**FY 2021-22 AB 2766 EMISSION REDUCTION GRANT PROGRAM**

**EV REPLACEMENT INCENTIVE PROGRAM**

**APPLICATION**

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**24580 SILVER CLOUD COURT**

**MONTEREY, CALIFORNIA 93940**

**TELEPHONE: 647-9411; FAX 647-8501**

**APPLICATION SUBMITTAL**

Please submit this entire document as your application. All submittals must be sent electronically and be received before the due date of ***June 18, 2021, 4:00PM.*** All applications must be submitted in the original file format (except the cover letter), ***DO NOT SEND PDF FILES.*** Send all correspondence to Alan Romero, [aromero@mbard.org](mailto:aromero@mbard.org), 831.718.8030

**APPLICATION INSTRUCTIONS**

**The EV replacement incentive program is limited to one (1) vehicle per agency with a recommended cap of $10K. New vehicles may be purchased or leased (minimum of 2 years required). Certified used vehicles may be purchased with a funding cap of $7500 (remaining battery life must be disclosed at time of purchase). Match funds are required for eligibility (see Table 1 below). The EV Voucher Incentive Replacement Program is funded under the Clean Air Management Program budget allocation. If there are available and un-obligated funds in FY 2021-22, EV vouchers may be awarded for other baseline vehicles your agency plans to replace within FY 2021-22.**

At a minimum, the grant voucher application must have the following components:

1. **Cover letter**: The letter shall include the name, title, mailing address, email address and signature of the person with signatory authority for the applicant agency.
2. **Introduction**: Provide an overview of the EV replacement project. Identify the EV replacement vehicle and cost, as well as the vehicle to be replaced (make, model and year). Also include the grant applicant contact person, their name, title, mailing address, email address and phone number. If more than one baseline vehicle is listed in the application, please identify which replacement vehicles would be purchased or leased.
3. **Project Information:** Provide all information requested in Table 1 for the baseline vehicle and the replacement vehicle.

**Table 1: Project Information**

|  |  |
| --- | --- |
| **Baseline Vehicle Data:** | **Vehicle 1** |
| Vehicle Model Year: |  |
| Vehicle Make: |  |
| Vehicle Model: |  |
| VIN: |  |
| License Plate: |  |
| Annual Vehicle Miles: |  |
| Fuel Type: |  |
| Vehicle disposition after replacement: |  |
|  |  |
| **Replacement Vehicle Data:** |  |
| Vehicle Model Year: |  |
| Vehicle Make: |  |
| Vehicle Model: |  |
| Dealer Name: |  |
| Dealer Location: |  |
| Vehicle cost (MSRP is acceptable): |  |
| Fees: |  |
| Taxes: |  |
| Other costs as applicable: |  |
|  |  |
|  |  |
| Charge Station Available? (Y/N) |  |
| Match funds available for Charge Station(s)? (Y/N) |  |
| Estimated match funds committed by applicant: (Match funds may be used for in-kind administrative or other material costs) |  |

4**. Please complete Table 2 below if applicable:**

**Table 2. Additional Fleet Vehicles for Replacement**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Baseline Vehicle Data:** | **Vehicle 1** | **Vehicle 2** | **Vehicle 3** | **Vehicle 4** |
| Vehicle Model Year: |  |  |  |  |
| Vehicle Make: |  |  |  |  |
| Vehicle Model: |  |  |  |  |
| VIN: |  |  |  |  |
| License Plate: |  |  |  |  |
| Annual Vehicle Miles: |  |  |  |  |
| Fuel type |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Baseline Vehicle Data:** | **Vehicle 5** | **Vehicle 6** | **Vehicle 7** | **Vehicle 8** |
| Vehicle Model Year: |  |  |  |  |
| Vehicle Make: |  |  |  |  |
| Vehicle Model: |  |  |  |  |
| VIN: |  |  |  |  |
| License Plate: |  |  |  |  |
| Annual Vehicle Miles: |  |  |  |  |
| Fuel type |  |  |  |  |