

Worksheet	Data Field	Location	Source
Details	Company's Name	F13	User-Selected
	Company's Street Address 1	F14	User-Entered
	Company's Street Address 2	F15	User-Entered
	Company's City / Town	F16	User-Entered
	Company's State / Locality / Jurisdiction	F17	User-Entered
	Company's Zip Code / Postal Code	F18	User-Entered
	Company's Country	F19	User-Entered
	Company's Phone Number	F20	User-Entered
	Designated Signatory's Name	F24	User-Selected
	Designated Signatory's Title	F25	User-Entered
	Designated Signatory's Department	F26	User-Entered
	Designated Signatory's Company	F27	User-Entered
	Designated Signatory's Signature Date	F28	User-Entered
	Point of Contact's Name	F32	User-Entered
	Point of Contact's Title	F33	User-Entered
	Point of Contact's Department	F34	User-Entered

	Point of Contact's Company	F35	User-Entered
	Point of Contact's Phone Number	F36	User-Entered
	Point of Contact's Email	F37	User-Entered
	Company's Name	L13	User-Entered
	Company's Street Address 1	L14	User-Entered
	Company's Street Address 2	L15	User-Entered
	Company's City / Town	L16	User-Entered
	Company's State / Locality / Jurisdiction	L17	User-Entered
	Company's Zip Code / Postal Code	L18	User-Entered
	Company's Country	L19	User-Entered
	Company's Phone Number	L20	User-Entered
	Designated Signatory's Name	L24	User-Entered
	Designated Signatory's Title	L25	User-Entered
	Designated Signatory's Department	L26	User-Entered
	Designated Signatory's Company	L27	User-Entered
	Designated Signatory's Signature Date	L28	User-Entered
	Point of Contact's Name	L32	User-Entered
	Point of Contact's Title	L33	User-Entered
	Point of Contact's Department	L34	User-Entered
	Point of Contact's Company	L35	User-Entered
	Point of Contact's Phone Number	L36	User-Entered
	Point of Contact's Email	L37	User-Entered
Transactions 1-2 Transactions 3-4 Transactions 5-6 Transactions 7-8 Transactions 9-10	Transaction Date	D5	User-Entered
	Transaction Type	E9, E32	User-Selected
	Initial Credit Amount	F9, F32	User-Entered
	Credit Type	G9, G32	User-Selected
	Apply to Shortfall	H9, H32	User-Selected
	Manufacturer - Earned	F12, F35	User-Selected
	Compliance Category - Earned	G12, G35	User-Selected
	Model Year - Earned	H12, H35	User-Selected

Actual Fuel Economy - Earned	G15, G38	User-Entered
Required Fuel Economy Standard - Earned	H15, H38	User-Entered
Manufacturer - Current	F18, F41	User-Selected
Compliance Category - Current	G18, G41	User-Selected
Model Year - Current	H18, H41	User-Selected
Manufacturer - Destination	F21, F44	User-Selected
Compliance Category - Destination	G21, G44	User-Selected
Model Year - Destination	H21, H44	User-Selected
Actual Fuel Economy - Destination	G24, G47	User-Entered
Required Fuel Economy Standard - Destination	H24, H47	User-Entered

NHTSA C

Version N

Data Type
List
Text (50 Char. Limit)
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Text (50 Char. Limit)
Text (50 Char. Limit)
Text (50 Char. Limit)
Date (mm/dd/yyyy)
List
Whole Number
List
List
List
List
List

Decimal Number (##.##)
Decimal Number (##.##)
List
List
List
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List
List
Decimal Number (##.##)
Decimal Number (##.##)

United States Department of Transportation
National Highway Transportation Safety Administration

CAFE Credit Transaction Template (OMB Control No. 2127-0019)
NHTSA Form Number 1475
49 CFR 536.8, 49 CFR 536.5(d)(6), and 49 CFR 536.7

Number: 2.4; Last Revision: 09/14/2022; Expiration Date: xxxxxxxxxx

Agency Message

This template meets the National Highway Traffic Safety Administration's (NHTSA's) regulatory requirements for submitting credit transaction instructions in accordance with 49 CFR 536.8, 49 CFR 536.5(d)(6), and 49 CFR 536.7. The template defines the data and data formats required by NHTSA's regulatory provisions. In accordance with 49 CFR 536.8, 49 CFR 536.5(d)(6), and 49 CFR 536.7, credit account holders are required to submit Joint Trade Instructions, Credit Allocation Plans, and Carryback Plans to NHTSA to initiate the debiting and crediting and resolution of CAFE credit deficits.

Paperwork Reduction Act Notice

The public reporting and recordkeeping burden for this collection of information is estimated to average 9 hours per response. Send comments on the Agency's estimate of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques, to the OMB control number in any correspondence, but do not send the completed documents.

Office of the Chief Information Officer
Office of the Secretary
1200 New Jersey Avenue, SE
Washington, DC 20590

Data Definition / Description

Select the Credit Holder's Company Name.

Enter the first line of the Credit Holder's Street Address.

Enter the second line of the Credit Holder's Street Address.

Enter the Credit Holder's City or Town.

Enter the Credit Holder's State, Locality, or Jurisdiction.

Enter the Credit Holder's Zip Code or Postal Code.

Enter the Credit Holder's Country.

Enter the Credit Holder's Phone Number.

Enter the Name of the Credit Holder's Designated Signatory.

Enter the Title of the Credit Holder's Designated Signatory.

Enter the Department of the Credit Holder's Designated Signatory.

Enter the Company Name of the Credit Holder's Designated Signatory.

Enter the Date the Credit Holder's Designated Signatory signed the agreement.

Enter the Name of the Credit Holder's Point of Contact.

Enter the Title of the Credit Holder's Point of Contact.

Enter the Department of the Credit Holder's Point of Contact.

Enter the Company Name of the Credit Holder's Point of Contact.

Enter the Phone Number of the Credit Holder's Point of Contact.

Enter the Email Address of the Credit Holder's Point of Contact.

Select the Credit Receiver's Company Name.

Enter the first line of the Credit Receiver's Street Address.

Enter the second line of the Credit Receiver's Street Address.

Enter the Credit Receiver's City or Town.

Enter the Credit Receiver's State, Locality, or Jurisdiction.

Enter the Credit Receiver's Zip Code or Postal Code.

Enter the Credit Receiver's Country.

Enter the Credit Receiver's Phone Number.

Enter the Name of the Credit Receiver's Designated Signatory.

Enter the Title of the Credit Receiver's Designated Signatory.

Enter the Department of the Credit Receiver's Designated Signatory.

Enter the Company Name of the Credit Receiver's Designated Signatory.

Enter the Date the Credit Receiver's Designated Signatory signed the agreement.

Enter the Name of the Credit Receiver's Point of Contact.

Enter the Title of the Credit Receiver's Point of Contact.

Enter the Department of the Credit Receiver's Point of Contact.

Enter the Company Name of the Credit Receiver's Point of Contact.

Enter the Phone Number of the Credit Receiver's Point of Contact.

Enter the Email Address of the Credit Receiver's Point of Contact.

Enter the Date of the Transaction.

Select the Transaction Type from the dropdown list.

Enter the initial credit amount of the transaction.

Select the Credit Type from the dropdown list.

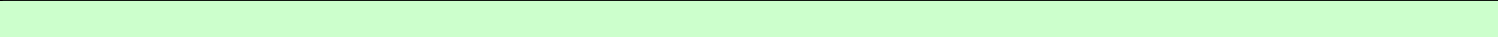
Select "Yes" if the transaction applies credits to an existing CAFE credit shortfall, select "No" if not.

Select the Manufacturer who earned the credits from the dropdown list.

Select the Compliance Category in which the credits were earned from the dropdown list.

Select the Compliance Model Year in which the credits were earned from the dropdown list.

If the transaction applies credits to an existing CAFE credit shortfall, enter the Fleet Average Fuel Economy of the fleet (i.e. manufacturer/com earned the credits.
If the transaction applies credits to an existing CAFE credit shortfall, enter the Fleet Average Fuel Economy Standard of the fleet (i.e. manufa year) that earned the credits.
Select the Manufacturer who currently holds the credits from the dropdown list.
Select the Compliance Category in which the credits are currently held from the dropdown list.
Select the Model Year in which the credits are currently held from the dropdown list.
Select the Manufacturer who will be receiving the credits from the dropdown list.
Select the Compliance Category that will be receiving the credits from the dropdown list.
Select the Model Year that will be receiving the credits from the dropdown list.
If the transaction applies credits to an existing CAFE credit shortfall, enter the Fleet Average Fuel Economy of the fleet (i.e. manufacturer/com earned the shortfall.
If the transaction applies credits to an existing CAFE credit shortfall, enter the Fleet Average Fuel Economy Standard of the fleet (i.e. manufa year) that earned the shortfall.



49 CFR 536.5(b)(1)
49 CFR 536.8(a)
49 CFR 536.5(b)(1)
49 CFR 536.8(a)
49 CFR 536.5(b)(1)
49 CFR 536.8(a)
49 CFR 536.5(b)(1)
49 CFR 536.8(a)
49 CFR 536.5(b)(1)
49 CFR 536.8(a)
49 CFR 536.5(b)(1)
49 CFR 536.8(a)
49 CFR 536.5(b)(1)
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49 CFR 536.8(a)
49 CFR 536.5(b)(1)
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49 CFR 536.8(a)
49 CFR 536.5(b)(1)
49 CFR 536.8(a)
49 CFR 536.5(b)(1)
49 CFR 536.8(a)
49 CFR 536.5(b)(1)
49 CFR 536.8(a)
49 CFR 536.5(b)(1)
49 CFR 536.8(a)
49 CFR 536.8(a)
49 CFR 536.8(b)
49 CFR 536.8(a)
49 CFR 536.8(b)
49 CFR 536.8(a)
49 CFR 536.8(b)
49 CFR 536.4(c)
49 CFR 536.8(a)
49 CFR 536.8(b)
49 CFR 536.8(a)
49 CFR 536.8(b)
49 CFR 536.8(a)
49 CFR 536.8(b)
49 CFR 536.8(a)
49 CFR 536.8(b)

49 CFR 536.4(c)
49 CFR 536.4(c)
49 CFR 536.8(a) 49 CFR 536.8(b)
49 CFR 536.8(a) 49 CFR 536.8(b)
49 CFR 536.8(a) 49 CFR 536.8(b)
49 CFR 536.8(a) 49 CFR 536.8(b)
49 CFR 536.8(a) 49 CFR 536.8(b)
49 CFR 536.8(a) 49 CFR 536.8(b)
49 CFR 536.8(a) 49 CFR 536.8(b)
49 CFR 536.4(c)
49 CFR 536.4(c)

United States Department of Transportation
National Highway Transportation Safety Administration

NHTSA CAFE Credit Transaction Template (OMB Control No. 2127-0019)
NHTSA Form Number 1475
49 CFR 536.8, 49 CFR 536.5(d)(6), and 49 CFR 536.7

Version Number: 2.4; Last Revision: 09/14/2022; Expiration Date: xxxxxxxxxx

TRANSACTION DETAILS

Is This a Trade?

Number of Transactions

(Select No. of Transactions)

Credit Holder

0

Company

Name:
Street Address 1:
Street Address 2:
City / Town:
State / Locality / Jurisdiction:
Zip Code / Postal Code:
Country:
Phone Number:

(Select Manufacturer)

Designated Signatory

Name:
Title:
Department:
Company:
Signature Date: (mm-dd-yyyy)

Point of Contact

Name:
Title:
Department:
Company:
Phone Number:
Email:

United States Department of Transportation
National Highway Transportation Safety Administration

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Transaction Date
(mm/dd/yyyy)

Page 1

Transaction No.	Transaction Type	Initial Credit Amount	Credit Type	Apply to Shortfall?
1				

(Select Type of Credits)

(Select Yes or No)

Transaction No.	Transaction Type	Initial Credit Amount	Credit Type	Apply to Shortfall?
2				

(Select Transaction Type)

(Select Type of Credits)

(Select Yes or No)

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Transaction Date
(mm/dd/yyyy)

Page 2

Transaction No.	Transaction Type	Initial Credit Amount	Credit Type	Apply to Shortfall?
3				

(Select Type of Credits)

(Select Yes or No)

Transaction No.	Transaction Type	Initial Credit Amount	Credit Type	Apply to Shortfall?
4				

(Select Transaction Type)

(Select Type of Credits)

(Select Yes or No)

NHTSA CAFE Credit Transaction Template (OMB Control No. 2127-0019)
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Transaction Date
(mm/dd/yyyy)

Page 3

Transaction No.	Transaction Type	Initial Credit Amount	Credit Type	Apply to Shortfall?
5				

(Select Type of Credits)

(Select Yes or No)

Transaction No.	Transaction Type	Initial Credit Amount	Credit Type	Apply to Shortfall?
6				

(Select Transaction Type)

(Select Type of Credits)

(Select Yes or No)

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Version Number: 2.4; Last Revision: 09/14/2022; Expiration Date: xxxxxxxxxx

Transaction Date
(mm/dd/yyyy)

Page 4

Transaction No.	Transaction Type	Initial Credit Amount	Credit Type	Apply to Shortfall?
7				

(Select Type of Credits)

(Select Yes or No)

Transaction No.	Transaction Type	Initial Credit Amount	Credit Type	Apply to Shortfall?
8				

(Select Transaction Type)

(Select Type of Credits)

(Select Yes or No)

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Transaction Date
(mm/dd/yyyy)

Page 5

Transaction No.	Transaction Type	Initial Credit Amount	Credit Type	Apply to Shortfall?
9				

(Select Type of Credits)

(Select Yes or No)

Transaction No.	Transaction Type	Initial Credit Amount	Credit Type	Apply to Shortfall?
10				

(Select Transaction Type)

(Select Type of Credits)

(Select Yes or No)

JOINT TRADE INSTRUCTIONS

OMB Control No. 2127-0019

Credit Holder
(Select Manufacturer)
0
0
'
() -

Credit Receiver
(Select Manufacturer)
0
0
'
() -

December 30, 1899

Jeffrey Giuseppe
Associate Administrator for Enforcement
National Highway Traffic Safety Administration
1200 New Jersey Avenue, SE
Washington, DC 20590

Subject: CAFE Credit Trade Agreement

Dear Mr. Giuseppe,

This letter is to inform the National Highway Traffic Safety Administration (NHTSA) that (Select Manufacturer) and (Select Manufacturer) are submitting this Credit Trade Agreement as joint CAFE credit trading instructions to NHTSA in accordance with 49 CFR Part 536.8. This joint instruction requests that NHTSA transfer certain credits from (Select Manufacturer)'s CAFE credit account(s) with NHTSA to (Select Manufacturer)'s CAFE credit account(s) with NHTSA as specified in the attached Credit Transaction Request.

(Select Manufacturer) affirms the current CAFE credit balance(s) in its account(s) are sufficient to support this transaction. (Select Manufacturer) and (Select Manufacturer) acknowledge the following:

49 CFR Part 536.8(f)

If NHTSA determines that a manufacturer has been credited, through error or fraud, with earning credits, NHTSA will cancel those credits if possible. If the manufacturer credited with having earned those credits has already traded them when the error or fraud is discovered, NHTSA will hold the receiving manufacturer responsible for returning the same or equivalent credits to NHTSA for cancellation.

49 CFR Part 536.8(g)

In general, all trades are final and irrevocable once executed, and may only be reversed by a new, mutually-agreed transaction. If NHTSA executes an erroneous instruction to trade credits from one holder to another through error or fraud, NHTSA will reverse the transaction if possible. If those credits have been traded away, the recipient holder is responsible for obtaining the same or equivalent credits for return to the previous holder.

JOINT TRADE INSTRUCTIONS

OMB Control No. 2127-0019

Accordingly, we request that NHTSA accept this joint instruction and process the transaction as appropriate in accordance with 49 CFR Part 536.8.

Regards,

Signature: _____

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December 30, 1899

Signature: _____

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December 30, 1899

If you have additional instructions, guidance, questions, or comments please contact the appropriate point of contact provided below.

Credit Holder Point of Contact

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Credit Receiver Point of Contact

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Enclosure(s)