U. S. Environmental Protection Agency Diesel Emissions Reduction Act (DERA) Grant Program Project Reporting AND Final Reporting Template

Burden Statement for EPA Form: 5900-691

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Instructions

Per grant agreement terms and conditions, this reporting template should be submitted 1) quarterly (or biannually, depending on the grant's Terms and Conditions) throughout the project period of performance and 2) a Final Report (120-days after) the completion of the grant period. Information that is submitted on quarterly (or biannually, depending on the grant's Terms and Conditions) reports should NOT be changed in future quarterly (or biannually, depending on the grant's Terms and Conditions) report submissions unless approved by EPA. Please only update information for the specific quarter (or biannual, depending on the grant's Terms and Conditions) 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 orange are simply for informative purposes and/or automated from other tabs in this spreadsheet. Please complete tabs in this workbook according to the instructions below.

Note: This workbook uses a variety of conditional formatting, data validations, and cell protections. The protections are not locked with a password.

Excel Workbook <u>Tab</u>	<u>Definition</u>
1. Instructions	Basic instructions for all worksheets in this reporting workbook.
2. Financial Summary	Financial summary for the entire grant period of performance. Please only complete shaded cells highlighted blue with a diagonal pattern (///) that contain grantee and original project budget information. Other cells on this worksheet will automatically feed from information in tabs 3-7 (Year 1-Year 5). If a modification to the grant is approved, please update the financial tabs accordingly.
3. Year 1	Financial summary for the first year of the project period. For each quarterly (or biannually, depending on the grant's Terms and Conditions) report, please complete all financial and narrative descriptive cells highlighted blue with a diagonal pattern (///) for each quarter (or biannual, depending on the grant's Terms and Conditions) the report is submitted. Other cells in this worksheet are informative or may be automated from subsequent tabs. Below the financial information, please ensure to complete the programmatic questions regarding the grant. Note: VW Mitigation Funds should only be used as a voluntary cost share for the State program. Also, some Tribal and territory grantees may be exempt from the mandatory cost share.
4. Year 2	Financial summary for the second year of the project period. For each quarterly (or biannually, depending on the grant's Terms and Conditions) report, please complete all financial and narrative descriptive cells highlighted blue with a diagonal pattern (///) for each quarter (or biannual, depending on the grant's Terms and Conditions) the report is submitted. Other cells in this worksheet are informative or may be automated from subsequent tabs. Below the financial information, please ensure to complete the programmatic questions regarding the grant. Note: VW Mitigation Funds should only be used as a voluntary cost share for the State program. Also, some Tribal and territory grantees may be exempt from the mandatory cost share.
5. Year 3	Financial summary for the third year of the project period. For each quarterly (or biannually, depending on the grant's Terms and Conditions) report, please complete all financial and narrative descriptive cells highlighted blue with a diagonal pattern (///) for each quarter (or biannual, depending on the grant's Terms and Conditions) the report is submitted. Other cells in this worksheet are informative or may be automated from subsequent tabs. Below the financial information, please ensure to complete the programmatic questions regarding the grant. Note: VW Mitigation Funds should only be used as a voluntary cost share for the State program. Also, some Tribal and territory grantees may be exempt from the mandatory cost share.

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6. Year 4	Financial summary for the fourth year of the project period. For each quarterly (or biannually, depending on the grant's Terms and Conditions) report, please complete all financial and narrative descriptive cells highlighted blue with a diagonal pattern (///) for each quarter (or biannual, depending on the grant's Terms and Conditions) the report is submitted. Other cells in this worksheet are informative or may be automated from subsequent tabs. Below the financial information, please ensure to complete the programmatic questions regarding the grant. Note: VW Mitigation Funds should only be used as a voluntary cost share for the State program. Also, some Tribal and territory grantees may be exempt from the mandatory cost share.
7. Year 5	Financial summary for the fifth year of the project period. For each quarterly (or biannually, depending on the grant's Terms and Conditions) report, please complete all financial and narrative descriptive cells highlighted blue with a diagonal pattern (///) for each quarter (or biannual, depending on the grant's Terms and Conditions) the report is submitted. Other cells in this worksheet are informative or may be automated from subsequent tabs. Below the financial information, please ensure to complete the programmatic questions regarding the grant. Note: VW Mitigation Funds should only be used as a voluntary cost share for the State program. Also, some Tribal and territory grantees may be exempt from the mandatory cost share.
8. Amendments	The Amendments tab should be used to update any changes in vehicle or equipment quantities, infrastructure quantities, or other activities, and their corresponding changes in to 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.
9. DERA Priorities	The tab should be completed based upon community engagement, sustainability, workforce development, climate impact resiliency, and/or leveraging of additional external funds commitments defined in the proposed workplan. Please complete this tab during regular interannual reporting, if the proposed workplan committed to ANY community engagement, 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 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, sustainability, workforce development, climate impact resiliency, and/or leveraging of additional external funds commitments completed during the project period.
10. Fleet Description	The tab should be completed based upon the final workplan fleet sheet submitted and approved by EPA. The Fleet Description should be updated in a set frequency based on the grant's Terms and Conditions with any revisions to vehicle and engine information. Please refer to additional information on field definitions in tab 13 (Data Dictionary).
11. Infrastructure	The tab should be completed based upon the final workplan infrastructure submitted and approved by EPA. The Infrastructure tab should be updated quarterly (or biannually, depending on the grant's Terms and Conditions) with any revisions to zero emission charging and/or fueling infrastructure information. Please refer to additional information on field definitions in tab 13 (Data Dictionary).
12. Final Report	Final project details including actual emission and programmatic results. Please only complete shaded cells highlighted blue with a diagonal pattern (///). Emissions results should be copy and pasted from DEQ results.
13. Data Dictionary	Please refer to the dictionary on this tab for support in completing the Fleet Description (tab 10) and Infrastructure Description (tab 11).

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U. S. Environmental Protection Agency Diesel Emissions Reduction Act (DERA) Grant Program

Financial Summary - Project Lifetime

Grant Recipient	
Project Period of Performance	
Grant Number	
Project Title	
DERA Program	

DERA Grant Fiscal Summary TOTAL Year #1 + Year #2									
EPA Project Award Amount Total	-								
Total Cost Share Amount	-								
Total Project Costs (EPA + Cost Share)	-								
EPA Funds Expended to Date	-								
EPA Funds Remaining	\$ -								

DERA Grant Fiscal S	ummary Year #
Program Fiscal Year	
EPA Project Award Amount Year #1	
Total Cost Share Amount	
Total Voluntary Cost Share	!
Total Mandatory Cost Share Amou	ınt 🕴
Total Project Costs (EPA + Cost Share)	

DERA Grant Fiscal	l Summary Year #2 (If ap
Program Fiscal Year	
EPA Project Award Amount Year #2	-
Total Cost Share Amount	
Total Voluntary Cost Shar	re
Total Mandatory Cost Sha	are Amount
Total Project Costs (EPA + Cost Share)	

Table 1. Summary Rate of Expenditure Record project budget funds ONLY from approved final workplan. All other numbers will reflect automatically from su

		1	Total Project Budge	t		Total Expenses to Date					
Financial Summary			Voluntary Co					Voluntary Co			
	EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost	EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost	
Personnel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Fringe Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Contractual	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Subawards	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	

2. Financial Summary EPA Form Number: 5900-691

Participant Support Costs (e.g., Rebates)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Direct Cost Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Indirect Charges	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

EPA Budget Details by Fiscal Year

			Voluntary Co	st Share				Voluntary Co	ost Share		
Financial Summary	EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost	EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost	
Personnel					\$ -					\$ -	
Fringe Benefits					\$ -					\$ -	
Travel					\$ -					\$ -	
Equipment					\$ -					\$ -	
Supplies					\$ -					\$ -	
Contractual					\$ -					\$ -	
Subawards					\$ -					\$ -	
Participant Support Costs (e.g., Rebates)					\$ -					\$ -	
Other					\$ -					\$ -	
Direct Cost Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Indirect Charges					\$ -		\$ -	\$ -	\$ -	\$ -	
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	

Table 2. Annual Rate of Expenditure

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

					<u> </u>			-	<u> </u>			
			Year 1			Year 2						
			Voluntary Co	Voluntary Cost Share				Voluntary Co	ost Share			
Financial Summary	EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost	EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost		
Personnel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Fringe Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Contractual	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Subawards	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Participant Support Costs (e.g., Rebates)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Direct Cost Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Indirect Charges	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		

	Year 4 Year 5										
			Voluntary Cost Share					Voluntary Co	ost Share		
Financial Summary	EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost	EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost	
Personnel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Fringe Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Contractual	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Subawards	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Participant Support Costs (e.g., Rebates)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Direct Cost Total	\$ -	\$ -	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	

Indirect Charges	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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	Remaining Balance									
		Voluntary C								
EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost						
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	Total Project Budget								
		Voluntary C							
EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost					
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Year 3								
		Voluntary C	ost Share					
EPA Funds	Mandatory Cost Share	VW Mitigation Funds (State program ONLY)	Other Funds	Total Project Cost				
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U. S. Environmental Protection Agency Diesel Emissions Reduction Act (DERA) Grant Program

Financial and Narrative Summary - Year 1

Note: *Feilds that contain the symbol (*) are dependant of Grants Terms and Conditions.

Grant Recipient	
Grant Number	
Project Title	

Total EPA Funds Expended: Year 1	\$ -
*Reporting Cadence	Quarterly
Project Reporting Period	

Table 3. Year 1 Annu

Record and update project expenses at each interval according to the reporting cadence determined by your Project Officer. Previous fields should remain and edits should be made to the w

	Quarter 1					Quarter 2					
Enter Dates for this Reporting Period		Please select reporting quarter.					Please select reporting quarter.				
	EPA Funds		Voluntary Cost Share Reporting Pe	Expended this eriod		EPA Funds	Mandatory Cost Share	Voluntary Cost Share Reporting Pe	Expended this eriod		
Expended th	Reporting	eporting Expended this	VW Mitigation Funds (State program only)	Other Funds	cost to bate Reportin	Expended this Reporting Period	Period Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date	
Personnel					\$ -					\$	-
Fringe Benefits					\$ -					\$	-
Travel					\$ -					\$	-
Equipment					\$ -					\$	-
Supplies					\$ -					\$	-
Contractual					\$ -					\$	-
Subawards					\$ -					\$	-
Participant Support Costs (e.g., Rebates)					\$ -					\$	-
Other					\$ -					\$	-
Direct Cost Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-
Indirect Charges					\$ -					\$	-
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-

Table 4. 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 occurred, please provide that information according Completed. Please indicate the fiscal year of DERA grant funds used for the activity described within the table.

scal Year	Activities	Anticipated Outcomes
		•

Please provide programmatic and narrative financial updates on the project. As reports are submitted, indicate updates or changes for each report. For each report, please indicate if there we cell.

Question	Quarter 1 Update	Quarter 2 Update	
Provide a comparison of accomplishments with the anticipated outputs/outcomes and timelines /milestones specified in the project Work Plan. Please include financial, technical, and programmatic.			
Have any vehicles in this project changed from the last quarter? (i.e. vehicles added to the Fleet Description or taken off the Fleet Description)			
Did you award any rebates or subawards during the reporting period? If so, list the recipients and how much funding they received.			
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?			
If any cost-share or additional leveraged funds are reported for this Reporting Period in Table 3 above, identify the source of the funds.			
Have there been any major personnel changes during this reporting period?			

Did any public relations events regarding this grant take place during the reporting period?		
Are you using websites or other tools used to relay information about this grant to the public?		
What project activities are planned for the next reporting period?		
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.		
(State program only)What is the URL for the state website listing the total number and dollar amount of subawards, rebates, or loans provided, as well as a breakdown of the technologies funded? Please also list any other state websites used for outreach related to the State DERA Grant Program.		
Do you have any other comments or feedback?		

Subaward Reporting Requirements

Please provide subaward updates on the project. As reports are submitted, indicate updates or changes for each quarter. For each report, please indicate if there was a change from the prev

Question	Quarter 1 Update	Quarter 2 Update	
Summaries of results of reviews of financial and programmatic reports.			
Summaries of findings from site visits and/or desk reviews to ensure effective subrecipient performance.			
Environmental results the subrecipient achieved			
Summaries of audit findings and related pass- through entity management decisions			
Actions the pass-through entity has taken to correct deficiencies such as those specified at 2 CFR 200.332, 2 CFR 200.208 and the 2 CFR 200.339 Remedies for Noncompliance			

al Rate of Expenditure

henever interannual reports are submitted. Note the table will update based upon the Reporting Cadence field, selected above.

	Quarter 3				Quarter 4						
	Please select	reporting quarter.				Please	select reporting q	uarter.			
FPA Funds Fynended	Mandatory Cost Share	Voluntary Cost Sha this Reporting	are Expended g Period		EPA Funds	Mandatory Cost	Voluntary Cost Sh Reportir	are Expended this ng Period			
this Reporting Period	Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date	Share Expen	Expended this this Rep	Expended this	Share Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date
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'y. In the 'Progress to Date' column, please use the dropdown to indicate if the activity is 1) Not yet started, 2) In progress, or 3)

	Progress to [Date		Progress Notes
Q1	Q2	Q3	Q4	Write below, as appropriate.

as a change from the previous quarter. If yes, please provide an explanation in the subsequent

Quarter 3 Update	Quarter 4 Update

Nuartor 2 Undato	Quarter 4 Update
Quarter 3 Update	Quarter 4 Opdate

U. S. Environmental Protection Agency Diesel Emissions Reduction Act (DERA) Grant Program

Financial and Narrative Summary - Year 2

Note: *Feilds that contain the symbol (*) are dependant of Grants Terms and Conditions.

Grant Recipient	
Grant Number	
Project Title	

Total EPA Funds Expended: Year 1	\$ -
*Reporting Cadence	Quarterly
Project Reporting Period	

Table 5. Year 2 Annua

Record and update project expenses at each interval according to the reporting cadence determined by your Project Officer. Previous fields should remain and edits should be made to the w

	Quarter 1						Quarter 2				
Enter Dates for this Reporting Period	Please select reporting quarter.				Please select reporting quarter.						
	EPA Funds Mandatory Cost Share		Voluntary Cost Share I Reporting Pe	Expended this priod		EPA Funds	Mandatory Cost Share	Voluntary Cost Share Reporting Pe	Expended this eriod		
	Expended this Reporting Period	Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date	Expended this Reporting Period	Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Proje Cost To Da	
Personnel					\$ -					\$	-
Fringe Benefits					\$ -					\$	-
Travel					\$ -					\$	-
Equipment					\$ -					\$	-
Supplies					\$ -					\$	-
Contractual					\$ -					\$	-
Subawards					\$ -					\$	-
Participant Support Costs (e.g., Rebates)					\$ -					\$	-
Other					\$ -					\$	-
Direct Cost Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-
Indirect Charges					\$ -					\$	-
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-

Table 6. 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 occurred, please provide that information according Completed. Please indicate the fiscal year of DERA grant funds used for the activity described within the table.

Fiscal Year	Activities	Anticipated Outcomes

Please provide programmatic and narrative financial updates on the project. As reports are submitted, indicate updates or changes for each report. For each report, please indicate if there we cell.

Question	Quarter 1 Update	Quarter 2 Update	
Provide a comparison of accomplishments with the anticipated outputs/outcomes and timelines /milestones specified in the project Work Plan. Please include financial, technical, and programmatic.			
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Do you have any other comments or feedback?		

Subaward Reporting Requirements

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Summaries of results of reviews of financial and programmatic reports.			
Summaries of findings from site visits and/or desk reviews to ensure effective subrecipient performance.			
Environmental results the subrecipient achieved			
Summaries of audit findings and related pass- through entity management decisions			
Actions the pass-through entity has taken to correct deficiencies such as those specified at 2 CFR 200.332, 2 CFR 200.208 and the 2 CFR 200.339 Remedies for Noncompliance			

al Rate of Expenditure

henever interannual reports are submitted. Note the table will update based upon the Reporting Cadence field, selected above.

		Quarter 3					Quarter 4			
		t reporting quarter.				Please	select reporting q	uarter.		
	Mandatory Cost	Voluntary Cost Sha this Reporting	ost Share Expended eporting Period		. EPA Funds	Mandatory Cost	Voluntary Cost Share Expended this Reporting Period			
EPA Funds Expended this Reporting Period	Share Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date	Expended this Reporting Period	Share Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date	
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\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
				\$ -					\$ -	
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	

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'y. In the 'Progress to Date' column, please use the dropdown to indicate if the activity is 1) Not yet started, 2) In progress, or 3)

	Progress to	Date		Progress Notes
Q1	Q2	Q3	Q4	Write below, as appropriate.

as a change from the previous quarter. If yes, please provide an explanation in the subsequent

Quarter 3 Update	Quarter 4 Update

eport. If yes, please provide an expla	nation in the subsequent cell.			
Quarter 3 Update Quarter 4 Update				

U. S. Environmental Protection Agency Diesel Emissions Reduction Act (DERA) Grant Program

Financial and Narrative Summary - Year 3

Note: *Feilds that contain the symbol (*) are dependant of Grants Terms and Conditions.

Grant Recipient	
Grant Number	
Project Title	

Total EPA Funds Expended: Year 1	\$ -
*Reporting Cadence	Quarterly
Project Reporting Period	

Table 7. Year 3 Annual I

Record and update project expenses at each interval according to the reporting cadence determined by your Project Officer. Previous fields should remain and edits should be made to the w

	Quarter 1						Quarter 2				
Enter Dates for this Reporting Period	Please select reporting quarter.					Please select reporting quarter.					
	EPA Funds Mandato		Voluntary Cost Share I Reporting Pe	Expended this eriod		EPA Funds	Mandatory Cost Share	Voluntary Cost Share Reporting Pe	Expended this eriod		
	Expended this Reporting Period	Cost Share Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date	Expended this Reporting Period	Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Proj Cost To Da	
Personnel					\$ -					\$	-
Fringe Benefits					\$ -					\$	-
Travel					\$ -					\$	-
Equipment					\$ -					\$	-
Supplies					\$ -					\$	-
Contractual					\$ -					\$	-
Subawards					\$ -					\$	-
Participant Support Costs (e.g., Rebates)					\$ -					\$	-
Other					\$ -					\$	-
Direct Cost Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-
Indirect Charges					\$ -					\$	-
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-

Table 8. 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 occurred, please provide that information accordingl Completed. Please indicate the fiscal year of DERA grant funds used for the activity described within the table.

Fiscal Year	Activities	Anticipated Outcomes

Please provide programmatic and narrative financial updates on the project. As reports are submitted, indicate updates or changes for each report. For each report, please indicate if there we subsequent cell.

Question	Quarter 1 Update	Quarter 2 Update	
Provide a comparison of accomplishments with the anticipated outputs/outcomes and timelines /milestones specified in the project Work Plan. Please include financial, technical, and programmatic.			
Have any vehicles in this project changed from the last quarter? (i.e. vehicles added to the Fleet Description or taken off the Fleet Description)			
Did you award any rebates or subawards during the reporting period? If so, list the recipients and how much funding they received.			
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?			
If any cost-share or additional leveraged funds are reported for this Reporting Period in Table 3 above, identify the source of the funds.			
Have there been any major personnel changes during this reporting period?			

Did any public relations events regarding this grant take place during the reporting period?		
Are you using websites or other tools used to relay information about this grant to the public?		
What project activities are planned for the next reporting period?		
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.		
(State program only)What is the URL for the state website listing the total number and dollar amount of subawards, rebates, or loans provided, as well as a breakdown of the technologies funded? Please also list any other state websites used for outreach related to the State DERA Grant Program.		
Do you have any other comments or feedback?		

Subaward Reporting Requirements

Please provide subaward updates on the project. As reports are submitted, indicate updates or changes for each quarter. For each report, please indicate if there was a change from the prev

Question	Quarter 1 Update	Quarter 2 Update	
Summaries of results of reviews of financial and programmatic reports.			
Summaries of findings from site visits and/or desk reviews to ensure effective subrecipient performance.			
Environmental results the subrecipient achieved			
Summaries of audit findings and related pass- through entity management decisions			
Actions the pass-through entity has taken to correct deficiencies such as those specified at 2 CFR 200.332, 2 CFR 200.208 and the 2 CFR 200.339 Remedies for Noncompliance			

Rate of Expenditure

henever interannual reports are submitted. Note the table will update based upon the Reporting Cadence field, selected above.

	Quarter 3				Quarter 4					
	Please select reporting quarter.				Please select reporting quarter.					
	Share Expended Iotal Project Ex	Mandatory Cost	Voluntary Cost Sha this Reporting	are Expended g Period		EPA Funds	Mandatory Cost	Voluntary Cost Sh Reportin	are Expended this g Period	
EPA Funds Expended this Reporting Period		Figure 1 Share Expended	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date					
				\$ -					\$ -	
				\$ -					\$ -	
				\$ -					\$ -	
				\$ -					\$ -	
				\$ -					\$ -	
				\$ -					\$ -	
				\$ -					\$ -	
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				\$ -					\$ -	
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
				\$ -					\$ -	
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	

ly. In the 'Progress to Date' column, please use the dropdown to indicate if the activity is 1) Not yet started, 2) In progress, or 3)

	Progress	to Date		Progress Notes
Q1	Q2	Q3	Q4	Write below, as appropriate.

as a change from	the previous	auarter. If ves	. please provide	an explanation in the
do di citatti de fi citi	cite provious	90011 0011 11 700	, produce provide	on oxpioniorion in the

Quarter 3 Update	Quarter 4 Update

ious report. If yes, please provide an explanation in the subsequent cell.						
Quarter 3 Update Quarter 4 Update						

U. S. Environmental Protection Agency Diesel Emissions Reduction Act (DERA) Grant Program

Financial and Narrative Summary - Year 4

Note: *Fields that contain the symbol (*) are dependant of Grants Terms and Conditions.

Grant Recipient	
Grant Number	
Project Title	

Total EPA Funds Expended: Year 1	\$ -
*Reporting Cadence	Quarterly
Project Reporting Period	

Table 9. Year 4 Annual Rate

Record and update project expenses at each interval according to the reporting cadence determined by your Project Officer. Previous fields should remain and edits should be made to the w

	Quarter 1						Quarter 2				
Enter Dates for this Reporting Period	Please select reporting quarter.					Please select reporting quarter.					
	EPA Funds Cost Share		Voluntary Cost Share Expended this Reporting Period			EPA Funds	Mandatory Cost Share	Voluntary Cost Share I Reporting Pe			
	Reporting Reportir	Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date	Expended this Reporting Period	Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date	
Personnel					\$ -					\$	-
Fringe Benefits					\$ -					\$	-
Travel					\$ -					\$	-
Equipment					\$ -					\$	-
Supplies					\$ -					\$	-
Contractual					\$ -					\$	-
Subawards					\$ -					\$	-
Participant Support Costs (e.g., Rebates)					\$ -					\$	-
Other					\$ -					\$	-
Direct Cost Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-
Indirect Charges					\$ -					\$	-
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-

Table 10. 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 occurred, please provide that information accordingle progress, or 3) Completed. Please indicate the fiscal year of DERA grant funds used for the activity described within the table.

Fiscal Year	Activities	Anticipated Outcomes

Please provide programmatic and narrative financial updates on the project. As reports are submitted, indicate updates or changes for each report. For each report, please indicate if there we subsequent cell.

Question	Quarter 1 Update	Quarter 2 Update	
Provide a comparison of accomplishments with the anticipated outputs/outcomes and timelines /milestones specified in the project Work Plan. Please include financial, technical, and programmatic.			
Have any vehicles in this project changed from the last quarter? (i.e. vehicles added to the Fleet Description or taken off the Fleet Description)			
Did you award any rebates or subawards during the reporting period? If so, list the recipients and how much funding they received.			
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?			
If any cost-share or additional leveraged funds are reported for this Reporting Period in Table 3 above, identify the source of the funds.			
Have there been any major personnel changes during this reporting period?			

Did any public relations events regarding this grant take place during the reporting period?		
Are you using websites or other tools used to relay information about this grant to the public?		
What project activities are planned for the next reporting period?		
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.		
(State program only)What is the URL for the state website listing the total number and dollar amount of subawards, rebates, or loans provided, as well as a breakdown of the technologies funded? Please also list any other state websites used for outreach related to the State DERA Grant Program.		
Do you have any other comments or feedback?		

Subaward Reporting Requirements

Please provide subaward updates on the project. As reports are submitted, indicate updates or changes for each quarter. For each report, please indicate if there was a change from the prev

Question	Quarter 1 Update	Quarter 2 Update	(
Summaries of results of reviews of financial and programmatic reports.				
Summaries of findings from site visits and/or desk reviews to ensure effective subrecipient performance.				
Environmental results the subrecipient achieved				
Summaries of audit findings and related pass- through entity management decisions				
Actions the pass-through entity has taken to correct deficiencies such as those specified at 2 CFR 200.332, 2 CFR 200.208 and the 2 CFR 200.339 Remedies for Noncompliance				

e of Expenditure

henever interannual reports are submitted. Note the table will update based upon the Reporting Cadence field, selected above.

Quarter 3			Quarter 4						
	Please	select reporting qua	arter.			Please	select reporting q	uarter.	
EPA Funds Mandatory		are Expended g Period		EPA Funds	Mandatory Cost	Voluntary Cost Share Expended this Reporting Period			
Expended this Reporting Period	Period Reporting VW Period Period	ended this porting VW Mitigation Cost To Date Expended this Reporting Period	Share Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date			
				\$ -					\$ -
				\$ -					\$ -
				\$ -					\$ -
				\$ -					\$ -
				\$ -					\$ -
				\$ -					\$ -
				\$ -					\$ -
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				\$ -					\$ -
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				\$ -					\$ -
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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y. In the 'Progress to Date' column, please use the dropdown to indicate if the activity is 1) Not yet started, 2) In

	Progress to Date			Progress Notes
Q1	Q2	Q3	Q4	Write below, as appropriate.

as a change from the previous quarter. If yes, please provide an explanation in the

Quarter 3 Update	Quarter 4 Update

	e an explanation in the subsequent cell.
arter 3 Update	Quarter 4 Update

U. S. Environmental Protection Agency Diesel Emissions Reduction Act (DERA) Grant Program

Financial and Narrative Summary - Year 5

Note: *Fields that contain the symbol (*) are dependant of Grants Terms and Conditions.

Grant Recipient	
Grant Number	
Project Title	

Total EPA Funds Expended: Year 1	\$ -
*Reporting Cadence	Quarterly
Project Reporting Period	

Table 11. Year 5 Annua

Record and update project expenses at each interval according to the reporting cadence determined by your Project Officer. Previous fields should remain and edits should be made to the w

		Quarter 1				Quarter 2					
Enter Dates for this Reporting Period	Please select reporting quarter.				Please select reporting quarter.						
	EPA Funds	Mandatory Cost Share	Voluntary Cost Share I Reporting Pe	Expended this eriod		EPA Funds	Mandatory Cost Share	Voluntary Cost Share Reporting Pe	Expended this eriod		
	Expended this Reporting Period	Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date	Expended this Reporting Period	Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Projec Cost To Dat	
Personnel					\$ -					\$	-
Fringe Benefits					\$ -					\$	-
Travel					\$ -					\$	-
Equipment					\$ -					\$	-
Supplies					\$ -					\$	-
Contractual					\$ -					\$	-
Subawards					\$ -					\$	-
Participant Support Costs (e.g., Rebates)					\$ -					\$	-
Other					\$ -					\$	-
Direct Cost Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-
Indirect Charges					\$ -					\$	-
TOTALS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-

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 occurred, please provide that information accordingl Completed. Please indicate the fiscal year of DERA grant funds used for the activity described within the table.

Fiscal Year	Activities	Anticipated Outcomes

Please provide programmatic and narrative financial updates on the project. As reports are submitted, indicate updates or changes for each report. For each report, please indicate if there we subsequent cell.

Question	Quarter 1 Update	Quarter 2 Update	
Provide a comparison of accomplishments with the anticipated outputs/outcomes and timelines /milestones specified in the project Work Plan. Please include financial, technical, and programmatic.			
Have any vehicles in this project changed from the last quarter? (i.e. vehicles added to the Fleet Description or taken off the Fleet Description)			
Did you award any rebates or subawards during the reporting period? If so, list the recipients and how much funding they received.			
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?			
If any cost-share or additional leveraged funds are reported for this Reporting Period in Table 3 above, identify the source of the funds.			
Have there been any major personnel changes during this reporting period?			

Did any public relations events regarding this grant take place during the reporting period?		
Are you using websites or other tools used to relay information about this grant to the public?		
What project activities are planned for the next reporting period?		
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.		
(State program only)What is the URL for the state website listing the total number and dollar amount of subawards, rebates, or loans provided, as well as a breakdown of the technologies funded? Please also list any other state websites used for outreach related to the State DERA Grant Program.		
Do you have any other comments or feedback?		

Subaward Reporting Requirements

Please provide subaward updates on the project. As reports are submitted, indicate updates or changes for each quarter. For each report, please indicate if there was a change from the prev

Question	Quarter 1 Update	Quarter 2 Update	
Summaries of results of reviews of financial and programmatic reports.			
Summaries of findings from site visits and/or desk reviews to ensure effective subrecipient performance.			
Environmental results the subrecipient achieved			
Summaries of audit findings and related pass- through entity management decisions			
Actions the pass-through entity has taken to correct deficiencies such as those specified at 2 CFR 200.332, 2 CFR 200.208 and the 2 CFR 200.339 Remedies for Noncompliance			

I Rate of Expenditure

henever interannual reports are submitted. Note the table will update based upon the Reporting Cadence field, selected above.

	Quarter 3 Quarter 4										
	Quality 3				Quarter 4						
Please select reporting quarter.				Please select reporting quarter.							
EPA Funds	Mandatory Cost	Voluntary Cost Sha this Reporting	Cost Share Expended eporting Period		EPA Funds	Mandatory Cost	Voluntary Cost Share Expended this Reporting Period				
	Share Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date	Expended this Reporting Period	Expended this	Experiueu triis	Share Expended this Reporting Period	VW Mitigation Funds (State program only)	Other Funds	Total Project Cost To Date
				\$ -					\$ -		
				\$ -					\$ -		
				\$ -					\$ -		
				\$ -					\$ -		
				\$ -					\$ -		
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				\$ -					\$ -		
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		

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y. In the 'Progress to Date' column, please use the dropdown to indicate if the activity is 1) Not yet started, 2) In progress, or 3)

	Progress to	Date		Progress Notes
Q1	Q2	Q3	Q4	Write below, as appropriate.

as a change from the previous quarter. If yes, please provide an explanation in the

Quarter 3 Update	Quarter 4 Update

report. If yes, please provide an exp	ianation in the subsequent cell.					
Quarter 3 Update Quarter 4 Update						

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U. S. Environmental Protection Agency Diesel Emissions Reduction Act (DERA) Grant Program Amendments

Instructions

Please use this tab to indicate any changes in planning activities, vehicle or equipment numbers, as well as numbers of infrastructure items, and/or funding amounts post-award. Use one row p

Were there any changes to planned activities, including vehicle or equipment numbers, number of infrastructure items, and/or funding amounts in Year 1 of the project period of performance? If yes, please indicate the change(s) using the table below.	(Y or N)
Were there any changes to planned activities, including vehicle or equipment numbers, number of infrastructure items, and/or funding amounts in <u>Year 2</u> of the project period of performance? If yes, please indicate the change(s) using the table below.	(Y or N)
Were there any changes to planned activities, including vehicle or equipment numbers, number of infrastructure items, and/or funding amounts in Year 3 of the project period of performance? If yes, please indicate the change(s) using the table below.	(Y or N)
Were there any changes to planned activities, including vehicle or equipment numbers, number of infrastructure items, and/or funding amounts in Year 4 of the project period of performance? If yes, please indicate the change(s) using the table below.	(Y or N)
Were there any changes to planned activities, including vehicle or equipment numbers, number of infrastructure items, and/or funding amounts in Year 5 of the project period of performance? If yes, please indicate the change(s) using the table below.	(Y or N)

	Table 13. Post-Award Amendments								
		Changes to Vehicle, Equipment, or Eligible Infrastructure Deployment							
	Update Year (select from dropdown)	Type of Amendment (Select from dropdown)	Original Vehicle, Equipment, or Eligible Infrastructure Type	Updated Vehicle, Equipment, or Eligible Infrastructure Type					
Ex 1	Year 1 Update	Changes to Vehicle or Equipment Deployment	Company A RTG Electric Crane v2000	Company A RTG Electric Crane v3000					
Ex 2	Year 1 Update	Changes to Other Planned Activities							
1									
2									
3	3								

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4		
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10		
11		
12		
13		
14		
15		

per amendment made. Fill out this tab at the end of each year of project performance.

	Number of Amendments By Year	Change in Funding Amount by Year
Project Year 1	0	\$ -
Project Year 2	0	\$ -
Project Year 3	0	\$ -
Project Year 4 (if applicable)	0	\$ -
Project Year 5 (if applicable)	0	\$ -

				- 1' 61	1	
		Other Changes	Corresponding I	Funding Changes		
Original Quantity of Vehicle, Equipment, or Eligible Infrastructure Type	Updated Quantity of Vehicle, Equipment, or Eligible Infrastructure Type	If other changes selected, describe	riginal Funding equest Amount	Updated Funding Request Amount		Change in Funding Amount
25	20		\$ 1,250,000	\$ 1,300,000	\$	(50,000)
		Decreased personnel funding required	\$ 15,000	\$ 12,000	\$	3,000
					\$	-
					\$	-
					\$	-

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

U. S. Environmental Protection Agency
Diesel Emissions Reduction Act (DERA) Grant Program
DFRA Priorities

Grant Recipient	
Program FY	
Grant Number	
Project Title	

Instructions

Please complete this tab if your organization committed to ANY community engagement, sustainability, workforce development, climate impact resiliency, or leveraging of additional external funds actions or commitments in your application, as referred to in the evaluation metrics defined in the NOFO or Program Guide. Only cells shaded in blue need to be filled out; cells shaded in yellow will automatically populate based on information entered in earlier tabs. If planned activities or commitments changed between the submitted application and approved workplan, please indicate on the first question below. Please use the drop downs for columns to indicate any updates that occurred during the reporting period indicating continued progress towards commitments. At the end of each of the sections below, there is a cell to provide additional narrative responses, as appropriate. For narrative responses, please include at least 1-2 sentences. Please take care to ensure all auestions are answered: the final auestion is on row 148 of this sheet.

Did any planned activities or commitments change between the submitted application and the approved workplan?

(Y or N)

If no, please jump to the next section, "Prioritized Communities and Withdrawn Participants." If yes, please provide context and details to the approved changes (example: the number of school buses was reduced due to partial funding).

			Table 14. Prioritize	ed Communities and With	drawn Participants			
	1. Did the workplan demonstrate tha Guide?	t the project will ben	efit nonattainment,	maintenance, and/or areas	s of air toxics concer	n as defined in the	NOFO or Program	(Y or N or N/A)
2. Did any of the beneficiaries from the workplan decide to no longer participate in the project? If yes, please use the rows below to indicate which withdrew their participation from the project, and if applicable, please note what beneficiary was chosen as a replacement. Note: Please add add needed.			(Y or N or N/A)					
	Withdrawn Beneficiary	Project location (State, County)	Nonattainment, Maintenance, or Area of Air Toxics Concern?	Date of Withdrawal	Brief Description of Reason for Withdrawal	Replacement Beneficiary (use "N/A" if beneficiary not	Project location (State, County)	Nonattainment, Maintenance, or Are of Air Toxics Concern?

EPA Form Number: 5900-691 9. DERA Priorities

(Y	Y or N or N/A)	Select Reporting Period		(Y or N or N/A)
(Y	Y or N or N/A)	Select Reporting Period		(Y or N or N/A)
(Y	Y or N or N/A)	Select Reporting Period		(Y or N or N/A)
(Y	Y or N or N/A)	Select Reporting Period		(Y or N or N/A)
(Y	Y or N or N/A)	Select Reporting Period		(Y or N or N/A)
(Y	Y or N or N/A)	Select Reporting Period		(Y or N or N/A)

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9. DERA Priorities
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L	Table 15. Community Engagement			
	Did the workplan demonstrate actions and/or commitments to engage communities? If no, please jump to the next section complete the rest of this section.	ı, "Project Sustainak	pility". If yes, please	(Y or N)
	1. How did the workplan demonstrate engagement with the communities identified above, especially local residents, to ensuplanning, and performance of the project?	ıre their meaningfu	l participation with r	espect to the design,
	Policy/Process to Engage Communities and Point of Contact	Application	Status Update	Reporting Period Completed
	1. 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 2.	(Y or N or N/A)		
	1.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)		
	1.b. To date, has the recipient and/or project partner(s) completed this commitment?		Select Status	Select Reporting Period
	2. Please provide any additional details and/or a status update to be provided for this category, including but not limited to t and policy or process; a description of the point of contact and policy or process; and any other relevant information. Please when the update was completed. Note: Do not delete data from prior quarterly reports. If providing updates for multiple qua	use the drop downs	s under 'Please Selec	t One to indicate
				Select Date
				Please Select One
				Please Select One
	3. Does the recipient have a publicly available baseline mobile source emission inventory for PM2.5 and/or NOx that was con	pleted after 2016?		(Y or N or N/A)
	3.a. If no, does the recipient commit to completing one before the end of the project period?			(Y or N or N/A)
	3.b. Please provide any additional details.		Į.	

9. DERA Priorities Page 68 of 211 EPA Form Number: 5900-691

	4. Does the recipient have a publicly available plan to reduce mobile source emissions that includes specific PM2.5 and/or NOx emission targets that was completed after 2017?	(Y or N or N/A)
	4.a. If no, will the recipient have a documented commitment to have a publicly available plan to reduce mobile source emissions that includes specific PM2.5 and/or NOx emission targets BEFORE the end of the project period?	(Y or N or N/A)
	4.b. Please provide any additional details.	
L		

9. DERA Priorities Page 69 of 211 EPA Form Number: 5900-691

_	Table 16. Project Sustainability			
	Table 10. Project Sustainability			
	d the workplan demonstrate actions and/or commitments to promote sustainable project results and benefits? If no, please velopment". If yes, please complete the rest of this section.			(Y OF N)
	1. How did the workplan demonstrate that project results and benefits will be sustainable and that the applicant and project reduce emissions from school buses after EPA funding for the project has ended?	t partners have the a	ability to promote a	nd continue efforts to
	A. Zero-Emission Projects For non-ZE projects, skip to part B.	Application	Status Update	Reporting Period Completed
	A1. 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 A2.	(Y or N or N/A)		
	A1.a. 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)		
	A1.b. To date, has the recipient and/or project partner(s) completed this commitment?		Select Status	Select Reporting Period
	A2. Please provide additional details and any relevant status updates for this section, including but not limited to describing and frequency of discussions with utilities, and any project decisions impacted by these discussions. Please use the drop down was completed. Note: Do not delete data from prior quarterly reports. If providing updates for multiple quarters in one year,	vns under 'Please Se	lect One' to indicate	e when the update
				Please Select One
				Please Select One
				Please Select One

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B. Non Zero-Emission Projects	Application	Status Update	Reporting Period Completed
B1. Did the workplan for this project demonstrate that the recipient and/or project partner(s) have existing idle reduction policies? Please include any narrative details in question B4.	(Y or N or N/A)		
B1.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)		
B1.b. To date, has the recipient and/or project partner(s) completed this commitment?		Select Status	Select Reporting Period
B2. Did the workplan for this project demonstrate that the recipient and/or project partner(s) have contract specifications requiring the use of cleaner, more efficient vehicles and equipment? <i>Please include any narrative details in question B4</i> .	(Y or N or N/A)		
B2.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)		
B2.b. To date, has the recipient and/or project partner(s) completed this commitment?		Select Status	Select Reporting Period
B3. Did the workplan for this project demonstrate that the recipient and/or project partner(s) have adopted other strategies to promote and continue efforts to reduce diesel emissions? If yes, please describe the other policies in more detail below. Please include any narrative details in question B4.	(Y or N or N/A)		
B3.a. If no, did the workplan for this project demonstrate that the recipient and/or project partner(s) commit to adopting one or more strategies before the end of the project period?	(Y or N or N/A)		
B3.b. To date, has the recipient and/or project partner(s) completed this commitment?		Select Status	Select Reporting Period
B4. Please provide additional details and any relevant status updates for this section, including but not limited to description any additional diesel emission reduction strategies, as well as any changes made to these throughout the project period. Pleat when the update was completed. Note: Do not delete data from prior quarterly reports. If providing updates for multiple quarterly reports.	ase use the drop do	wns under 'Please S	elect One' to indicate
			Please Select One

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	Please Select One
	Please Select One

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Table 17. Workforce Development							
Did the workplan demonstrate actions and/or commitments to promote workforce development? If no, please jump to the next section, "Project Resilience to Climate Impacts". If yes, please complete the rest of this section.							
1. How did the workplan demonstrate a plan to prepare the workforce for the project?							
		I	I				
	Application	Status Update	Reporting Period Completed				
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 buses 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?		Select Status	Select Reporting Period				
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? <i>Please include any narrative details in question 6</i> .	(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?		Select Status	Select Reporting Period				

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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- and near-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?		Select Status	Select Reporting Period

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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?		Select Status	Select Reporting Period
6. Please provide additional details and any relevant status updates for this section, including but not limited to details on treated taken to increase the availability of domestic manufacturing and workforce, and/or descriptions of any additional policies are any changes made to these throughout the project period. Please use the drop downs under 'Please Select One' to indicate from prior quarterly reports. If providing updates for multiple quarters in one year, please indicate all updates in the same contains the same contains the same contains and the same contains the same con	nd measures to prom when the update wa	note workforce deve	elopment, as well as
			Please Select One
			Please Select One
			Please Select One
Table 18. Project Resilience to Climate Impacts			
Tuble 10.110 jeet Resilience to enimate imputes			
oid the workplan demonstrate actions and/or commitments to promote project resilience to climate impacts? If no, please judditional External Funds". If yes, please complete the rest of this section.	iump to the next sect	ion, "Leveraging of	(Y or N)
1. How did the workplan demonstrate planning or action taken towards building project resilience and reducing vulnerabilities.	ies to climate impact	s?	
	Application	Status Update	Reporting Period Completed
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	(Y or N or N/A)		

5. Did the workplan for this project demonstrate that the recipient and/or project partner(s) have other measures and/or

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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?	(Y or N or N/A)		
2.b. To date, has the recipient and/or project partner(s) completed this commitment?		Select Status	Select Reporting Period
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?		Select Status	Select Reporting Period
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 cli impacted by these assessments, and/or descriptions of any additional policies and measures to promote project resilience to throughout the project period. Please use the drop downs under 'Please Select One' to indicate when the update was completed this commitment?	climate impacts, as	ments, descriptions well as any change	Period s of project decisions es made to these
4. Please provide additional details and any relevant status updates for this section, including but not limited to details on cli impacted by these assessments, and/or descriptions of any additional policies and measures to promote project resilience to throughout the project period. Please use the drop downs under 'Please Select One' to indicate when the update was complete.	climate impacts, as	ments, descriptions well as any change	Period s of project decisions es made to these
4. Please provide additional details and any relevant status updates for this section, including but not limited to details on cli impacted by these assessments, and/or descriptions of any additional policies and measures to promote project resilience to throughout the project period. Please use the drop downs under 'Please Select One' to indicate when the update was complete.	climate impacts, as	ments, descriptions well as any change	Period s of project decisions es made to these ior quarterly reports.
4. Please provide additional details and any relevant status updates for this section, including but not limited to details on cli impacted by these assessments, and/or descriptions of any additional policies and measures to promote project resilience to throughout the project period. Please use the drop downs under 'Please Select One' to indicate when the update was complete.	climate impacts, as	ments, descriptions well as any change	Period s of project decisions es made to these ior quarterly reports. Please Select One

Table 19. Leveraging of Additional External Funds Did the workplan demonstrate that the recipient has leveraged or plans to leverage additional external funds in order to support proposed project activities? If no, please jump to the next section. "Other". If yes, please complete the rest of this section. (Y or N)

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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?

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. Refer to the following definitions when selecting Status:

"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

Note: Please add additional rows as needed.

Source Name	Amount (\$)	Status	Reporting Period Awarded
		Please Select One	Select Reporting Period
		Please Select One	Select Reporting Period
		Please Select One	Select Reporting Period
		Please Select One	Select Reporting Period
		Please Select One	Select Reporting Period
		Please Select One	Select Reporting Period
		Please Select One	Select Reporting Period
		Please Select One	Select Reporting Period
		Please Select One	Select Reporting Period
		Please Select One	Select Reporting Period

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	Please Select One
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 when the update was completed. Note: Do not delete data from prior quarterly reports. If providing updates for multiple quarters in one year, please indicate all updates in the same cell.	(Y or N or N/A)

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U. S. Environmental Protection Agency Diesel Emissions Reduction Act (DERA) Grant Program **Fleet Description**

INSTRUCTIONS: This Fleet Description should detail all vehicles and engines impacted under the project. The fields below align with EPA's Diesel Emission Quantifier (DEQ), a requirement for the applications. Description is broken into two sections: 1) Current Vehicle and Engine Information and 2) New Vehicle and Engine Upgrade Information. All rows of data are required, unless specified as not being appli Dictionary) for additional guidance on each field.

Each vehicle/engine group column below can represent one or more similar pieces of equipment operating in the same fleet. You can copy and paste additional columns as needed to capture all vehicle Note: Individual marine vessels must be listed in separate vehicle/engine group columns. If both auxiliary and propulsion engines on an individual vessel are part of a project, these different engine type *Fields that contain the symbol (*) will not populate dropdown options until preceding field is selected.

Table 20. CURREN	IT VEHICLE AND EN	NGINE INFORMATIO	N						
Table 20a. Basic F	leet Information			Table 20b. Current Vehicle Information					
Vehicle	Group Name	Fleet Owner	Publicly or Privately Owned (select from dropdown)	Equipment Type (select from dropdown)	*Target Fleet (select from dropdown)	Vehicle Class (onroad vehicles, as defined in data dictionary)	Vehicle or Engine Group Sector	Vocation	Vehicle Identification Number (VIN) (Use Capital Letters)
Example Vehicle	Sample	Company A	Publicly Owned	Onroad	Transit Bus	Class 6	Municipal	Other	1234567891011
Vehicle 1									
Vehicle 2									
Vehicle 3									
Vehicle 4									
Vehicle 5									
Vehicle 6									
Vehicle 7									
Vehicle 8									
Vehicle 9									
Vehicle 10									
Vehicle 11									
Vehicle 12									
Vehicle 13									
Vehicle 14									
Vehicle 15									

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Vehicle 16					
Vehicle 17					
Vehicle 18					
Vehicle 19					
Vehicle 20					
Vehicle 21					
Vehicle 22					
Vehicle 23					
Vehicle 24					
Vehicle 25					
Vehicle 26					
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Vehicle 94 Vehicle 95 Vehicle 96					
Vehicle 97					
Vehicle 98					
Vehicle 99					
Vehicle 100					

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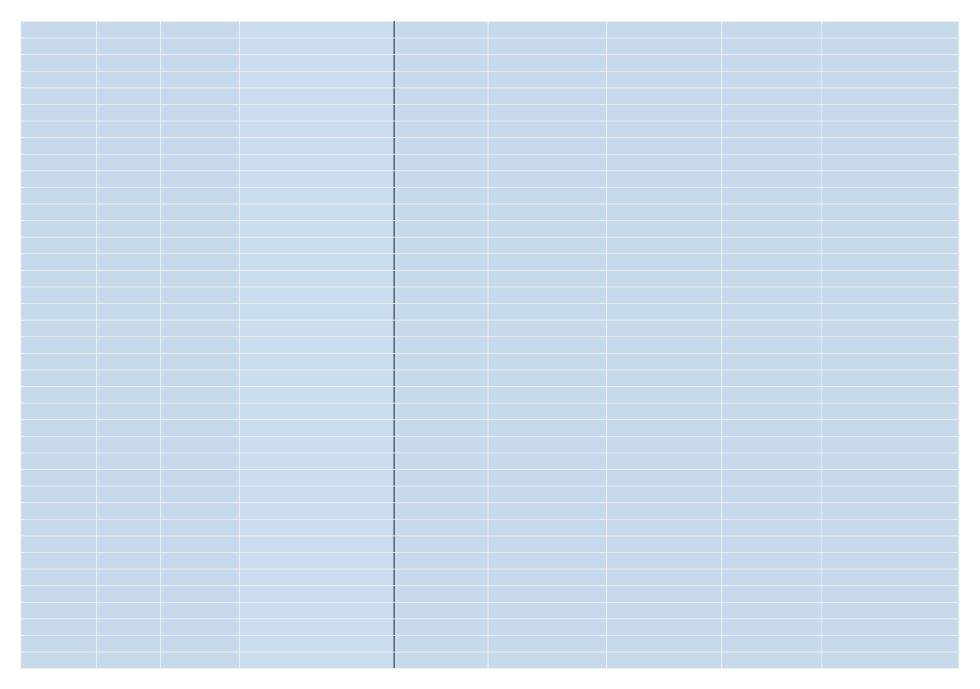
Grant Recipient	
Grant Number	
Project Title	

ation, workplan, and final reports as part of program grant requirements. The Fleet Description should be updated quarterly with all vehicle and engine upgrades completed. This Fleet cable to the Equipment Type or Target Fleet. These exceptions are highlighted in parentheses in the table below. Please refer to the Fleet Description data definitions on tab 12 (Data

e/engine groups. Please indicate in the Financial Information row the fiscal year of funds used for the activity described within the table. es must be listed in separate vehicle/engine group columns.

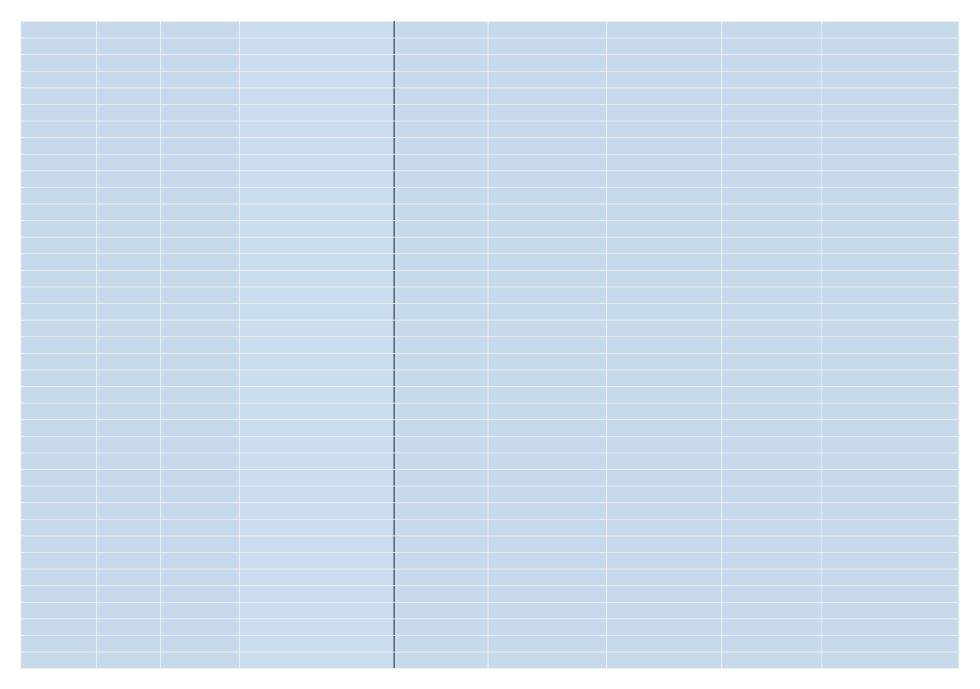
				Table 20c. Curren	t Engine Information			
Vehicle Make	Vehicle Model	Baseline Vehicle Model Year	Baseline Vehicle GVWR (if original vehicle replaced)	Engine Serial Number(s)	Engine Make	Engine Model	Engine Model Year	Engine Tier (nonroad, locomotive, and marine only)
Ford	Taurus	1994	16,001	4548154	ABC	ABC	1995	Tier 2

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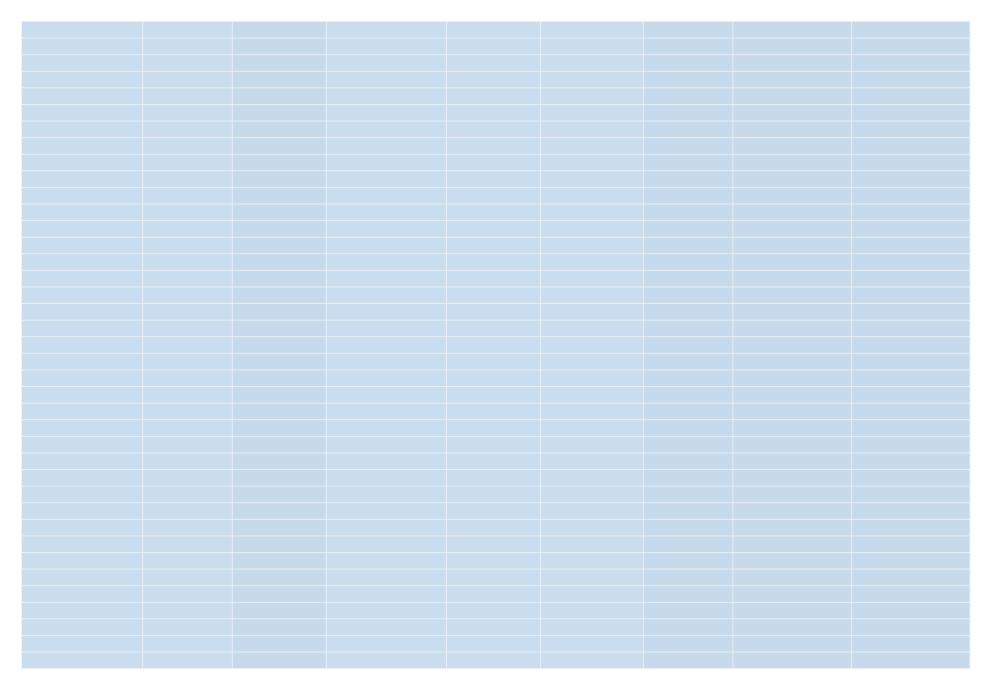
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Tier 4 Standards (Tier 4 only)	Engine After- Treatment Technology (Tier 4 nonroad only)	Engine Horsepower	Engine Cylinder Displacement (liters/cylinder; marine only)	Engine Number of Cylinders (# of cylinders per engine; marine only)	Engine Total Displacement (liters per engine; marine only)	Engine Family Name (if unregulated, then N/A)	Baseline Engine Fuel Type (select from dropdown)	Total # of Propulsion Engines (per vessel; marine only)
N/A	No DPF, Yes SCR	660	5.0 <= size <15.0	N/A	N/A	N/A	ULSD (diesel)	N/A

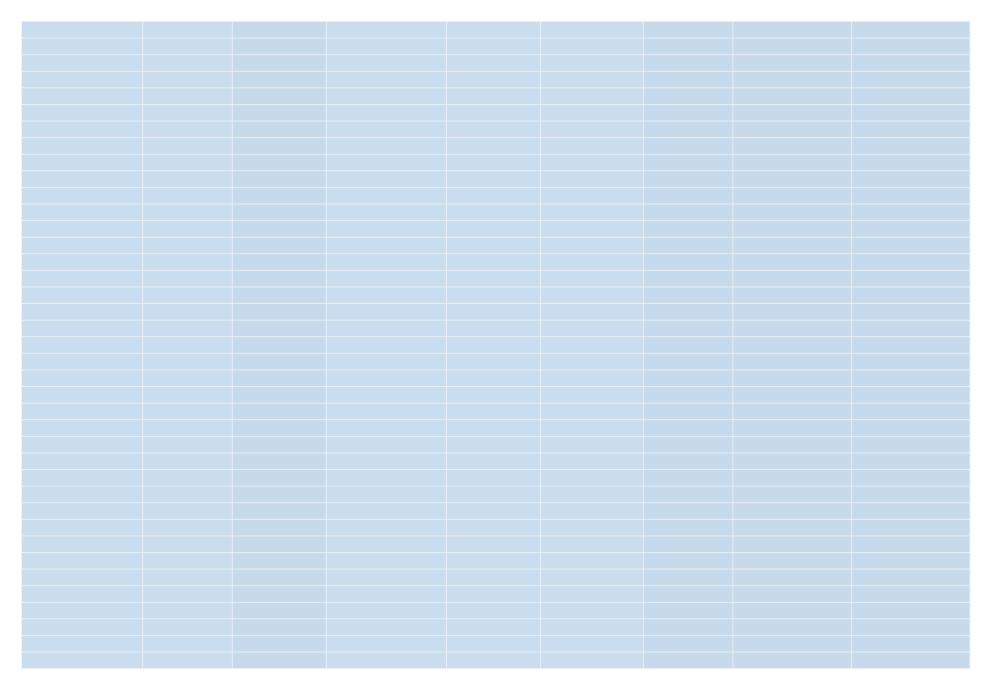
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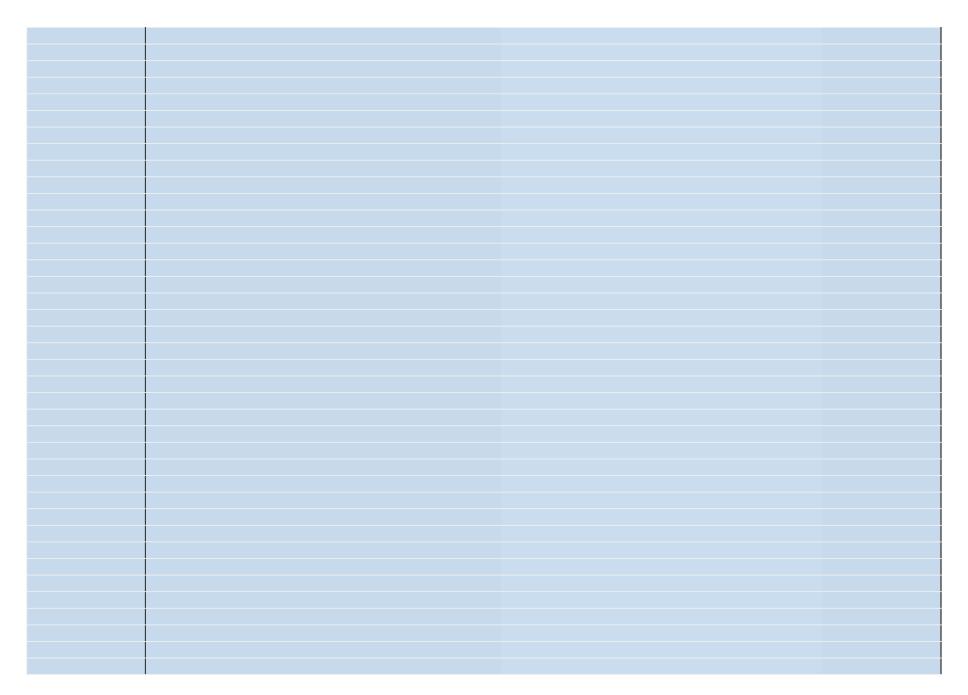
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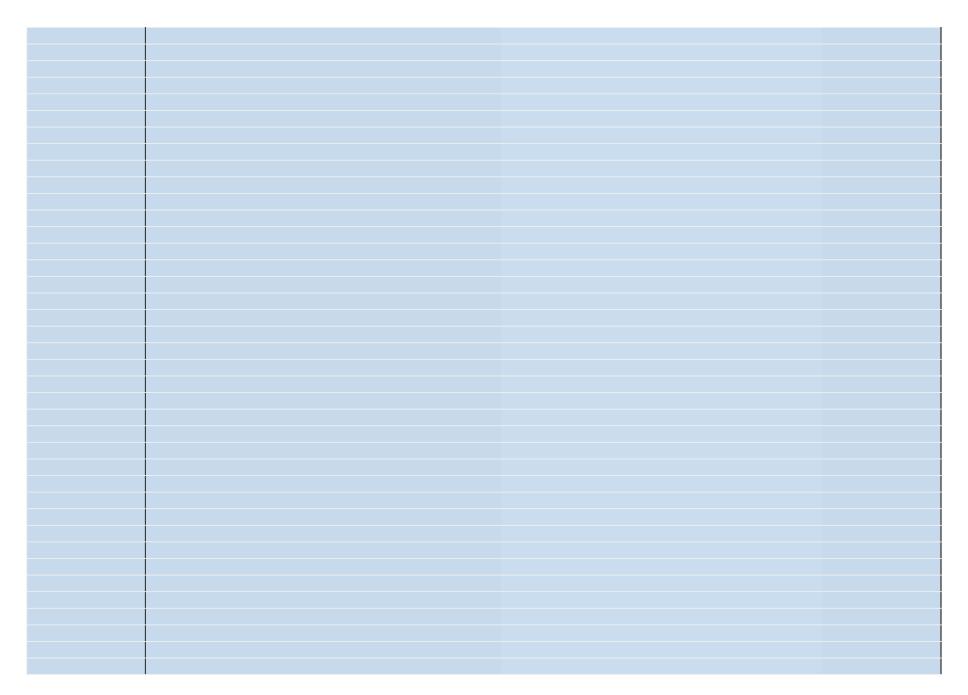
	Table 20d. Current An	Table 20d. Current Annual Vehicle Activity Data									
Total # of Auxiliary Engines (per vessel; marine only)	Annual Amount of Fuel Used (gallons/year per engine for nonroad and marine; gallons/year per vehicle for onroad and locomotives)	Annual Usage Hours (hours per year per engine; includes idling hours; nonroad, locomotive, and marine only)	Current Odometer (in miles)	Annual Miles Traveled (miles per vehicle; on- highway only)	Annual Idling Hours (hours per engine; on- highway only)	Annual Hoteling Hours (hours per year per engine; class 8 long-haul combination only)	Remaining Life of Baseline Engine/Vehicle (years per engine; total # of years of engine life remaining at time of upgrade action)				
N/A	6000	3000	150000	12000	1500	N/A	3				

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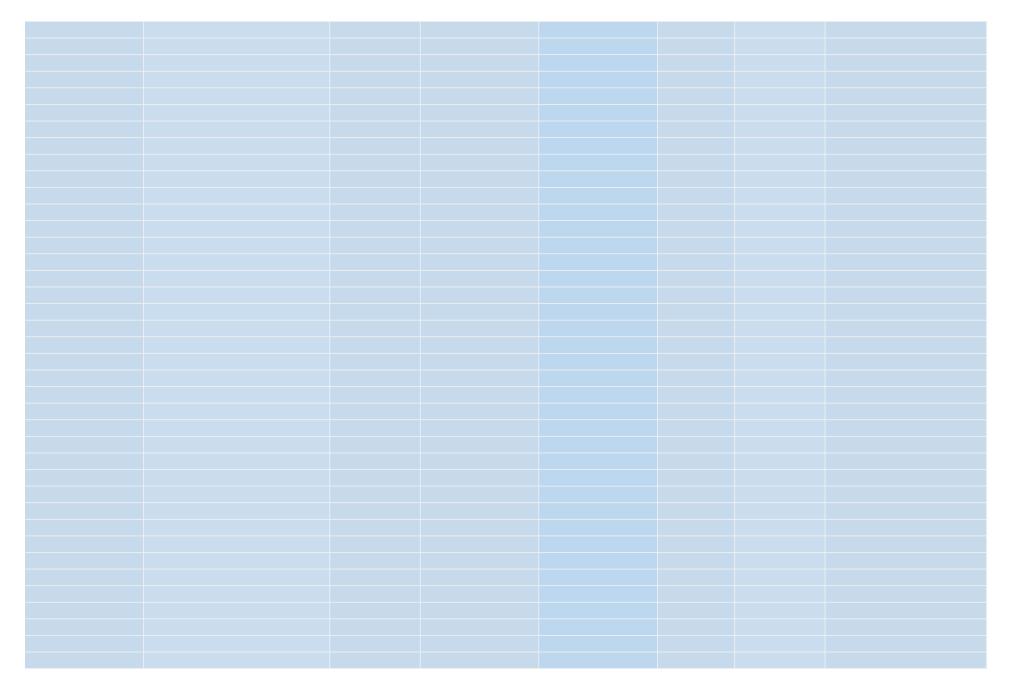
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	Primary Plac	Secondary Place of Performance					
State select from dropdown)	*County (select from dropdown)	City(s)	Percent of Time Operated in County (enter value 0-1)	Zip Code(s)	State (select from dropdown)	* County (select from dropdown)	City(s)
AZ	Maricopa County	Phoenix	85%	85364	AZ	Yuma County	Yuma

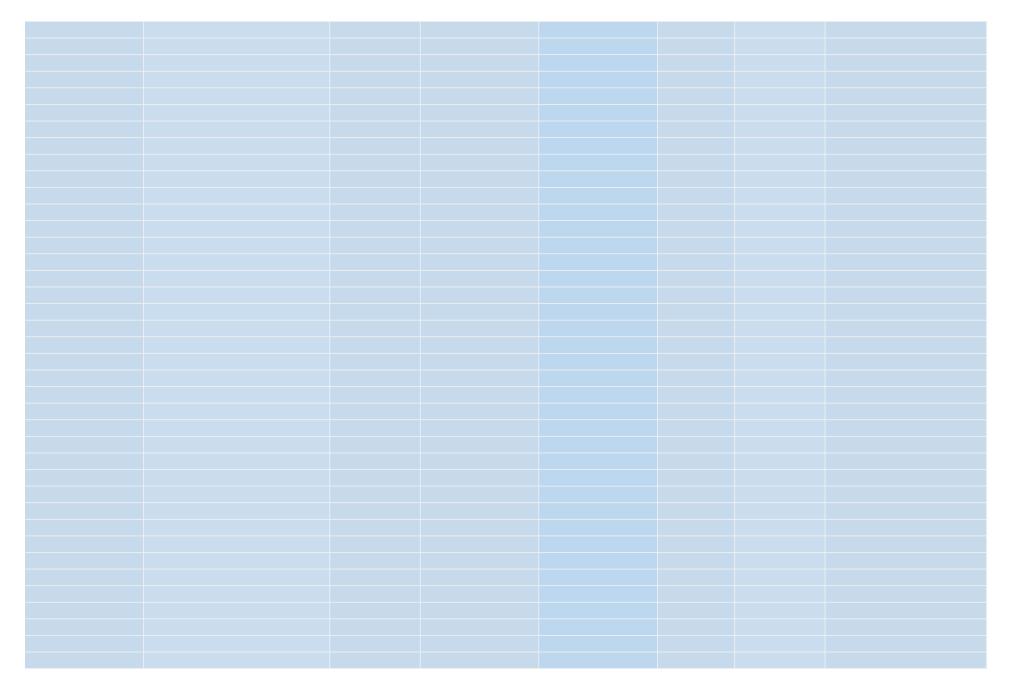
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(if applicable)		Additional Location	on Details (if applicable)
Percent of Time Operated in County (enter value 0-1)	Zip Code(s)	Additional Counties where Vehicle Operates	% of time operated in each Additional County
15%	85364	Pima County, AZ; La Paz County, AZ	5% in Pima; 5% in La Paz

able 21a. Upgi	rade Information	
ear of Upgrade Action	Upgrade Type (select from dropdown)	* Upgrade Specific (select from dropdown after selecting Upgrade Type)
2018	Emission_Control_Devices	Diesel Oxidation Catalyst + Diese Particulate Filter

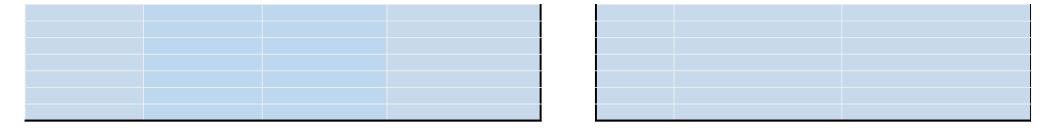
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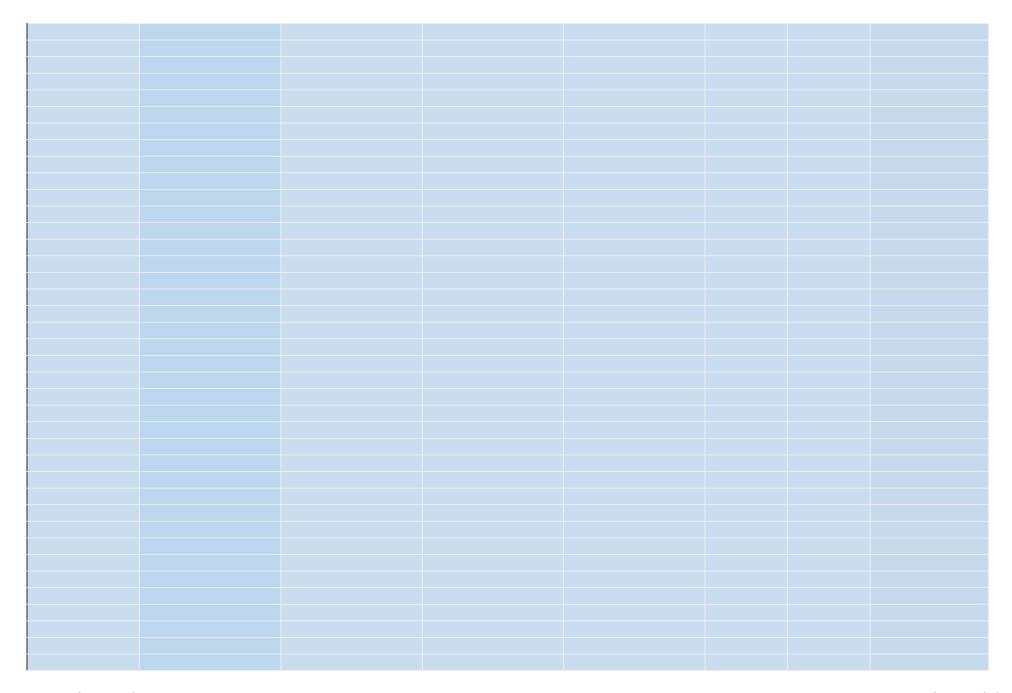
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Table 21b. Vehicle Replacement and/or Upgrade Information

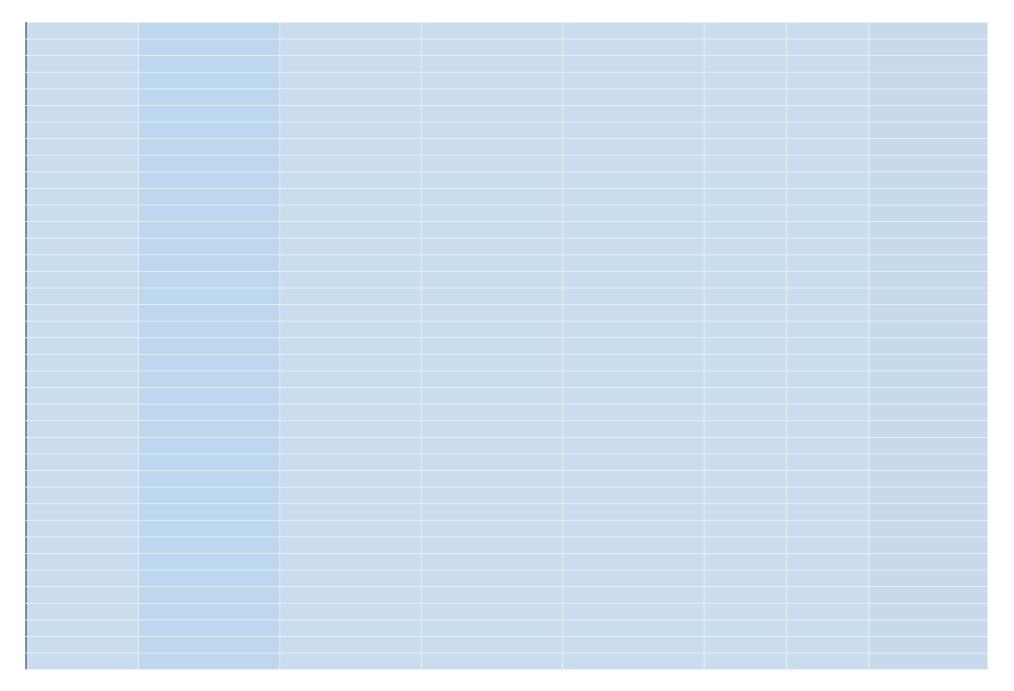
Class (onroad vehicles, as defined in data dictionary; select from dropdown)	Vehicle Identification Number (VIN) for New Vehicle (if original vehicle replaced) (Use Capital Letters)	New Vehicle Fuel Type (if original vehicle replaced; select from dropdown)	New Vehicle Manufacturer (if original vehicle replaced)	New Vehicle Model (if original vehicle replaced)	New Vehicle Model Year (if original vehicle replaced)	New Vehicle GVWR (if original vehicle replaced)	Upgrade or Replacement Vehicle/Equipment Cost only Per Unit
Class 6	1234567890ABCDE	Hybrid	New Vehicle Manufacturer Co.	Model Name or #	2023	16001	\$ 150,000.00

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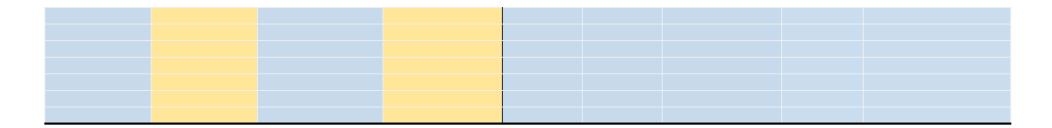
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					Table 21c. New Engine Information (if replaced)						
Uį	ograde Labor Cost only Per Unit	Total Cost Per Unit (equipment plus labor)	Total Federal Funds Expended Per Unit (\$ of Total Cost per Unit)	Federal Cost Share Expended Per Unit (% of Total Cost per Unit)	New Engine Model Year	New Engine Serial Number	New Engine Tier (nonroad, locomotive, and marine only)	Tier 4 Standards (Tier 4 only)	New Engine After-Treatment Technology (Tier 4 nonroad only)		
\$	25,000.00	\$ 175,000.00	\$ 50,000.00	28.57%	2018	4548155	Tier 2	N/A	No DPF, Yes SCR		

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New Engine Horsepower	New Engine Duty Cycle (line-haul locomotive only)	New Engine Cylinder Displacement (liters per cylinder per engine; marine only)	New Engine Total Displacement (liters per engine; marine only)	New Engine Number of Cylinders (per engine; marine only)	New Engine Family Name	New Engine Fuel Type (select from dropdown)
750	N/A	5.0 <= size <15.0	N/A	N/A	ABC	ULSD (diesel)

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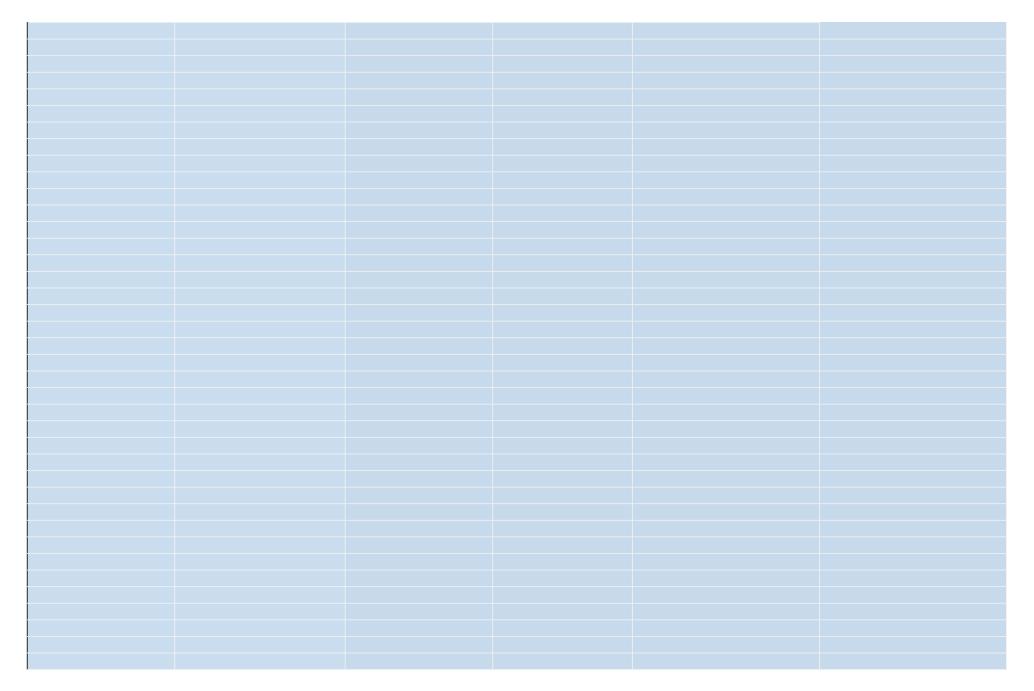


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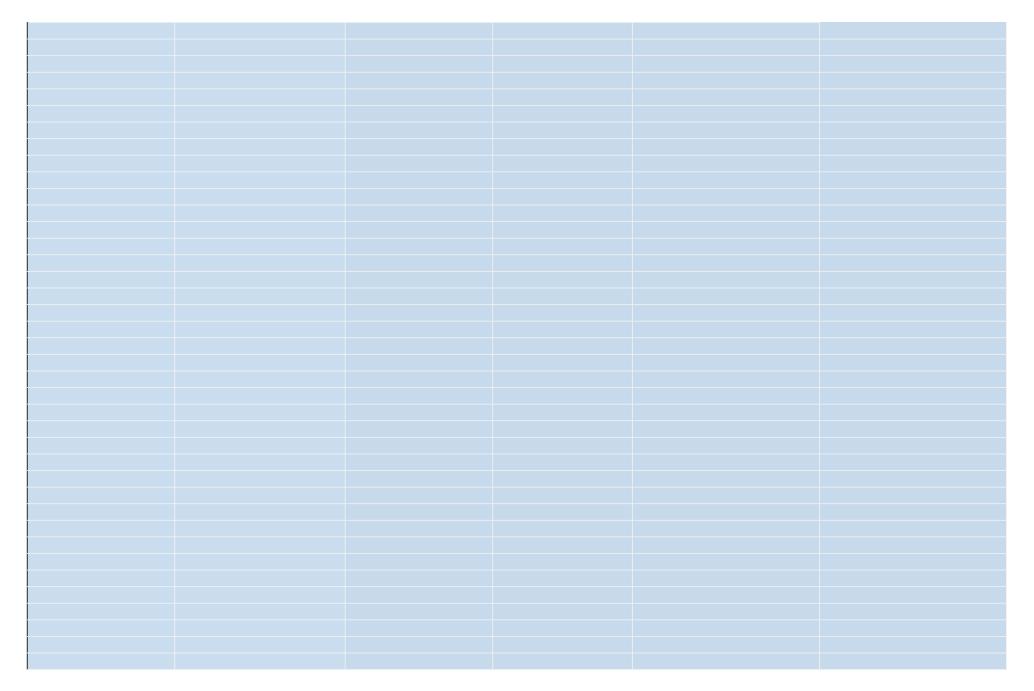
able 21d. New Annual Veh		Table 21e. New Vehicle Battery In			
New Annual Idling Hours (hours per vehicle; on-highway only)	New Annual Hoteling Hours (hours per vehicle; class 8 long-haul combination only)	New Annual Fuel Volume (estimated gallons of fuel/year per engine for new gas, diesel, hybrid, LPG or CNG)	New Vehicle Equipped with Auxiliary Heater? (Yes/No)	Auxiliary Heater Type (if applicable)	Capable of Bidirectional Charging? (if Battery Electric or Hybrid)
N/A	N/A	6000	Yes	Spheros Thermo 300	Yes
				,	

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ormation (Hybrid & Battery Electric Only)							Table 21f. Battery Warranty Informa	
Manufacturer of Battery Pack	Number of Battery Packs	Battery Capacity per Battery Pack (kWh)	Vehicle or Equipment Total Battery Capacity, (kWh)	Rated Charging Power (kW)	Estimated Range in Miles (for Onroad Battery Electric only)	Estimated Range in Hours (for Nonroad Battery Electric only)	Is the Battery Warranty Included? (for Battery Electric only)	Battery Warranty: Indicate Number o Years Covered (for Battery Electric only)
Battery & Co.	6	90	540	360	200	16	Yes	8

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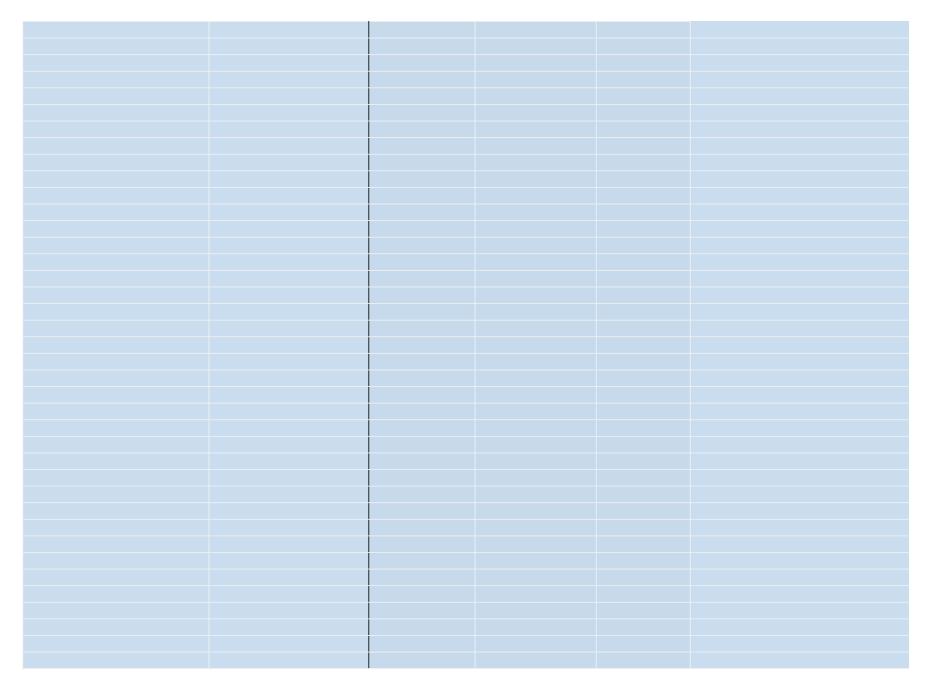


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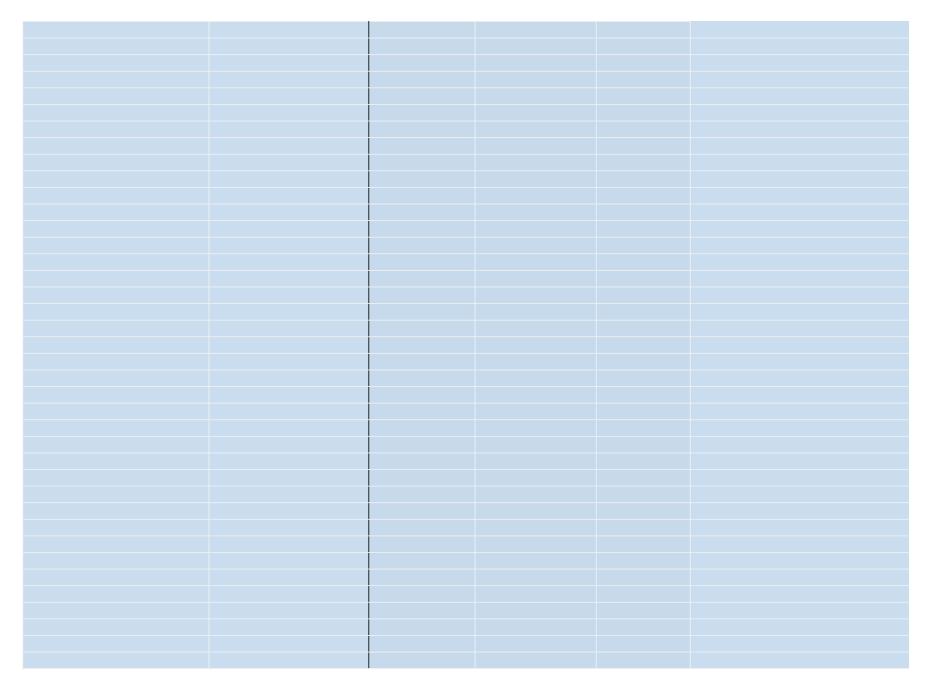
n		Table 21g. Powertra	in Warranty Informati	on	Table 21h. Vehicle Ownership and BABA
sattery Warranty: Number of Miles Covered by Warranty (for Battery Electric only)	Battery Warranty: Total kWh of battery discharge Covered by Warranty (for Battery Electric only)	Powertrain Warranty Included? (Yes/No)	Powertrain Warranty: Number of Years (if included)	Powertrain Warranty: Number of Miles (if included)	Publicly or Privately Owned (select from dropdown)
150000	200000	Yes	5	100000	Publicly Owned

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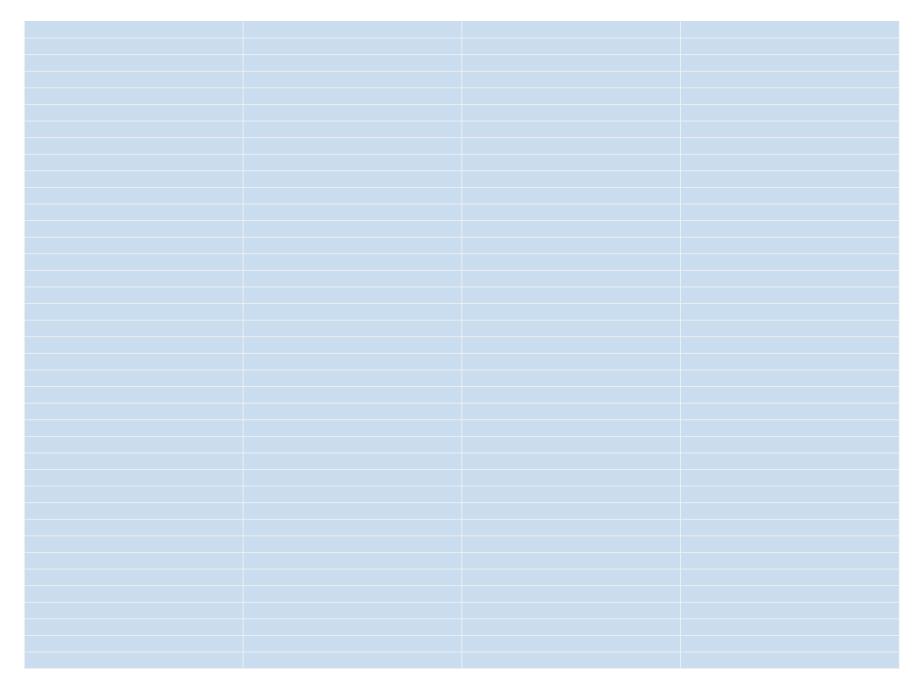
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Compliance								
Does the vehicle serve a public function? (select from dropdown)	Is the vehicle subject to BABA? (select from dropdown)	Is the vehicle BABA Compliant? (select from dropdown)	Is a waiver being used to fulfill BABA compliance for the vehicle? (select from dropdown)					
Yes	Yes	Yes - This vehicle is BABA compliant	No - Vehicle meets all BABA requirements					

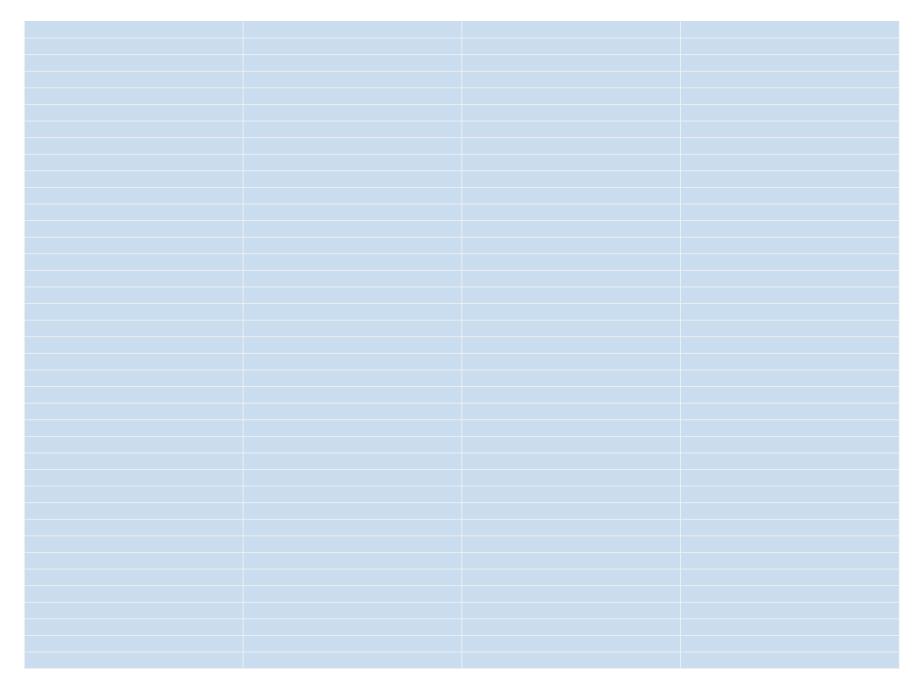
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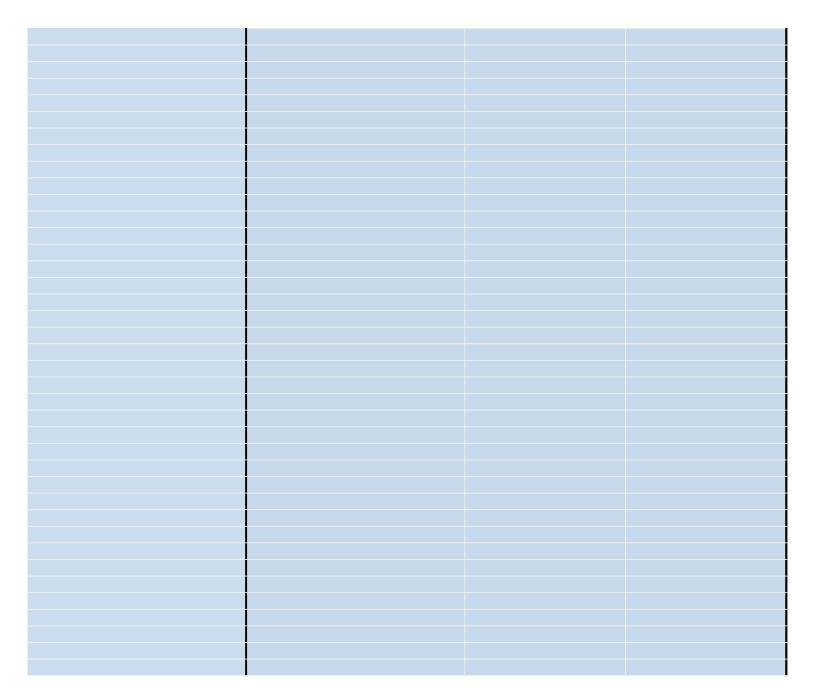
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	Table 21i. Optional Participation in Future of Transportation Research					
If "Yes - Other EPA Waiver', explain	Is the vehicle/equipment equipped with Telematics? (Yes/No/Not Sure)	EPA or its partners may contact me about participating in research opportunities to provide vehicle/equipment data that could inform future transportation work. (Yes/No)	If Yes, Telematics Primary Point of contact (Name and email)			
Please describe	Yes	Yes	Sarah Smith; Smith.Sarah@HSD.edu			

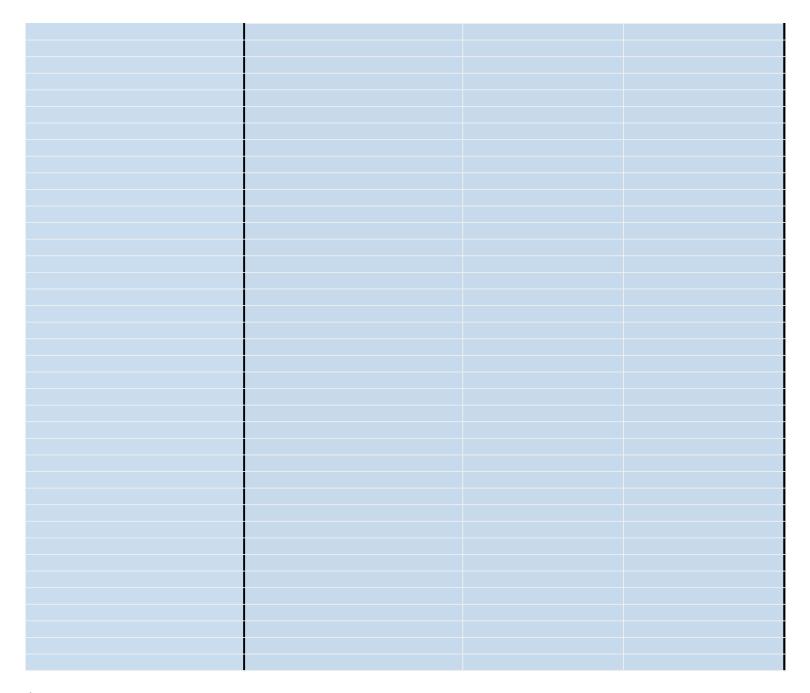
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U. S. Environmental Protection Agency Diesel Emissions Reduction Act (DERA) Grant Program

Infrastructure Description

Instructions

The EVSE Equipment Information (Table 22) should detail all electric vehicle supply equipment (EVSE) and/or supporting infrastructure (Table 23) purchased under the project. Please only fi however, additional rows may be add as needed to capture all equipment. Please refer to the infrastructure data definitions on Tab 13 (Data Dictionary) for data field definitions. Reminder: other infrastructure projects must comply with Build America, Buy America (BABA) requirements. See below for more information on BABA.

Build America, Buy America (BABA) requirements

On November 16, 2021, the Infrastructure Investment and Jobs Act ("IIJA"), Pub. L. No. 116-58, which includes the Build America, Buy America Act (BABA), Public Law 116-58, §§ 70901-52, 🛚 2022, all of the iron, steel, manufactured products, and construction materials used in infrastructure project are produced in the United States. If award recipient will be installing, upgrading to the infrastructure project, regardless of whether or not the infrastructure project was the primary basis for the award. Additionally, BABA requirements apply even if the award recipient wholly, for the infrastructure project. For more information, please visit https://www.epa.gov/cwsrf/build-america-buy-america-baba.

Table 22: Electr	ic Vehicle Supply Equipment Inf						
	Table 22a. EVSE Equipment In	formation Overview					
	Type of Charger	If Level 2, is it ENERGY STAR certified	EVSE Manufacturer	EVSE Model	EVSE Manufacture Year	Is the EVSE BABA Compliant?	EVSE Maximum Output Power (kW)
Example EV Infrastructure	Level 2	Yes	Manufacturer Name	Model Name	2023	Yes - This Infrastructure is BABA Compliant	24
EVSE Group 1							
EVSE Group 2							
EVSE Group 3							
EVSE Group 4							

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EVSE Group 5				
EVSE Group 6				
EVSE Group 7				
EVSE Group 8				
EVSE Group 9				
EVSE Group 10				

	Table 23a. Shore Power Equipment Information & Demand Overview										
	Type of Shore Power Connection	Total Voltage Service Provided (select from dropdown)	Total Voltage Service Provided, if not listed	Manufacturer	Model	Manufacture Year	Typical Engine Tier of Vessels Using Shore Power				
Example Shore Power Infrastructure	High voltage shore power connection (HVSC)	6.6 kV	10 kV	Manufacturer Name	Model Name	2023	Tier 1				
Shore Power Group 1											
Shore Power Group 2											
Shore Power Group 3											
Shore Power Group 4											
Shore Power Group 5											
Shore Power Group 6											

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Shore Power Group 7				
Shore Power Group 8				
Shore Power Group 9 Shore Power Group 10				
Shore Power Group 10				

Are there any other infrastructure projects associated with this grant that are not listed above (e.g. electrified parking space, stationary generator or other stationary equipment)?								
no, please leave this section blank. If yes, please provide details in the box below on the infrastructure project and describe how BABA compliance was determined.								

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OMB Control	Numb	er: 2	060	-075	54
Expiration	Date:	MM.	/DD	/YY [\]	ſΥ

Il out shaded cells highlighted blue with a diagonal pattern (///); All Level 2 EVSEs must be ENERGY STAR certified. All EVSE and

was signed into law. BABA requires that on or after May 14, g, or replacing "infrastructure," then BABA requirements apply will be using another source of funding, whether in part or

Number of Plugs on EVSE	Is the EVSE Capable of Bidirectional Charging?	Will the Vehicle/Equipment and EVSE be Used for Vehicle to Grid (V2G)?	Number of EVSE Units	EVSE Equipment Cost <i>only</i> Per Unit:	Total Federal Funds Expended Per EVSE Unit	Total Federal Funds Expended for EVSE	Date of EVSE was Manufactured (mm/dd/yyyy)	Date of EVSE Installation (mm/dd/yyyy)
2	No	No	2	\$ 18,000.00	\$ 12,000.00	\$ 24,000.00	3/28/2024	6/28/2024

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								Table 23b. Location
Fuel Type of Vessels Using Shore Power	Number of Annual Vessel Calls to Berth where Shore Power Installed	per Vessel Call per	Number of Vessel Berths that can be served by Shore Power Pedestal	Maximum Output Power (kW)	Estimated Annual Total Energy Provided in MW-h	per Shore Power	Number of Shore Power Pedestals	State (select from dropdown)
Marine Gas Oil (MGO, 0.10% S)	500	72	1	24	1 MW-h	2	2	VA

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(Y or N)

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	Table 22b. Location of EV Infrastructure									
Date EVSE Operational (mm/dd/yyyy)	State (select from dropdown)	County (select from dropdown)	City	Zip Code	Street Adress of Charger(s)					
8/28/2024	VA	Arlington County	Alexandria	22305	400 1st Street					

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f Shore Power Infrastructure				Table 23c. Installation Details	
County (select from dropdown)	City	Zip Code	Port Facility where Shore Power Installed	Who owns the Shore Power Infrastructure?	Total Funds Expended Installation Cost for Shore Power Group
Arlington County	Alexandria	22305	Port of Guam	Port of Guam	\$ 120,000.00

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		Table 22c. Charging Management Service Providers			
Who owns the charger?	Anticipated User(s) of the charger	Name of Charging Management Service Provider (NA if not applicable)	Does the Infrastructure Equipment Cost Include Charging Management Service? (Yes/No)	If Charging Management Service not included in cost, but is acquired, what is the cost and frequency of charges?	
Walton School District	buses serving Walton School District	Charge Manage & Co.	Yes	\$250 per charger per month	

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Total Federal Fu Installation Co Power C	st for Shore	Does the Infrastructure Equipment Cost Include Installation?	Description of Installation Work, including all equipment installed	Installation Work Performed By	Date(s) Shore Power Equipment was Manufactured (mm/dd/yyyy)
\$	70,000.00	No	Upgrades to the electrical panel, wiring, and installation for two DCFC	XYZ Electric Co.	5/25/2023

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Table 22d. Infrastructure Installation Information						
Total F on In	Funds Expended estallation Cost	Total EPA Funds Expended on Installation Cost	Does the Infrastructure Equipment Cost Include Installation?	Description of Installation Work	Installation Work Performed By	
\$	12,000.00	\$ 7,000.00	No	Upgrades to the electrical panel, wiring, and installation for two DCFC	XYZ Electric Co.	

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		Table 23d. Shore Power BABA	Details	
Date Equipment Installed	Date Equipment Fully Operational	Is waiver being used to fulfill BABA compliance for this infrastructure?	If 'Yes - Other Waiver' selected, please describe	Are the Shore Power Equipment, Housing, and all Accessories BABA Compliant?
6/24/2024	8/24/2024	No - Infrastructure meets all BABA requirements		Yes - Housing, Wiring, Cables, and All Accessories are BABA Compliant

			Table 22e. EVSE Cost Summary		
Installation was conducted by an individual who meets the infrastructure electrician requirements as outlined in the program guidance?	Is waiver being used to fulfill BABA compliance for this infrastructure?	If 'Yes - Other Waiver' selected, please describe	Total EPA Funds Expended on EVSE Equipment and Installation	Total Funds Expended on EVSE Equipment and Installation	
Yes - Certification from EVITP	No - Infrastructure meets all BABA requirements		\$31,000.00	\$48,000.00	

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	Table 23e. Shore Power Cost Summary					
If No, Partly Compliant, or Unsure, explain	Equipment Cost <i>only</i> Per Shore Power Pedestal:	Total Federal Funds Expended Per Shore Power Pedestal	Total Federal Funds Expended for All Shore Power Equipment (total # of pedestals x Federal Funds Expended/pedestal)	Federal Cost Share Expended For Shore Power Equipment		
	\$ 18,000.00	\$ 12,000.00	\$ 24,000.00	67%		
			\$ -			
			\$ -			
			\$ -			
			\$ -			
			\$ -			
			\$ -			

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

	Table 22f. Optional Participation in Fut	ture of Transportation Research	Table 22g. EVSE Serial Number	
Federal Cost Share Expended Per Unit (% of Total Cost per EVSE)	EPA or its partners may contact me about participating in research opportunities to provide EVSE data that could inform future transportation work. (Yes/No)	If Yes, Primary Point of contact (Name and email)	Serial Number: Unit 1	Serial Number: Unit 2
65%	Yes	Sarah Smith, Smith.Sarah@hsd.edu	L1-0357-ISO-3240-049390	VX-1263-11C1-2-2310-05642

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	Table 23f. Optional Participation in Fu	ture of Transportation Research	Table 23g. Shore Power Serial Nu	mber
Federal Cost Share for Shore Power Installation	EPA or its partners may contact me about participating in research opportunities to provide data that could inform future transportation work. (Yes/No)	If Yes, Primary Point of contact (Name and email)	-	Serial Number: Unit 2
58%	Yes	Sarah Smith, Smith.Sarah@hsd.edu	L1-0357-ISO-3240-049390	VX-1263-11C1-2-2310-05642

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Serial Number: Unit 3	Serial Number: Unit 4	Serial Number: Unit 5	Serial Number: Unit 6	Serial Number: Unit 7
170182509830170	9124-1GT05-09830170	VX-1265-11C1-2-2635-07842	VX-1264-11C1-2-2502-05872	VX-1266-11C1-2-2502-05642

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	T	

Serial Number: Unit 3	Serial Number: Unit 4	Serial Number: Unit 5	Serial Number: Unit 6	Serial Number: Unit 7
170182509830170	9124-1GT05-09830170	VX-1265-11C1-2-2635-07842	VX-1264-11C1-2-2502-05872	VX-1266-11C1-2-2502-05642

Serial Number: Unit 8	Serial Number: Unit 9	Serial Number: Unit 10	Serial Number: Unit 11	Serial Number: Unit 12
VX-1267-11C1-2-2502-15426	VX-1268-11C1-2-2503-96834	9125-1GT27-0983253	VX-1269-11C1-2-2502-05872	VX-1270-11C1-2-2502-05872

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Serial Number: Unit 8	Serial Number: Unit 9	Serial Number: Unit 10	Serial Number: Unit 11	Serial Number: Unit 12
Serial Number: Unit 8 VX-1267-11C1-2-2502-15426	Serial Number: Unit 9 VX-1268-11C1-2-2503-96834	Serial Number: Unit 10 9125-1GT27-0983253	Serial Number: Unit 11 VX-1269-11C1-2-2502-05872	Serial Number: Unit 12 VX-1270-11C1-2-2502-05872

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Serial Number: Unit 13	Serial Number: Unit 14	Serial Number: Unit 15	Serial Number: Unit 16	Serial Number: Unit 17
VX-1271-11C1-2-2502-05872	VX-1272-11C1-2-2502-05872	VX-1273-11C1-2-2502-05872	VX-1274-11C1-2-2502-05872	VX-1275-11C1-2-2502-05872

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Serial Number: Unit 13	Serial Number: Unit 14	Serial Number: Unit 15	Serial Number: Unit 16	Serial Number: Unit 17
Serial Number: Unit 13 VX-1271-11C1-2-2502-05872	Serial Number: Unit 14 VX-1272-11C1-2-2502-05872	Serial Number: Unit 15 VX-1273-11C1-2-2502-05872	Serial Number: Unit 16 VX-1274-11C1-2-2502-05872	Serial Number: Unit 17 VX-1275-11C1-2-2502-05872

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Serial Number: Unit 18	Serial Number: Unit 19	Serial Number: Unit 20	Serial Number: Unit 21	Serial Number: Unit 22
VX-1276-11C1-2-2502-05872	VX-1277-11C1-2-2502-05872	VX-1278-11C1-2-2502-05872	VX-1279-11C1-2-2502-05872	VX-1280-11C1-2-2502-05872

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Serial Number: Unit 18	Serial Number: Unit 19	Serial Number: Unit 20	Serial Number: Unit 21	Serial Number: Unit 22
Serial Number: Unit 18 VX-1276-11C1-2-2502-05872	Serial Number: Unit 19 VX-1277-11C1-2-2502-05872	Serial Number: Unit 20 VX-1278-11C1-2-2502-05872	Serial Number: Unit 21 VX-1279-11C1-2-2502-05872	Serial Number: Unit 22 VX-1280-11C1-2-2502-05872

Serial Number: Unit 23	Serial Number: Unit 24	Serial Number: Unit 25	Serial Number: Unit 26	Serial Number: Unit 27
VX-1281-11C1-2-2502-05872	VX-1282-11C1-2-2502-05872	VX-1283-11C1-2-2502-05872	VX-1284-11C1-2-2502-05872	VX-1285-11C1-2-2502-05872

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Serial Number: Unit 24	Serial Number: Unit 25	Serial Number: Unit 26	Serial Number: Unit 27
VX-1282-11C1-2-2502-05872	VX-1283-11C1-2-2502-05872	VX-1284-11C1-2-2502-05872	VX-1285-11C1-2-2502-05872

Serial Number: Unit 28	Serial Number: Unit 29	Serial Number: Unit 30
VX-1286-11C1-2-2502-05872	VX-1287-11C1-2-2502-05872	VX-1288-11C1-2-2502-05872

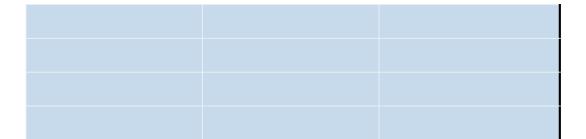
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Serial Number: Unit 28	Serial Number: Unit 29	Serial Number: Unit 30
VX-1286-11C1-2-2502-05872	VX-1287-11C1-2-2502-05872	VX-1288-11C1-2-2502-05872

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Crant Desirient	
Grant Recipient	
Grant Number	
Project Title	
DERA Program	

U. S. Environmental Protection Agency DERA Grant Report

Final Report: Financial and Narrative Summary

Total EPA Funds Awarded	\$
Total Voluntary Cost Share	\$
Total Mandatory Cost Share Amount	\$
Total Project Costs (Fed. + Cost Share)	\$
Federal (EPA) Funds Expended to Date	\$
Federal (EPA) Funds Remaining	\$

Table 24. Final Emissions - Actual Results

Record final project information for DEQ results. Each fiscal year of funding should be reported separately (emission results for the first fiscal year should be reported in the first results table). Tip: Copy and paste results from the Diesel Emission Quantifier Results webpage or excel expc

Please select fiscal year from the drop down menu. Annual Results (short tons) NOx PM2.5 HC CO Baseline for Upgraded Vehicles/Engines Amount Reduced After Upgrades Percent Reduced After Upgrades Lifetime Results (short tons)	CO2	Fuel
Baseline for Upgraded Vehicles/Engines Amount Reduced After Upgrades Percent Reduced After Upgrades	CO2	Fuel
Amount Reduced After Upgrades Percent Reduced After Upgrades Description		
Percent Reduced After Upgrades		
Lifetime Results (short tons)		
Eletine results (short tons)		
Baseline for Upgraded Vehicles/Engines		
Amount Reduced After Upgrades		
Percent Reduced After Upgrades		
<u>Lifetime Cost Effectiveness (\$/short ton reduced)</u>		
Capital Cost Effectiveness (unit & labor costs only)		
Total Cost Effectiveness (includes all project costs)		
Please select fiscal year from the drop down menu.		
Annual Results (short tons) NOx PM2.5 HC CO	CO2	Fuel
Baseline for Upgraded Vehicles/Engines		
Amount Reduced After Upgrades		

				U. S. Environme	ntal Protection Ager	ncy	
		DERA Grant Report					
				Final Report: Financ	ial and Narrative Sur	nmary	
Grant Recipient				Total EPA Funds Aw			\$
Grant Number				Total Voluntary Cos	t Share		\$
Project Title				Total Mandatory Co	st Share Amount		\$
DERA Program				Total Project Costs (Fed. + Cost Share)		\$
			•	Federal (EPA) Funds	Expended to Date		\$
				Federal (EPA) Funds	Remaining		\$
Percent Reduced After Upgrades							
<u>Lifetime Results (short tons)</u>							
Baseline for Upgraded Vehicles/Engines							
Amount Reduced After Upgrades							
Percent Reduced After Upgrades							
Lifetime Cost Effectiveness (\$/sh	ort ton reduced)						
Capital Cost Effectiveness labor costs only)	(unit &						
Total Cost Effectiveness all project costs)	(includes						

	U. S. Environmental Protection Agency
	DERA Grant Report
	Final Report: Financial and Narrative Summary
Grant Recipient	Total EPA Funds Awarded

Grant Recipient	
Grant Number	
Project Title	
DERA Program	

Total EPA Funds Awarded	\$
Total Voluntary Cost Share	\$
Total Mandatory Cost Share Amount	\$
Total Project Costs (Fed. + Cost Share)	\$
Federal (EPA) Funds Expended to Date	\$
Federal (EPA) Funds Remaining	\$

Table 25. 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. Please select the fiscal year of funds used for the activity d

Fiscal Year	Activities	Anticipated Outputs	Antici
Please select fiscal year from the drop down menu.			
Please select fiscal year from the drop down menu.			
Please select fiscal year from the drop down menu.			
Please select fiscal year from the drop down menu.			
Please select fiscal year from the drop down menu.			
Please select fiscal year from the drop down menu.			

EPA Form Number: 5900-691

U. S. Environmental Protection Agency DERA Grant Report Final Report: Financial and Narrative Summary					
		Final Report: Finan	ciai ana Narrative Summary		
Grant Recipient		Total EPA Funds Av		\$	
Grant Number		Total Voluntary Cos		\$	
Project Title		Total Mandatory Co		\$	
DERA Program		Total Project Costs		\$	
		Federal (EPA) Fund		\$	
		Federal (EPA) Fund	s Remaining	\$	
Please select fiscal year from the drop down menu.					
Please select fiscal year from the drop down menu.					
Please select fiscal year from the drop down menu.					
Please select fiscal year from the drop down menu.					
Please select fiscal year from the drop down menu.					
down menu.					

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		U. S. Environmental Protection Agency	
		DERA Grant Report Final Report: Financial and Narrative Summary	
		Final Report. Financial and Narrative Summary	
Grant Recipient		Total EPA Funds Awarded	\$
Grant Number		Total Voluntary Cost Share	\$
Project Title		Total Mandatory Cost Share Amount	\$
DERA Program		Total Project Costs (Fed. + Cost Share)	\$
		Federal (EPA) Funds Expended to Date	\$
		Federal (EPA) Funds Remaining	\$
		Table 26. Additional Questions	
Please provide programmatic and narrative find	incial results on the project.		
Question			Answer
Provide a narrative description of the project and summarize the accomplishments that occurred during the grant period.			
Did you award any rebates or subawards during the grant period? If so, list the recipients, how much funding they received, and the good/services provided.			

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U. S. Environmental Protection Agency						
		DERA Grant Report				
	Final Report: Financial and Narrative Summary					
				_		
Grant Recipient		Total EPA Funds Awarded	\$			
Grant Number		Total Voluntary Cost Share	\$			
Project Title		Total Mandatory Cost Share Amount	\$			
DERA Program		Total Project Costs (Fed. + Cost Share)	\$			
		Federal (EPA) Funds Expended to Date	\$			
		Federal (EPA) Funds Remaining	\$			
Provide a comparison of actual accomplishments with the anticipated outputs/outcomes and timelines/milestones specified in the original project Work Plan. This information may include: Number of replaced or retrofitted engines/vehicles/equipment and/or hours of idling reduced; Adoption of an idle-reduction policy or changes in driver behavior regarding idling practices 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						
If anticipated outputs/outcomes and/or timelines/milestones from the original submitted proposal were not met, why not? Did you encounter any problems during the grant period which may have precluded you from meeting the project objectives?						
How did you remedy any any problems that change	problems? Detail how and the date you had to address ed the original work plan and/or work plan schedule.					

U. S. Environmental Protection Agency				
DERA Grant Report				
	Final Report: Financial and Narrative Summary			
Grant Recipient		Total EPA Funds Awarded	\$	
Grant Number		Total Voluntary Cost Share	\$	
Project Title		Total Mandatory Cost Share Amount	\$	
DERA Program		Total Project Costs (Fed. + Cost Share)	\$	
		Federal (EPA) Funds Expended to Date	\$	
		Federal (EPA) Funds Remaining	\$	
Provide a narrative discussion of the successes and lessons learned for the entire project.				
If any cost-share funds are reported, identify the source of the funds.				
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.				

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		U. S. Environmental Protection Ag	ency
		DERA Grant Report	
		Final Report: Financial and Narrative St	ummary
Grant Recipient		Total EPA Funds Awarded	\$
Grant Number		Total Voluntary Cost Share	\$
Project Title		Total Mandatory Cost Share Amount	\$
DERA Program		Total Project Costs (Fed. + Cost Share)	\$
		Federal (EPA) Funds Expended to Date	\$
		Federal (EPA) Funds Remaining	\$
1) Evidence that the replanot have occurred during without the financial assi include verification that tand fleet characterization per the vehicle or fleet opprocedures, or retiremen 2) Evidence of appropriat	e scrappage or remanufacture, including the engine		
Attachments as Necessar For projects that take pla vehicles, engines or equipemissions reductions, pro EPA funds were impleme	ce in an area affected by, or that include affected oment affected by, Federal, State or local law mandating by ide evidence that emission reductions funded with nted prior to the effective date of the mandate and/or		
	nd beyond) those required by the applicable mandate.		

		U. S. Environmental Protection Agency DERA Grant Report Final Report: Financial and Narrative Summary	
Grant Recipient Grant Number Project Title DERA Program		Total EPA Funds Awarded Total Voluntary Cost Share Total Mandatory Cost Share Amount Total Project Costs (Fed. + Cost Share) Federal (EPA) Funds Expended to Date Federal (EPA) Funds Remaining	\$ \$ \$ \$ \$
Did you include at least one photo of successful, new employed? If yes, please indicate if you approve of p use of the photo(s) in future internal and external do limited to Reports to Congress and case studies highl stories.	ermission for EPA's future cuments including, but not		
(State program only)What is the URL for the state w number and dollar amount of subawards, rebates, or breakdown of the technologies funded? Please also used for outreach related to the State DERA Grant Pi	list any other state websites		
Do you have any other comments or feedback?			
		Table 27. Subaward Reporting Requirements (if applicable)	·
Question		Please provide subaward information on the project and an explanation in Ansı	

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U. S. Environmental Protection Age DERA Grant Report Final Report: Financial and Narrative Sur				
Grant Recipient Grant Number Project Title DERA Program			Total EPA Funds Awarded Total Voluntary Cost Share Total Mandatory Cost Share Amount Total Project Costs (Fed. + Cost Share) Federal (EPA) Funds Expended to Date Federal (EPA) Funds Remaining	\$ \$ \$ \$ \$ \$ \$
Summaries of results of reviews of financial and programmatic reports.				
Summaries of findings from site visits and/or desk reviews to ensure effective subrecipient performance	е.			
Environmental results the subrecipient achieved				
Summaries of audit findings and related pass-througentity management decisions	h			
Actions the pass-through entity has taken to correct deficiencies such as those specified at 2 CFR 200.332 2 CFR 200.208 and the 2 CFR 200.339 Remedies for Noncompliance	,			

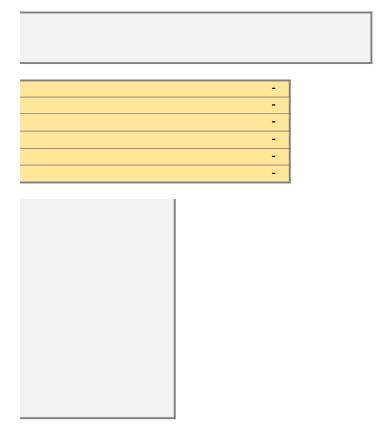
12. Final Report Page 183 of 211 EPA Form Number: 5900-691

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lescribed in the table.	
ated Outcomes	ACTUAL Results

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13. Data Dictionary Page 194 of 211 EPA Form Number: 5900-691

Engine Family Name (if unregulated, then NA):

Baseline Engine Fuel Type:

Total # of Propulsion Engines (per vessel; marine only):

Total # of Auxiliary Engines (per vessel; marine only):

13. Data Dictionary Page 195 of 211 EPA Form Number: 5900-691

Annual Amount of Fuel Used (gallons/year per engine):

Annual Usage Hours (hours per year per engine; includes idling hours; nonroad, locomotive, and marine only)

Annual Miles Traveled (miles per vehicle; on-highway only):

Annual Idling Hours (hours per engine; on-highway only):

Annual Hoteling Hours (hours per year per engine; class 8 long-haul combination only):

Remaining Life of Baseline Engine/Vehicle (years per engine; total # of years of engine life remaining at time of upgrade action):

Year of Upgrade Action:

Upgrade Type:

Upgrade Specific:

Class (onroad vehicles):

VIN for New Vehicle(s):

Total Cost per Unit (equipment cost plus labor):

Upgrade Equipment Cost only per unit:

Upgrade Labor Cost only per unit:

Total Federal Funds Expended per Unit (\$ Total Cost per Unit):

Federal Cost Share Expended per Unit (% Total Cost per Unit):

New Engine Model Year:

New Engine Tier (nonroad, locomotive, and marine only):

Tier 4 Standards (Tier 4 only):

New Engine After-Treatment Technology (Tier 4 nonroad only):

New Engine Horsepower:

New Engine Duty Cycle (line-haul locomotive only):

New Engine Cylinder Displacement (liters per cylinder per engine; marine only):

New Engine Total Displacement (liters per engine; marine only)

New Engine Number of Cylinders (per engine; marine only):

New Engine Family Name:

New Engine Fuel Type:

Annual Idling Hours Reduced (hours per vehicle; on-highway only):

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Annual Hoteling Hours Reduced (hours per vehicle; class 8 long-haul combination only):

New Annual Fuel Volume (estimated gallons/year per engine):

Capable of Bidirectional Charging? (if Battery Electric or Hybrid)

Estimated Range in Miles (for Onroad Battery Electric only)

Battery Capacity per Battery Packs (kWh) (for ZEV only)

Is the Battery Warranty Included? (for Battery Electric only)

Battery Warranty: Indicate Number of Years Covered (for Battery Electric only)

Battery Warranty: Indicate Number of Years Covered (for Battery Electric only)

Battery Warranty: Total kWh of battery discharge Covered by Warranty (for Battery Electric only)

Powertrain Warranty Included?

Powertrain Warranty: Number of Years

Powertrain Warranty: Number of Miles

Is the vehicle/equipment equipped with Telematics?

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

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

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Type of Charger

If Level 2, is it ENERGY STAR certified

EVSE Manufacturer

EVSE Model

EVSE Manufacture Year

Is the EVSE BABA Compliant?

EVSE Maximum Output Power (kW)

Number of Plugs on EVSE

Is the EVSE Capable of Bidirectional Charging?

Will the Bus and EVSE be Used for V2G?

EVSE Number of Units

EVSE Equipment Cost only Per Unit:

Total Federal Funds Expended Per EVSE Unit

Total Federal Funds Expended for EVSE

Date of EVSE Installation (mm/dd/yyyy)

State

County

City

Zip Code

Street Adress

Who owns the charger?

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)

Total Funds Expended Installation Cost

Total Federal Funds Expended Installation Cost

Does the Infrastructure Equipment Cost Include Installation?

Description of Installation Work

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Installation Wark darketers by an individual who meets the intrastructure electrician in the properties of the hardestature subjecte?

Total Federal Funds Expended Equipment and Installation

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Type of Shore Power Connection

Total Voltage Service Provided

Total Voltage Service Provided, if Not Listed

Manufacturer

Model

Manufacture Year

Typical Engine Tier of Vessels Using Shore Power

Fuel Type of Vessels Using Shore Power

Number of Annual Vessel Calls to Berth where Shore Power Installed

Number of Vessel Berths that can be served by Shore Power Pedestal

Maximum Output Power (kW)

Estimated Annual Total Energy Provided in MW-h

Number of Plugs per Shore Power Pedestal

Number of Shore Power Pedestals

State (select from dropdown)

County (select from dropdown)

City

Zip Code

Port Facility where Shore Power Installed

Who owns the Shore Power Infrastructure?

Total Funds Expended Installation Cost for Shore Power Group

Total Federal Funds Expended Installation Cost for Shore Power Group

Does the Infrastructure Equipment Cost Include Installation?

Description of Installation Work, including all equipment installed

Installation Work Performed By

Date Equipment Installed

Date Equipment Fully Operational

Is waiver being used to fulfill BABA compliance for this infrastructure?

Are the Shore Power Equipment, Housing, and all Accessories BABA Compliant?

If No, Partly Compliant, or Unsure, explain

Equipment Cost only Per Shore Power Pedestal:

Total Federal Funds Expended Per Shore Power Pedestal

Total Federal Funds Expended for All Shore Power Equipment (total # of pedestals x Federal Funds Expended/pedestal)

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Federal Cost Share Expended For Shore Power Equipment Federal Cost Share for Shore Power Installation

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EPA or its partners may contact me about participating in research opportunities to provide shore power data that could inform future transportation work. (Yes/No)

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

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

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tionary for support in completing tab 10 (Fleet Description).

JRRENT VEHICLE AND ENGINE UPGRADE INFORMATION

Basic Fleet Information

Enter the group name of the fleet.

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

If the vehicles are part of a public fleet or benefit the public (i.e. a private school bus company contracted by a public school; drayage vehicles that serve a port; private construction equipment contracted to a public works project, etc.) enter "Publicly", otherwise enter "Privately".

Enter the next four fields for each vehicle's place(s) of performance.

Enter the two letter postal code for the state in which the vehicle(s) will operate.

Enter the county in which the vehicle(s) will operate.

Enter the city in which the vehicle(s) will operate.

Enter the zip code which the vehicle(s) will operate.

Enter the percent of time the vehicle group operates in each zip code, if there is more than one. For example, 80% of time in 85310 and 20% of time in 85308.

Enter the vehicle type from the dropdown, OnRoad Vehicle, NonRoad Equipment, Locomotive, or Marine.

Select the target fleet from the dropdown menu.

Select from the dropdown menu the Vehicle/Equipment Class for onroad vehicles, as appropriate.

Using the drop down, enter the sector associated with the vehicle or engine group.

Select the vocation type from the dropdown menu.

Current Vehicle Information

Enter the Serial number or VIN number for each engine or vehicle

Enter the manufacturer of the existing vehicle

Enter the model of the existing vehicle

Enter the model year of the existing vehicle.

Current Engine Information

Enter the engine Serial # for each vehicle or engine to be scrapped/replaced.

Enter the manufacturer of the existing Engine.

Enter the model of the existing Engine.

Enter the model year of this engine set.

For REPOWERS AND UPGRADES ONLY, Select from the dropdown menu the Current Tier Level.

For tier 4 only engines, please use the drop down to indicate interim for final.

Enter the appropriate drop down for collection on emission control technologies for the current engine.

Enter the average horsepower of the engine/equipment.

Enter the engine displacement per cylinder in liters.

Enter the number of cylinders per engine.

Enter the engine displacement per cylinder in liters.

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Enter the Engine Family name of the existing Engine. NOTE: unregulated engines will not have an Engine Family Name. Engine Optional for Idle Reduction, Aerodynamic Technology, Low Rolling Resistance Tires, and Fuels projects.

Select the type of fuel that is currently being used (prior to any clean diesel activity change).

Enter the total number of propulsion engines on the vessel.

Enter the total number of auxiliary engines on the vessel.

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Current Annual Vehicle Data

Enter the amount of fuel used in gallons/year.

Enter the average number of hours the equipment is used per year.

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

Enter the average number of hours the vehicle idles per year.

Enter the average number of hoteling hours per year, per engine.

Enter the remaining life of baseline engine/vehicle in years at the time of the upgrade action

NEW VEHICLE AND ENGINE UPGRADE INFORMATION

Upgrade Information

Enter the year in which the upgrade will take place (i.e., if in 2010, you're replacing a 1995 bus with a 2007 bus, the upgrade year is 2010.)

Enter the type of upgrade that will take place from the dropdown menu.

Using the drop down, enter the specific type of upgrade that will take place during the project.

Using the drop down list provided, select the appropriate vehicle class (for onroad vehicles only).

Please enter the vehicle identification numbers for the new vehicle(s) being replaced.

Automated cell that will sum the upgrade equipment cost (row 55) and labor cost (row 56).

Enter the cost of the technology or equipment cost per unit.

Enter the cost of installing or labor cost of the technology per unit.

Enter the federal funds expended in dollars per unit.

Automated cell that will calculate the federal cost share based upon the federal funds expended entered in row 57.

New Engine Information

For REPLACEMENTS AND REPOWERS ONLY, Enter the model year of the new vehicle/engine.

For REPLACEMENTS, REPOWERS AND UPGRADES ONLY, Select from the dropdown menu the new Tier Level.

For tier 4 only engines, please use the drop down to indicate interim for final.

Enter the appropriate drop down for collection on emission control technologies for the new engine.

Enter the new horsepower of the engine or equipment.

Please enter the new engine duty cycle - for line-haul locomotive ONLY.

Enter the new engine displacement per cylinder in liters.

Select from the dropdown menu the displacement per cylinder in liters.

Enter the number of cylinders in the new engine.

For REPLACEMENTS AND REPOWERS ONLY, Enter the Engine Family Name of the new engine.

Select the type of fuel that is for the new engine or vehicle.

New Annual Vehicle Data

For IDLE REDUCTION STRATEGIES ONLY, Enter the average number of idling hours reduced for the engine.

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Enter the average number of hoteling hours per year, per engine.

Please enter the new annual fuel volume, in gallons. New Annual Fuel Volume should be from new engine efficiency, not changes in use.

Zero Emission Vehicle Data

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

Enter the estimated range in miles for the zero-emission vehicle.

Enter the battery capacity in kilowatt-hours for the zero-emission vehicle.

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

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

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

If the battery includes a warranty, indicate the total kWh of battery discharge the coverage is valid for.

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.

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.

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10. INFRASTRUCTURE

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.

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

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 the total Federal funds expend for charging equipment per unit.

No action - autopopulated

Enter the date on which the EVSE is permanently affixed.

Location of EV Infrastructure

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

Enter 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.

Select yes or no

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).

Infrastructure Installation Information

Enter the total installation costs for the charging equipment for the EV infrastructure group column.

Enter the total Federal funds expended for installation costs for the charging equipment for the EV infrastructure group column.

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.

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

Select electrician category

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

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

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re Power Equipment Information and Demand Overview

Select the type of shore power connection, either high-voltage (HVSC) or low-voltage (LVSC).

Select the total voltage provided from the dropdown menu, if listed.

Enter the total voltage service provided if the amount is not listed in the dropdown menu.

Enter the manufacturer of the shore power system.

Enter the model name of the shore power system.

Enter the year the shore power system was manufactured.

Select the typical engine tier of vessels using the shore power system.

Select the fuel type of vessels using the shore power system.

Enter the number of annual vessel calls per berth where the shore power system is installed.

Enter the number of vessel berths that can be served by the shore power system.

Enter the maximum power output of the shore power system, measured in kilowatts.

Enter the estimated total annual energy output of the shore power system in megawatt-hours.

Enter the number of available plugs per shore power pedestal installed.

Enter the total number of shore power pedestals installed.

Location of Shore Power Infrastructure

Select the state where the shore power system is installed.

Select the county where the shore power system is installed.

Enter the name of the city where the shore power system is installed.

Enter the zip code of the location where the shore power system is installed.

Enter the name of the port facility where the shore power system is installed.

Enter the name of the organization that owns the shore power system.

Installation Details

Enter the total cost for installation of the shore power system.

Enter the total amount of federal funds expended for installation of the shore power system.

Select whether or not the equipment cost includes installation of the shore power system.

Describe the work done during installation, including all equipment that became part of the installed shore power system.

List the name of the company (or companies) performing the installation of the shore power system.

Enter the date (or date range) the shore power system was installed.

Enter the date by which the shore power system became fully operational.

Select from the dropdown menu how BABA requirements are being met for the shore power project.

Select from the dropdown menu which parts of the shore power project are BABA compliant.

For the previous column, explain which parts are not compliant or enter N/A.

Shore Power Cost Summary

Enter the equipment cost for each shore power pedestal.

Enter the federal funds expended for the equipment in each shore power pedestal.

No action - autopopulated

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No action - autopopulated No action - autopopulated

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ptional Participation in Future Transportation Research

Select from the dropdown menu if EPA or its partners may contact you regarding shore power research. If you selected "Yes" for the previous column, please enter your name and e-mail.

Build America, Buy America Act (BABA) Implementation Procedures for EPA Office of Transportation and Air Quality Federal Finan

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