**Section 1 – Applicant Information**

Organization/Company Name:

Project Manager (if different from authorized signatory):

Address:

City State Zip Code

Email address:       Phone:

DUNS Number:       County in which trucks operate:

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| **Section 2 – Original Vehicle Information** | **Truck 1** | | **Truck 2** |
| Vehicle Identification Number (VIN) |  | |  |
| Nebraska Vehicle Registration Number |  | |  |
| Nebraska License Number |  | |  |
| Truck Unit Number |  | |  |
| Current odometer reading |  | |  |
| Vehicle manufacturer |  | |  |
| Vehicle model |  | |  |
| Vehicle model year |  | |  |
| Date of most recent US DOT inspection |  | |  |
| Gross Vehicle Weight Rating |  | |  |
| Engine manufacturer |  | |  |
| Engine model |  | |  |
| Engine model year |  | |  |
| Engine EPA Family |  | |  |
| Engine horsepower |  | |  |
| Fuel Type |  | |  |
| Annual Fuel Consumption\* |  | |  |
| Annual Hours Idling\* |  | |  |
| Current odometer reading |  | |  |
| Annual number of miles traveled\* |  | |  |
| Percentage of miles in residential areas\* |  | |  |
| Remaining years of service (estimate; minimum 3 years)\* | |  |  |
| **\* Please provide values that are as accurate as possible to provide a basis for scoring your application.** | | | |

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| **Section 3 – Bid Information: Provide summary information from the dealer’s quote or bid in the fields below. Please attach bid/quote to the application.** | | | |
| **Vendor:** | | **Engine Manufacturer:** | |
| **Truck Manufacturer:** | | **Engine Model:** | |
| **Truck Model:** | | **Fuel:**  **CNG**  **Diesel** | |
| **Truck Gross Vehicle Weight:** | | **Engine Horsepower:** | |
| **Purchase Price:** | |  | |
| **Other details:** | | | |
| **Section 4 – Rebate Amount Requested** | | | |
| **Vehicle Cost:** | **Rebate Amount Requested:**  CNG: 35% of base cost, maximum $120,000 per truck;  DIESEL: 25% of base cost, maximum $70,000 per truck. | | **Cost-Share Amount:**  (Vehicle Cost – Rebate Amount) |

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| **Section 5 – Attachments.** | |
| **Submit all of the following items along with this application form:** | |
|  | Photocopy of the Nebraska vehicle registration for each truck being replaced. |
|  | Photocopy of the Nebraska vehicle title for each truck being replaced. |
|  | Documentation of truck annual mileage for the previous two years. |
|  | Documentation of the most recent US DOT inspection for each truck. |
|  | Landfill/transfer station tickets or records for the previous two years demonstrating usage. |
|  | Photographs (side profile) of the truck(s) being replaced showing the vehicle unit identifying number. |
|  | Photographs of the diesel engine emissions labels showing the EPA Engine Family. |
|  | One bid or price quote for each of the replacement truck(s), including estimated delivery dates. |

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| **Section 6 – Applicant Certification** | | |
| ***Owner or Authorized Representative***: I certify to the best of my knowledge that: (check all agreed to) | | |
|  | The information contained herein is true and correct. | |
|  | The applicant has owned and operated the truck(s) during the two years prior to this application. | |
|  | The truck(s) being replaced is/are currently operational, in proper working condition, and currently used to haul refuse. If selected for an award, the new truck(s) will perform this same function. | |
|  | Each truck has driven at least 7,000 miles each year during the two years prior to this application. | |
|  | Each truck has at least three years of remaining life at the time of this application. | |
|  | If selected for an award, the applicant will maintain ownership of the replacement vehicle(s) for at least five years from the date of purchase. I understand that if the replacement vehicle is sold before the end of the five-year period or used for purposes other than specified in the conditions of this rebate program, the organization/company may be required to return up to the full amount of the rebate to NDEE. The amount required to be returned is at the discretion of NDEE and will be determined on a case-by-case basis. | |
|  | The applicant is either headquartered or has an operational base in Nebraska and the new truck(s) will continue to operate in Nebraska. | |
|  | The truck(s) to be replaced will be properly disposed of in accordance with the requirements of this program. | |
|  | I understand that any costs that are incurred before the project period begins and after the project period ends will not be eligible for reimbursement. | |
|  | I am not currently debarred or suspended from receiving federal funding. | |
|  | I have the legal authority to sign this application. | |
|  | I acknowledge that failure to provide all applicable information and supporting documentation may result in the denial of my application. | |
|  | | |
| Printed Name and Title of Authorized Representative | | |
|  | |  |
| Signature | | Date |

Mail or e-mail application to:

Nebraska Clean Diesel Rebate Program

Nebraska Department of Environment and Energy

P.O. Box 98922

Lincoln NE 68509-8922

[NDEE.AirQuality@nebraska.gov](mailto:NDEE.AirQuality@nebraska.gov)