

2023 Clean Diesel Rebate ProgramRequest for Reimbursement: Irrigation Engine

Rebate R	ecipient: _													
Recipient	Address:_	Chroot				City				State		7:		
		Street				City				•	Zip			
Email add	iress:	Phone Number:												
SECTION	1. NEW	MOTOR 8	k INST	ALLATION	(recip	ient m	ust tak	e d	elivery a	and install	prio	r to submitt	ing this	s form)
Electric N	ufacturer:		Electric Motor Model				del:							
Serial Nu											Horsepower			
Dealersh	ip Name:					Address:								
City:						5	State:				Zip	Code:		
Contact Name:				Phone Number:				ı	Email:					
Motor Cost:			Other Eq &Installat						Tota			Cost:		
SECTION	N 2. ELEC	TRICAL P	PANEL	. & WIRING	то м	ото	R (if w	vor	k done	by diffe	eren	t vendor t	han a	ıbove)
Installer I					Addre	ess:								
City:						Stat	e:				Z	ip Code:		
Contact Name:				Phone Number:				-	Email:					
				Cost of oth	er ele	ctrica	equip	ome	ent, wir	ing, and	labo	r:		
SECTION	N 3. ELEC	TRIC UTII	LITY C	OSTS										
Electric S	Service Pro	ovider:												
Distance Service Line Extended:						Cost per F				Т	otal:			
Equipme		Total Cost from Ut							m Utility:					
Amount of Electric Service Provider Incentive:			Net					Service Extension Cost:						
SECTION	N 4. TOTA	L PROJE	ст сс	ST AND RE	EBAT	E RE	QUES	TE	D					
Total Pro	oject Cost	(equipme	ent, ins	tallation, and	d utilit	y serv	rice ex	ĸter	nsion):					
	Amount Rootal Project			20,000)						1				

SECTION 5. PAYMENT INFORMATION REQUIRED								
The following proof of payment items must be attached to this form:								
Copies of all paid invoices for equipment purchase, installation, and utility service line extension								
Copies of proof of payment (e.g. cancelled check front and back, credit card payment receipt, or bank statement showing check was cashed)								
Photos of the wellsite, new motor and other equipment, and motor serial number plate (if applicable)								
Completed IRS W-9 form								
Completed EPA MBE/WBE Utilization form								
SECTION 6. SCRAPPAGE REQUIREMENTS								
The diesel engine being replaced must be scrapped or rendered permanently disabled within 90 days of replacement and prior to the submission of this reimbursement request to NDEE by:								
Cutting, drilling, or punching a 3" by 3" hole completely through the wall of the engine block.								
Proof of Scrappage: Proof of scrappage must be provided with this form. The following documentation is required:								
 Nebraska Clean Diesel Program Certification of Engine Scrappage form signed by the party responsible for scrapping the engine and by the rebate recipient, and including: The name and address of the dismantler Identification of the old engine including model year, and engine serial number The dates the engine was accepted and scrapped by the dismantler. 								
☐ Photographs of the following:								
 The engine labels that include: a. Engine serial number b. EPA Engine Family identifier Engine block, prior to hole being cut Engine block, after hole has been cut Other photos as needed 								
Scrappage may be completed by the rebate recipient or by a salvage yard, or similar service, provided all scrappage requirements have been met and all necessary documentation is provided. The rebate recipient is responsible for ensuring that the required scrappage photographs are acquired and submitted. Equipment and components that are not part of the engine may be salvaged from the unit being replaced. If scrapped or salvaged parts are to be sold, the resulting income may be retained by the rebate recipient but must be reported to NDEE as program income.								
Salvage Income: \$								



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SECTION 7: ADDITIONAL INFORMATION Please explain any problems or unusual circumstances or expenses you encountered in completing your project.

I hereby certify that the expenses requested for reimbursement are in accordance with the project agreement and that complete and accurate records are being kept to document such expenses. I further acknowledge that an inspection by NDEE, verifying the equipment was purchased in accordance with the project agreement, may be required before reimbursement is approved. Print Name of Authorized Representative Title of Authorized Representative Date Signed

Submit the original signed Request for Reimbursement form and a copy of all supporting documentation to:

Nebraska Clean Diesel Rebate Program
Nebraska Department of Environment and Energy
P.O. Box 98922
Lincoln NE 68509-8922
NDEE.AirQuality@nebraska.gov

Questions? Please call (402) 471-4272 or email us at NDEE.AirQuality@nebraska.gov