicle Model

Current Vehicle Model Year

Current Engine Fuel Type

Engine Family Name

GVWR

Annual Miles Traveled

Annual Idling Hours

Current Odometer

Annual Amount of Fuel Used

Remaining Life of Baseline Vehicle

Vehicle Disposition/Replacement Process

vehicle is expected to primarily operate (For Vehicles Model Year 2011 and newer; if known, select from dropdown)
the vehicle is expected to primarily operate (For Vehicles Model Year 2011 and newer; if known, select from dropdown)

School District Name (if applicable)

NCES ID (if applicable)

State (select from dropdown)

County (select from dropdown)

Percentage of Time operated in County

Place of Performance: City

Zip Code

School District Name
(if applicable) _2

NCES ID
(if applicable) _2

State _2

County _3

Percentage of Time operated in County _2

Place of Performance: City _3

Zip Code _2

Additional Counties where Vehicle Operates

Percentage of time operated in each Additional
County

Group name

(optional)

Year of Upgrade Action

New Vehicle Fleet Owner

New Vehicle Class

(select from dropdown)

VIN for New Vehicle(s)

New Vehicle Manufacturer

New Vehicle Model

New Vehicle Model Year

New Engine Family Name

New Vehicle Fuel Type

New Vehicle GVWR

Upgrade Cost per Vehicle

Total Federal Funds Expended per vehicle

(\$ of Total Cost per Unit)

New Vehicle Annual Miles Traveled

(miles per vehicle)

New Vehicle Equipped with Auxiliary Heater:

(Yes/No)

Auxiliary Heater type

(if not applicable, then N/A)

Capable of Bidirectional Charging:

(Yes/No/N/A)

Manufacturer of Battery Pack

Number of Battery Packs

Battery Capacity per Battery Pack

(kWh)

Vehicle Total Battery Capacity

(kWh)

Rated Charging Power

(kW)

Estimated Range in Miles

Manufacturer of Fuel Cell System

(if known)

Fuel Cell Stack Capacity

(kW)

Hydrogen Fuel Tank Capacity

(kg)

Included?

Number of Years Covered by Battery or Fuel Cell

System Warranty

Number of Years Covered by Battery or Fuel Cell

System Warranty

Total kWh of Battery or Fuel Cell System

Discharge Covered by Warranty

Powertrain Warranty Included?

(Yes/No)

Number of Years Covered by Powertrain
Warranty

Number of Miles Covered by Powertrain
Warranty

School District Name
(if applicable)

NCES ID
(if applicable)

State
(select from dropdown)

County
(select from dropdown)

Percentage of Time operated in County

Place of Performance:
City_2

Zip Code_3

School District Name
(if applicable)_2

NCES ID
(if applicable)_2

State
(select from dropdown)_2

County
(select from dropdown)_2

Percentage of Time operated in County_2

Place of Performance: City_2

Zip Code_2

Additional Counties where Vehicle Operates_3

Percentage of Time operated in each Additional
County_3

Is the vehicle/equipment equipped with
Telematics? (Yes/No/Not Sure)

If Yes, Telematics Primary Point of Contact
(name and email)

Can EPA or its partners contact me about
participating in research opportunities to provide
vehicle or infrastructure data that could inform
future transportation work?
(Yes/No)

Publicly or Privately Owned
(select from dropdown)

Does the vehicle serve a public function?

Is the vehicle subject to BABA?

Is the vehicle BABA Compliant?

Is a waiver being used to fulfill BABA compliance
for the vehicle?

If "Yes - Other EPA Waiver", explain

Type of Charger

If Level 2, is it ENERGY STAR certified

EVSE Manufacturer

EVSE Model

EVSE Manufacture Year

EVSE Maximum Output Power (kW)

Number of Plugs on EVSE

Is the EVSE Capable of Bidirectional Charging?

Will the Vehicle and EVSE be Used for Vehicle
to Grid (V2G)?

EVSE Number of Units

EVSE Equipment Cost only Per Unit

Are Federal funds being used to purchase EVSE equipment?

Are applicant funds being used to purchase EVSE equipment?

Are state funds being used to purchase EVSE equipment?

Are local funds being used to purchase EVSE equipment?

Are other funds being used to purchase EVSE equipment?

Is Program Income being used to purchase EVSE equipment?

Total EPA Funds Expended Per EVSE Unit

Total EPA Funds Expended for EVSE

Total Other Leveraged Funds Expended for EVSE

Date of EVSE Manufacture (mm/dd/yyyy)

Date of EVSE Installation (mm/dd/yyyy)

Date EVSE Operational (mm/dd/yyyy)

State

County

City

Zip Code

Street Address

Who owns the charger?

Anticipated user(s) of the charger.

If serving school districts, does the EVSE serve multiple school districts within this application?

Name of the School District(s) the EVSE will serve (use a colon between school districts)

NCES ID of School District that the EVSE will serve (use a colon between school districts)

Name of Charging Management Service Provider

Does the Infrastructure Equipment Cost Include Charging Management Service?

If charging management service is not included in cost, but is acquired, what is the cost and frequency of charges?

Total Funds Expended for EVSE Installation

Are Federal funds being used for EVSE Installation costs?

Are applicant funds being used for EVSE Installation Costs?

Are state funds being used for EVSE installation costs?

Are local funds being used for EVSE installation costs?

Are other funds being used for EVSE Installation costs?

Is Program Income being used for EVSE installation costs

Total EPA Funds Expended for EVSE Installation Costs

Total Other Leveraged Funds Expended for EVSE Installation Costs

Does the Infrastructure Equipment Cost Include Installation?

Description of Installation Work

Installation Work Performed By

Installation was conducted by an individual who meets the infrastructure electrician requirements as outlined in the program guidance?

Is this infrastructure BABA Compliant?

Is a waiver being used to fulfill BABA compliance for the Infrastructure Project

If 'yes -other EPA waiver' selected, explain

Total Federal Funds Expended Equipment and Installation

Total Other Leveraged Funds Equipment and Installation

EPA or its partners may contact me about participating in research opportunities to provide bus or EVSE data that could inform future transportation work.

If Yes, Telematics Primary Point of contact (Name and email)

Serial Number Unit 1 - 250

Type of energy generation

Manufacturer of On-site Power generation

Model of on-site power generation

Manufacture year of on-site power generation

Generation Capacity of the system

Equipment Cost only Per Power Generation System

Are Federal funds being used to purchase on-site power generation?

Are applicant funds being used to purchase on-site power generation?

Are state funds being used to purchase on-site power generation?

Are local funds being used to purchase on-site power generation?

Are other funds being used to purchase on-site power generation?

Is Program Income being used to purchase on-site power generation?

Total EPA funds expended per on-site power generation equipment

Total Other Leveraged Funds Expended for EVSE

Total Funds Expended cost Installation

Are federal funds being used for Installation costs?

Are applicant funds being used for EVSE Installation Costs?

Are state funds being used for EVSE installation costs?

Are local funds being used for EVSE installation costs?

Are other funds being used for EVSE Installation costs?

Is Program Income being used for EVSE installation costs

Total EPA Funds Expended for EVSE Installation Costs

Total Other Leveraged Funds Expended for EVSE Installation Costs

Date(s) On-Site Power Generation Equipment was Manufactured

Date the On-site Power Generation was Installation (mm/dd/yyyy)

Date the On-site Power Generation was Operational (mm/dd/yyyy)

State

County

City

Zip Code

Street Address

Who owns the equipment?

Anticipated user(s) of the on-site power generation infrastructure.

If serving school districts, does the system serve multiple school districts within this application?

Name of the School District(s) the system will serve (use a colon between school districts)

NCES ID of School District that the EVSE will serve (use a colon between school districts)

Is this infrastructure BABA Compliant?

Is a waiver being used to fulfill BABA compliance for the Infrastructure Project

If 'yes -other EPA waiver' selected, explain

Total Federal Funds Expended Equipment and Installation

Total Other Leveraged Funds Equipment and Installation

Type of Battery

Manufacturer of BESS

Model of BESS

Manufacture Year of BESS

Energy Capacity (*please indicate kWh or MWh*)

Equipment Cost *only* Per Unit:

Are Federal funds being used to purchase BESS equipment?
(Yes/No)

Are Applicant funds being used to purchase BESS equipment?
(Yes/No)

Are State funds being used to purchase BESS equipment?
(Yes/No)

Are Local funds being used to purchase BESS equipment?
(Yes/No)

Are Other funds being used to purchase BESS equipment?
(Yes/No)

Is Program Income being used to purchase BESS equipment?
(Yes/No)

Total EPA Funds Expended Per Unit

Total Other Leveraged Funds Expended Per Unit

Total Funds Expended Installation Cost

Are Federal funds being used for Installation Cost?
(Yes/No)

Are Applicant funds being used for Installation Cost?
(Yes/No)

Are State funds being used for Installation Cost?
(Yes/No)

Are Local funds being used for Installation Cost?
(Yes/No)

Are Other funds being used for Installation Cost?
(Yes/No)

Is Program Income being used for Installation Cost?
(Yes/No)

Total EPA Funds Expended Installation Cost:

Total Other Leveraged Funds Expended - Installation Cost

Date(s) BESS and related Equipment was Manufactured

Date of BESS Installation (mm/dd/yyyy)

Date BESS Operational (mm/dd/yyyy)

State

County

City

Zip Code

Street Address

Who owns the equipment?

Anticipated Users of BESS

If serving school districts, Name of the School District the BESS will serve

If serving school districts, NCES ID of School District that the BESS will serve

Is the BESS subject to BABA?
(Applies to infrastructure purchased with EPA Funds)

Is the BESS BABA Compliant?

Is a waiver being used to fulfill BABA compliance for the BESS?

If 'Yes - Other EPA Waiver' selected, explain

Total EPA Funds Expended - Equipment and Installation

Total Other Leveraged Funds Expended - Equipment and Installation

Type of Station
(Select from dropdown)

Type of Hydrogen Storage
(select from dropdown)

Refilling Pressure (select from dropdown)

Refilling Pressure: If Other, specify below

Total Hydrogen Storage Tank Capacity (kg)

Total Number of Dispensers

Maximum Dispensing Flow Rate per Hose (kg/min)

Total Dispensing Capacity of the Station (kg/min)

Total Number of Cooling Systems

Total Number of Compressors

Number of Storage Tanks

Number of Dispenser Pedestals

Number of Hoses per Pedestal

H2 Dispenser Pedestal Manufacturer

H2 Dispenser Pedestal Model

H2 Dispenser Pedestal Manufacture Year

H2 Compressor Manufacturer

H2 Compressor Model

H2 Compressor Manufacture Year

H2 Compressor Manufacturer

H2 Compressor Model

H2 Compressor Manufacture Year

H2 Cooling System Manufacturer

H2 Cooling System Model

H2 Cooling System Manufacture Year

Annual Total H2 Dispensed (kg)

Who owns the H2 Fueling Station?

State

(select from dropdown)

County

(select from dropdown)

City

Zip Code

Street Address

Description of H2 Fueling Station Installation
Work Performed

H2 Fueling Station Installation Performed by:

Date of H2 Fueling Station Installation

(mm/dd/yyyy)

Date H2 Fueling Station Operational

(mm/dd/yyyy)

H2 Fueling Infrastructure Equipment Cost

Does the H2 Fueling Infrastructure Equipment
cost include installation?

Are Federal funds being used to purchase H2
fueling infrastructure equipment?

Are applicant funds being used to purchase H2
Fueling infrastructure equipment?

Are state funds being used to purchase H2
Fueling infrastructure equipment?

Are local funds being used to purchase H2
Fueling infrastructure equipment?

Are other funds being used to purchase H2
Fueling infrastructure equipment?

Is Program Income being used to purchase H2
Fueling infrastructure equipment?

Total EPA Funds Expended for H2 Fueling
Infrastructure equipment.

Total Other Leveraged Funds Expended for H2
Fueling Infrastructure Equipment

Total Funds expended for H2 Fueling
Infrastructure Installation

Are Federal funds being used for H2 fueling
infrastructure installation costs?

Are Applicant funds being used for H2 fueling
infrastructure installation costs?

Are state funds being used for H2 fueling
infrastructure installation costs?

Are local funds being used for H2 fueling
infrastructure installation costs?

Are other funds being used for H2 fueling
infrastructure installation costs?

Is program income being used for H2 fueling
infrastructure installation costs?

Total EPA Funds Expended for H2 Fueling
Infrastructure installation.

Total Other Leveraged Funds Expended for H2
Fueling Infrastructure installation

Is the Hydrogen Fueling Infrastructure BABA
Compliant?

(select from dropdown)

Is a waiver being used to fulfill BABA
compliance for the H2 Fueling Infrastructure?
(select from dropdown)

If 'Yes-Other EPA waiver' selected, explain

Total EPA Funds Expended for H2 Fueling
Infrastructure equipment and installation.

Total Other Leveraged Funds Expended for H2
Fueling Infrastructure Equipment and Installation

**For more information on BABA compliance
please see the following link:**

a Fields: Please refer to the following data field dictionary for support in completing tabs 2, 9a, 9b and 10

Tab 2. Work Plan
School District Summary
Select yes if the school district listed on the 2024 CHDV Prioritized School District List.
If the school district self-certifies as Prioritized, indicate which of the three criteria the school district is using to self-certify.
Select yes if grantee's vehicles operate in a non-attainment or Maintenance area.
Tab 4. Financial Summary
Funding Information
Federal project award amount approved from final work plan.
Non-EPA funds that support the proposed project activities such as public private-partnerships, grants from other entities, or the issuance of school bounds.
Tab 9a. Current Fleet Description
Table 22. Current Vehicle Information
Basic Vehicle Information
For vocational vehicles sub-program only, select yes or no from dropdown menu based if the vehicle described in the row will be replaced by a single zero-emissions vehicle
Use the dropdown menu to identify which new vehicle will be used to replace the current vehicle in this project
Enter the name of the vehicle group to which this vehicle belongs
Enter the first and last name and email address of the individual or organization that owns the fleet.
Use the dropdown menu to select if the vehicle is publicly or privately owned.
Current Vehicle Information
Use the dropdown menu to select the vehicle type
Select the class size from the dropdown menu. Note, class size is based on the vehicle's GVWR.
Use the dropdown menu to select the vehicle vocation
Use the dropdown menu to select the vehicle sector.
Enter the VIN number for each vehicle.
Enter the manufacturer of the existing vehicle.
Enter the model of the existing vehicle.
Enter the model year of the existing vehicle.
Select the type of fuel that is currently being used (prior to upgrade).
Enter the Engine Family name of the existing Engine. NOTE: unregulated engines will not have an Engine Family Name. If unregulated, then enter "N/A."
Enter the gross vehicle weight rating (GVWR) of the existing vehicle.
Current Vehicle Activity Information
Enter the average number of vehicle miles traveled per year per vehicle in the past two years.
Enter the average number of hours the vehicle idles in the past two years.
Enter the existing vehicle's current odometer reading, in miles.
Enter the amount of fuel used in gallons/year in the last two years.
Enter the remaining life of baseline engine/vehicle in years at the time of the upgrade action.
Vehicle Disposition Process
Select a vehicle disposition option. Please see Section III.D of the Notice of Funding Opportunity for disposition requirements by existing bus model year.
If vehicle is sold or donated, enter the state in which the vehicle is expected to primarily operate in
If vehicle is sold or donated, enter the county in which the vehicle is expected to primarily operate in
Current Vehicle Place(s) of Performance
Enter the name of the school district in which the current bus in which the bus to be scrapped, sold, or donated has operated in primarily.
Enter the name of the National Center for Education Statistics (NCES) ID associated with the school district in which the current bus to be scrapped, sold, or donated has operated in primarily.
Select the two letter postal code for the state in which the bus to be scrapped, sold, or donated has primarily operated in.
Enter the county in which the bus to be scrapped, sold, or donated has primarily operated in.

Enter the percent of time the bus to be scrapped, sold, or donated has operated in each county.

Enter the city in which the bus to be scrapped, sold, or donated has primarily operated in.

Enter the zip code in which the bus to be scrapped, sold, or donated primarily operated in. If there is more than one, separate using a colon.

Enter the name of the school district in which the current bus in which the bus to be scrapped, sold, or donated has operated in secondarily.

Enter the name of the National Center for Education Statistics (NCES) ID associated with the school district in which the current bus to be scrapped, sold, or donated has operated in secondarily.

Select the two letter postal code for the state in which the bus to be scrapped, sold, or donated has secondarily operated in.

Enter the county in which the bus to be scrapped, sold, or donated has secondarily operated in.

Enter the percent of time the bus to be scrapped, sold, or donated has operated in each county.

Enter the city in which the bus to be scrapped, sold, or donated has secondarily operated in.

Enter the zip code in which the bus to be scrapped, sold, or donated secondarily operated in. If there is more than one, separate using a colon.

Enter in the additional counties in which the vehicle has operated in. If it has operated in multiple counties beyond those previously listed, record all and separate using a colon (e.g., Polk: Butler).

Enter in the additional time operated in each additional county. If it has operated in multiple counties beyond those previously listed, record all and separate using a colon (Polk - 80%: Butler 20%).

Tab 9b. New Fleet Description

Table 23. New Replacement Vehicle Information

Upgrade Vehicle Information

Enter the name of the vehicle group to which this vehicle belongs

Enter the year the upgrade happened.

Enter the first and last name and email address of the individual or organization that owns the fleet.

Select the class size from the dropdown menu. Note, class size is based on the vehicle's GVWR.

Enter the vehicle identification numbers (VIN) of the new vehicle.

Enter the manufacturer of the new vehicle.

Enter the model of the new vehicle.

Enter the model year of the new vehicle.

Enter the engine family name of the new vehicle.

Select the fuel type of the new vehicle.

Enter the gross vehicle weight rating (GVWR) of the new vehicle.

Upgrade Cost

Enter the cost of vehicle in dollars per unit.

Enter the federal funds expended per vehicle in dollars per unit.

New Vehicle Activity Information

Enter the average number of vehicle miles traveled per year per new vehicle.

Select yes or no to specify whether the vehicle is equipped with an auxiliary heater.

If bus has an auxiliary heater, enter the type.

New Vehicle Battery Information (Battery Electric Vehicles only)

Select yes or no into the cell to specify whether the vehicle is capable of bidirectional charging.

For battery electric vehicles, enter the manufacturer of the battery pack

For battery electric vehicles, enter the number of battery packs

For battery electric vehicles, enter the battery capacity per battery pack

For battery electric vehicles, enter the vehicle's total battery capacity

For battery electric vehicles, enter the rated charging power in kW

For battery electric vehicles, enter the estimated range in miles

New Vehicle Fuel Cell Information (for Fuel Cell EVs only)

For hydrogen fuel cell electric vehicles, enter the manufacturer of the hydrogen fuel cell system

For hydrogen fuel cell electric vehicles, enter the hydrogen fuel cell stack capacity in kW

For hydrogen fuel cell electric vehicles, enter the hydrogen fuel tank capacity in kg

Warranty Information

Select yes or no into the cell to specify whether the vehicle battery or hydrogen fuel cell system warranty is included.

If the battery or fuel cell system includes a warranty, indicate the number of years the coverage is valid for

If the battery or fuel cell system includes a warranty, indicate the number of miles the coverage is valid for

Enter the total kWh of battery discharge

Select yes or no into the cell to specify whether a powertrain battery warranty is included.

If the powertrain includes a warranty, indicate the number of years the coverage is valid for

If the powertrain includes a warranty, indicate the number of miles the coverage is valid for

New Vehicle Place(s) of Performance

Enter the name of the school district in which the new vehicle will operate in primarily.

Enter the name of the National Center for Education Statistics (NCES) ID associated with the school district in which the current new vehicle has operated in primarily.

Select the two letter postal code for the state in which the new vehicle will primarily operate in.

Enter the county in which the new vehicle will primarily operate in.

Enter the percent of time the new vehicle has operated in each county.

Enter the city in which the new vehicle will primarily operate in.

Enter the zip code in which the new vehicle will primarily operate in. If there is more than one, separate using a colon.

Enter the name of the school district in which the current vehicle in which the new vehicle will operate in secondarily.

Enter the name of the National Center for Education Statistics (NCES) ID associated with the school district in which the current new vehicle will operate in secondarily.

Select the two letter postal code for the state in which the new vehicle will secondarily operate in

Enter the county in which the new vehicle will secondarily operate in

Enter the percent of time the new vehicle will operate in each county.

Enter the city in which the new vehicle will secondarily operated in.

Enter the zip code in which the new vehicle will secondarily operated in. If there is more than one, separate using a colon.

Enter in the additional counties in which the new vehicle is expected to operate in. If it will operate in multiple counties beyond those two previously listed, record all here and separate using a colon (e.g., Polk: Butler).

Enter in the additional time operated in each additional county. If it will operate in multiple counties beyond those two previously listed, record all and separate using a colon (Polk - 80%; Butler 20%).

Optional Participation in the Future of Transportation Research

Select yes or no into the cells it specify whether the vehicle is equipped with telematics.

Select yes or no.

Enter First and Last name and email address.

Vehicle Ownership and BABA Compliance

Use the dropdown menu to select if the vehicle is publicly or privately owned.

Use the dropdown menu to select if the vehicle serves a public function

Use the dropdown menu to select if the vehicle is subject to BABA

Use the dropdown menu to select if the vehicle is BABA Compliant

If a waiver is being used to meet BABA compliance requirements, select the waiver type

Enter which waiver is being used to meet BABA requirements.

Tab 10. Infrastructure

Table 24. Electric Vehicle Service Equipment Information

EVSE Equipment Information

Enter the type of charger, either Level 2 (AC charging up to 19.2 kW) or DC Fast Charging.

Confirm and select yes if applicable. Please see <https://www.energystar.gov/>

Enter the manufacturer of the charging equipment

Enter the model name of the charging equipment.

Enter the year the charging equipment was manufactured.

Enter the maximum power output of the charging equipment, measured in kilowatts.

Enter the number of plugs installed on each unit of the charging equipment.

Select yes or no into the cell to specify whether the charging equipment is capable of bidirectional charging.

Select yes or no into the cell to specify whether the buses and charging equipment will be used for vehicle-to-grid (V2G) services.

Enter the quantity of charging equipment unit

Enter the cost of the charging equipment per unit.

Enter yes or no for whether federal funds are being used to purchase EVSE equipment.

Enter yes or no for whether applicant funds are being used to purchase EVSE equipment.

Enter yes or no for whether state funds are being used to purchase EVSE equipment.

Enter yes or no for whether local funds are being used to purchase EVSE equipment.

Enter yes or no for whether other funds are being used to purchase EVSE equipment.

Enter yes or no for whether program income is being used to purchase EVSE equipment.

Enter the total EPA funds expended for charging equipment per unit.

No action - autopopulated

No action - autopopulated

Enter the date on which the EVSE was manufactured.

Enter the date on which the EVSE is permanently affixed.

Enter the date when the EVSE became operational.

Location of EV Infrastructure

Select the two letter postal code for the state in which the charging equipment will be located.

Select the county in which the charging equipment will be located.

Enter the city in which the charging equipment will be located.

Enter the zip code in which the charging equipment will be located.

Enter the street address in which the charging equipment will be located.

Enter the name of the school district or organization that owns the charging equipment.

Enter the types of users expected to utilize the charger.

Select yes, no, or "N/A" if not serving school districts.

Enter the name of the school district in which the EVSE will serve. If it will serve multiple school districts, list all and separate with a colon (e.g., Hampton School District: Edgewood School District).

Enter the name of the National Center for Education Statistics (NCES) ID associated with the school district in which the EVSE will serve. If it will serve multiple school districts, list all NCES IDs and separate with a colon (e.g., 1234567: 7654321).

Charging Management Service

Enter the name of the charging management service provider.

Please enter yes or no into the cell to specify whether the indicated cost of the charging equipment above includes any charging management expenses.

Please enter the cost of any charging management services and how frequently they are billed.

Infrastructure Installation Information, funding source, and BABA compliance

Enter the total installation costs for the EVSE.

Enter yes or no for whether federal funds are being used for EVSE installation.

Enter yes or no for whether applicant funds are being used for EVSE installation.

Enter yes or no for whether state funds are being used for EVSE Installation.

Enter yes or no for whether local funds are being used for EVSE Installation.

Enter yes or no for whether other funds are being used for EVSE Installation.

Enter yes or no for whether program income is being used for EVSE Installation.

Enter the total amount of EPA funds expended for EVSE installation costs.

No action - autopopulated

Please enter yes or no into the cell to specify whether the indicated cost of the charging equipment above includes any installation expenses.

Enter a description of the work performed to install the charging equipment, such as design and engineering, trenching, wiring and electrical upgrades, labor, and permitting.

Enter the name(s) of the organization(s) that performed the installation work described above.

Select electrician category

Select an option. EVSE manufactured on or after July 1, 2024 must be meet BABA requirements.

If a waiver is being used to meet BABA compliance requirements, select the waiver type

Enter which waiver is being used to meet BABA requirements.

EVSE Cost Summary

Automated cell that will calculate the total Federal Funds expended for the charging equipment and installation for an EV Infrastructure Group.

Automated cell that will calculate the total Leveraged Funds expended for the charging equipment and installation for an EV Infrastructure Group.

Optional Participation in the Future of Transportation Research

Enter yes or no if EPA may contact you regarding potential research opportunities.

Enter the name and email of the primary telematics POC.

EVSE Unit Serial Number (Applies to EVSE Units Purchased with EPA Funds)

Enter the Serial Number for each EVSE unit purchased with EPA Funds in columns BG- KV

Table 25. On-Site Power Generation Equipment Information

On-Site Power Generation Equipment Overview, Cost, and Installation

Select a type of energy generation, solar or wind.

Enter the manufacturer (s) of the system.

Enter the model name of the on-site generation system.

Enter the year the system was manufactured.

Enter the generation capacity of the system as either kW or MW. Please indicate unit of measurement.

Enter the equipment cost of the on-site power generation system.

Enter yes or no for whether federal funds are being used to purchase on-site power generation equipment.

Enter yes or no for whether applicant funds are being used to purchase on-site power generation equipment.

Enter yes or no for whether state funds are being used to purchase on-site power generation equipment.

Enter yes or no for whether local funds are being used to purchase on-site power generation equipment.

Enter yes or no for whether other funds are being used to purchase on-site power generation equipment.

Enter yes or no for whether program income is being used to purchase on-site power generation equipment.

Enter the total EPA funds expended for the on-site power generation equipment.

No action - autopopulated

Enter the total installation costs for the on-site power generation system.

EPA Form Number: 5900-683

Enter yes or no for whether federal funds are being used for on-site power generation installation.

Enter yes or no for whether applicant funds are being used for on-site power generation installation.

Enter yes or no for whether state funds are being used for on-site power generation Installation.

Enter yes or no for whether local funds are being used for on-site power generation Installation.

Enter yes or no for whether other funds are being used for on-site power generation Installation.

Enter yes or no for whether program income is being used for on-site power generation Installation.

Enter the total amount of EPA funds expended for on-site power generation installation costs.

No action - autopopulated

Enter the date the system was manufactured.

Enter the date the system was installed.

Enter the date the system became operational.

Location of On-site Power Generation Infrastructure

Select the two letter postal code for the state in which the on-site power generation will be located.

Select the county in which the on-site power generation will be located.

Enter the city in which the on-site power generation will be located.

Enter the zip code in which the on-site power generation will be located.

Enter the street address in which the on-site power generation will be located.

Ownership and Anticipated Users of On-Site Power Generation Infrastructure

Enter the name of the organization that owns the on-site power generation system.

Enter the types of users expected to utilize the system.

Select yes, no, or "N/A" if not serving school districts.

Enter the name of the school district in which the system will serve. If it will serve multiple school districts, list all and separate with a colon (e.g., Hampton School District: Edgewood School District).

Enter the name of the National Center for Education Statistics (NCES) ID associated with the school district in which the system will serve. If it will serve multiple school districts, list all NCES IDs and separate with a colon (e.g., 1234567: 7654321).

BABA Compliance

Select an option.

If a waiver is being used to meet BABA compliance requirements, select the waiver type

Enter which waiver is being used to meet BABA requirements.

Totals

Automated cell that will calculate the total Federal Funds expended for the on-site power generation system.

Automated cell that will calculate the total Leveraged Funds expended for the on-site power generation system.

Table 26. Battery Energy Storage System (BESS) Equipment Information

BESS Equipment Overview, Cost, and Installation

Select a type of battery from dropdown options.

Enter the manufacturer (s) of the system.

Enter the model name of the BESS.

Enter the year the system was manufactured.

Enter the generation capacity of the system as either kWh or MWh. Please indicate unit of measurement.

Enter the equipment cost of each BESS unit

Enter yes or no for whether federal funds are being used to purchase BESS equipment.

Enter yes or no for whether applicant funds are being used to purchase BESS equipment.

Enter yes or no for whether state funds are being used to purchase BESS equipment.

Enter yes or no for whether local funds are being used to purchase BESS equipment.

Enter yes or no for whether other funds are being used to purchase BESS equipment.

Enter yes or no for whether program income is being used to purchase BESS equipment.

Enter the total EPA funds expended for the BESS equipment.

No action - autopopulated

Enter the total installation costs for the BESS system.

Enter yes or no for whether federal funds are being used for BESS installation.

Enter yes or no for whether applicant funds are being used for BESS installation.

Enter yes or no for whether state funds are being used for BESS installation.

Enter yes or no for whether local funds are being used for BESS installation.

Enter yes or no for whether other funds are being used for BESS installation.

Enter yes or no for whether program income is being used for BESS installation.

Enter the total amount of EPA funds expended for BESS installation costs.

No action - autopopulated

Enter the date the system was manufactured.

Enter the date the system was installed.

Enter the date the system became operational.

Location of BESS Infrastructure

Select the two letter postal code for the state in which the BESS will be located.

Select the county in which the BESS will be located.

Enter the city in which the BESS will be located.

Enter the zip code in which the BESS will be located.

Enter the street address in which the BESS will be located.

Ownership and Anticipated Users of BESS Infrastructure

Enter the name of the organization that owns the BESS system.

Enter the types of users expected to utilize the system.

Enter the name of the school district in which the system will serve. If it will serve multiple school districts, list all and separate with a colon (e.g., Hampton School District: Edgewood School District).

Enter the name of the National Center for Education Statistics (NCES) ID associated with the school district in which the system will serve. If it will serve multiple school districts, list all NCES IDs and separate with a colon (e.g., 1234567: 7654321).

BABA Compliance for BESS Infrastructure

No action - autopopulated based on whether EPA funds reported for this infrastructure

Select from the dropdown menu how BABA compliance is met

If a waiver is being used to meet BABA compliance requirements, select the waiver type

Enter which waiver is being used to meet BABA requirements, if 'Other EPA Waiver' selected in the prior field

Totals for BESS Infrastructure

Automated cell that will calculate the total Federal Funds expended for the BESS system.

Automated cell that will calculate the total Leveraged Funds expended for the BESS system.

Table 27. Hydrogen Fueling Station Information

Hydrogen Fueling Station Information Overview

Select from the dropdown menu what type of hydrogen fueling station is installed under this project.

Select from the dropdown menu what type of hydrogen storage is installed under this project.

Select from the dropdown menu the refilling pressure level of supported by the hydrogen fueling equipment.

If you selected "Other" for the previous column, please enter the refilling pressure information.

Enter the capacity of the hydrogen storage tank in kilograms.

Enter the total number of dispenser hoses installed on the hydrogen fueling station.

Enter the maximum hydrogen dispensing flow rate per dispenser hose in kilograms per minute.

Enter the total capacity of hydrogen dispensing flow rate for the hydrogen fueling station in kilograms per minute.

Enter the total number of cooling systems installed on the hydrogen fueling station.

Enter the total number of compressors installed on the hydrogen fueling station.

Enter the total number of hydrogen storage tanks installed on the hydrogen fueling station.

Enter the total number of hydrogen dispenser pedestals installed on the hydrogen fueling station.

H2 Dispenser Pedestal Details

Enter then umber of dispenser hoses installed on each pedestal of the hydrogen fueling station.

Enter the manufacturer of the hydrogen dispensing pedestal equipment.

Enter the model name of the hydrogen dispensing pedestal equipment.

Enter the year the hydrogen dispensing pedestal equipment was manufactured.

H2 Storage Tank

Enter the manufacturer of the hydrogen storage tank.

Enter the model name of the hydrogen storage tank.

Enter the year the hydrogen storage tank was manufactured.

H2 Compressor

Enter the manufacturer of the compressor.

Enter the model name of the compressor.

Enter the year the compressor was manufactured.

H2 Cooling System (refrigeration and heat exchanger)

Enter the manufacturer of the compressor.

Enter the model name of the compressor.

Enter the year the compressor was manufactured.

Service Details

Enter the estimated amount of total annual hydrogen dispensed from the fueling station in kilograms.

Enter the name of the organization that owns the hydrogen fueling equipment.

Location of H2 Station

Select the two letter postal code for the state in which the hydrogen fueling station will be located.

Enter the county in which the hydrogen fueling station will be located.

Enter the city in which the hydrogen fueling station will be located.

Enter the zip code in which the hydrogen fueling station will be located.

Enter the street address in which the hydrogen fueling station will be located.

Installation Details

Describe the work done during installation, including all equipment that became part of the installed hydrogen fueling station.

List the name of the company (or companies) performing the installation of the hydrogen fueling station.

Enter the date (or date range) the hydrogen fueling station was installed.

Enter the date by which the hydrogen fueling station became fully operational.

Funding Details

Enter the cost of the H2 fueling infrastructure equipment, not including installation

Please enter yes or no into the cell to specify whether the indicated cost of the H2 fueling infrastructure equipment includes any installation expenses.

Enter yes or no for whether federal funds are being used to purchase H2 Fueling Infrastructure equipment.

Enter yes or no for whether applicant funds are being used to purchase H2 Fueling Infrastructure equipment.

Enter yes or no for whether state funds are being used to purchase H2 Fueling Infrastructure equipment.

Enter yes or no for whether local funds are being used to purchase H2 Fueling Infrastructure equipment.

Enter yes or no for whether other funds are being used to purchase H2 Fueling Infrastructure equipment.

Enter yes or no for whether program income is being used to purchase H2 Fueling Infrastructure equipment.

Enter the total amount of EPA funds being used for H2 fueling infrastructure equipment.

Automated cell that will calculate the total Leveraged Funds expended for the H2 Fueling infrastructure equipment.

Enter the cost of the H2 fueling infrastructure installation.

Enter yes or no for whether federal funds are being used to purchase H2 Fueling Infrastructure installation.

Enter yes or no for whether applicant funds are being used to purchase H2 Fueling Infrastructure installation.

Enter yes or no for whether state funds are being used to purchase H2 Fueling Infrastructure installation.

Enter yes or no for whether local funds are being used to purchase H2 Fueling Infrastructure installation.

Enter yes or no for whether other funds are being used to purchase H2 Fueling Infrastructure installation.

Enter yes or no for whether program income is being used to purchase H2 Fueling Infrastructure installation.

Enter the total amount of EPA funds being used for H2 fueling infrastructure installation.

Automated cell that will calculate the total Leveraged Funds expended for the H2 Fueling infrastructure installation.

H2 Fueling Infrastructure BABA Compliance

Select from the dropdown menu which parts of the hydrogen fueling infrastructure project are BABA compliant.

Select from the dropdown menu how BABA requirements are being met for the hydrogen fueling infrastructure project.

Enter which waiver is being used to meet BABA requirements.

H2 Fueling Infrastructure Cost Summary

Automated cell that will calculate the total EPA Funds expended for the H2 fueling infrastructure equipment and installation.

Automated cell that will calculate the total Leveraged Funds expended for the H2 fueling infrastructure equipment and installation.

[Build America, Buy America Act \(BABA\) Implementation Procedures for EPA Office of Transportation and Air Quality Federal Financial A:](#)

Progress	All Classes	Upgrade	Old Fuel
N/A	Class 6	Battery Electric	USLD (diesel)
Not Yet Started	Class 7	Fuel Cell EV	Biodiesel 5
In Progress			Biodiesel 20
Completed			CNG (ft3)
			CNG (lbs)
Yes			LNG
No			LPG/Propane
N/A			Gasoline
(Select Year)			
Year 1 Update			
Year 2 Update			
Year 3 Update			
Year 4 Update			
None			
N/A			
CHDV Grant FY2023			
CHDV Grant FY2024			
CHDV Grant FY2025			
CHDV Grant FY2026			
CHDV Grant FY2027			
CHDV Grant FY2028			
CHDV Grant FY2029			
CHDV Grant FY2030			



Quarterly	Biannually	Select Status
Please select reporting quarter.	Jan. to Jun. 2024	N/A
Oct. to Dec. 2023	Jul. to Dec. 2024	Not yet started
Jan. to Mar. 2024	Jan. to Jun. 2025	In-Progress
Apr. to Jun. 2024	Jul. to Dec. 2025	Completed
Jul. to Sep. 2024	Jan. to Jun. 2026	
Oct. to Dec. 2024	Jul. to Dec. 2026	Select Quarter
Jan. to Mar. 2025	Jan. to Jun. 2027	N/A
Apr. to Jun. 2025	Jul. to Dec. 2027	2023 - Q4 (Oct. to Dec.)
Jul. to Sep. 2025		2024 - Q1 (Jan. to Mar.)
Oct. to Dec. 2025		2024 - Q2 (Apr. to Jun.)
Jan. to Mar. 2026		2024 - Q3 (Jul. to Sep.)
Apr. to Jun. 2026		2024 - Q4 (Oct. to Dec.)
Jul. to Sep. 2026		2025 - Q1 (Jan. to Mar.)
Oct. to Dec. 2026		2025 - Q2 (Apr. to Jun.)
		2025 - Q3 (Jul. to Sep.)
		2025 - Q4 (Oct. to Dec.)
		2026 - Q1 (Jan. to Mar.)
		2026 - Q2 (Apr. to Jun.)
		2026 - Q3 (Jul. to Sep.)
		2026 - Q4 (Oct. to Dec.)

Commonwe:

State	Abbreviation	Applicant Self-Cert Status
Alaska	AK	Yes - Title I
Alabama	AL	Yes - Large SD with 80% Title I
Arkansas	AR	Yes - Large SD with sub-group of Title I
American Samoa	AS	Not Applicable
Arizona	AZ	
California	CA	
Colorado	CO	
Connecticut	CT	
District of Columbia	DC	
Delaware	DE	
Florida	FL	
Georgia	GA	
Guam	GU	
Hawaii	HI	
Iowa	IA	
Idaho	ID	
Illinois	IL	
Indiana	IN	
Kansas	KS	
Kentucky	KY	
Louisiana	LA	
Massachusetts	MA	
Maryland	MD	
Maine	ME	
Michigan	MI	
Minnesota	MN	
Missouri	MO	
North of the Northern Ma	MP	
Mississippi	MS	
Montana	MT	
North Carolina	NC	
North Dakota	ND	
Nebraska	NE	
New Hampshire	NH	
New Jersey	NJ	
New Mexico	NM	
Nevada	NV	
New York	NY	
Ohio	OH	
Oklahoma	OK	
Oregon	OR	
Pennsylvania	PA	
Puerto Rico	PR	
Rhode Island	RI	

South Carolina	SC
South Dakota	SD
Tennessee	TN
Texas	TX
Utah	UT
Virginia	VA
nited States Virgin Islands	VI
Vermont	VT
Washington	WA
Wisconsin	WI
West Virginia	WV
Wyoming	WY

Electrician Certification

Yes - Certification from EVITP

Yes - Certificate from a registered apprenticeship program

Infrastructure Waiver

No - Infrastructure meets all BABA requirements

Yes - EPA's De Minimis Waiver

Yes - EPA's Small Project Waiver

Yes - EPA's Pacific Island Territories General Applicability Waiver

Yes - Project-Level Waiver

Yes - Other EPA Waiver

Types of BESS

Lithium-Ion

Lead-Acid

Flow

Flywheels

Amendments	Vehicle Type (a.k.a Target Fleet)
(Select Amendment Type)	Target Fleet for CHDV NOFO
Number of Electric Vehicles	Cargo Trucks
Number of AC Level 2 Chargers	Emergency Vehicles
Number of DC Level 3 Chargers	Refuse Hauler
Federal Funds for Electric Vehicles	School Bus
Federal Funds for AC Level 2 Chargers	Septic Truck or Bucket Truck
Federal Funds for DC Level 3 Chargers	Shuttle Bus
Number of Hydrogen Vehicles	Step Van
Federal Funds for Hydrogen Vehicles	Straight/Box Truck
Federal Funds for Hydrogen Fueling Infrastructure	Street Sweeper
Number of Other Eligible Infrastructure Components	Transit Bus
Federal Funds for Other Eligible Infrastructure Components	Utility Vehicles
Other Activity in Approved Workplan	Other Vocational Vehicle

Initial Dropdown Options

Long Haul - Combination
 Long Haul - Single Unit
 Refuse Hauler
 School Bus
 Short Haul - Combination
 Short Haul - Single Unit
 Transit Bus

Vocation (type of work)	Sector (industry)	BABA Compliance
Delivery	Agriculture	Yes - This Infrastructure is BABA Compliant
Drayage	Airport	
Emergency	Construction	
Long Haul	Freight	No
Other	Industrial	
Refuse Hauler	Mining	
School Bus	Municipal	NA
Shuttle Bus	Port	
Transit Bus	Railyard	
Utility	School Bus	
	Transit	

Is this infrastructure BABA Complaint?

Yes - This infrastructure is BABA compliant

A waiver is being used to fulfill BABA compliance

BABA Vehicle Fields	Is this vehicle BABA Compliant
Yes	Yes - This vehicle is BABA compliant
Exempt: School Bus	N/A - This vehicle is exempt
Exempt: Emergency response vehicle	A waiver is being used to fulfill BABA compliance

Yes

Vehicle Waiver

No - Vehicle meets all BABA requirements

N/A - This vehicle is exempt

Yes - EPA's De Minimis Waiver

Yes - EPA's Small Project Waiver

- EPA's Pacific Island Territories General Applicability Wa

Yes - Project-Level Waiver

Yes - Other EPA Waiver

Funding Source for EVSE Equipment (Select all that apply)	New Vehicle ID	Type of Battery
Federal	New Vehicle 1	Lithium Nickel
Applicant	New Vehicle 2	Lithium Nickel
State	New Vehicle 3	(LCO)
Local	New Vehicle 4	(LMO)
Other	New Vehicle 5	Lithium Iron
Program Income	New Vehicle 6	Lithium Titanate
	New Vehicle 7	Nickel Metal Hydride
	New Vehicle 8	Nickel Cadmium
	New Vehicle 9	Lead Acid (Flooded)
	New Vehicle 10	Other
	New Vehicle 11	
	New Vehicle 12	
	New Vehicle 13	
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	New Vehicle 16	
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New Vehicle 250

Battery

Nickel Cobalt Aluminum (Li-NCA)

Nickel Manganese Cobalt (Li-NMC)

Lithium Phosphate (LFP)

Lanthanate oxide (LTO)

Nickel Hydride (NiMH)

Nickel Cadmium (NiCd)

Lead (Pb)