

**APPLICATION FORM A: CLEAN FLEET INITIATIVE GENERAL INFORMATION SHEET**

Thank you for your interest in H-GAC’s Clean Fleets Initiative. Please provide contact and project information in the spaces below.

**APPLICANT CONTACT INFORMATION**

Legal Organizational Name:	Assigned CFI # (Office Use Only):
Project Manger Contact:	Title:
Email:	Mailing Address:
Phone:	Mailing City, State, Zip:
Fax:	Physical Address:
Organization Website:	Physical City, State, Zip:
Organization EIN:	Organization DUNS Number:

**APPLICANT ASSISTANT’S CONTACT INFORMATION – If a consultant or other 3<sup>rd</sup> party has provided assistance to the applicant in submitting this application, their contact information should be included here.**

Assistant Organization:	Relation to Applicant:
Assistant Contact:	Title:
Email:	Mailing Address:
Phone:	Mailing City, State, Zip:
Fax:	Physical Address:
Organization Website:	Physical City, State, Zip:

**VENDOR CONTACT INFORMATION – Other parties which will be providing products, services, or other significant aid during the course of the project(s) included in the application. Attach additional sheets as necessary.**

Vendor Company:	Vendor Website:
Contact:	Title:
Email:	Address:
Phone:	City:
Fax:	Zip:

This application is for the following (check all that apply):

- Clean Vehicles Program
- Clean Machines Program
- Clean Technologies Program

**DRAFT VERSION**

What is the anticipated timeline of your project(s)?

- My goal is to begin implementing this project in less than 3 months
- My goal is to begin implementing this project in 3-6 months
- My goal is to begin implementing this project in 6-12 months
- My goal is to begin implementing this project in greater than 12 months
- I don't have any set time constraints or preferences

What are the total costs involved, and how do you anticipate the costs will be covered?

If you will be seeking additional grants or tax incentives to help fund your project, please list the source(s), type(s), and the amount you hope to receive (i.e. IRS, Qualifying Alternative Fuel Vehicle Tax Credit, \$12,000):

Source 1:	Type 1:	Amount 1:
Source 2:	Type 2:	Amount 2:
Source 3:	Type 3:	Amount 3:

Have you applied to/participated in the H-GAC Clean Fleets Initiative, or any of its predecessor programs (Alternative Fuel Vehicles Program, Clean Vehicles Program, Adopt-A-School-Bus, Clean School Bus Program) within the last ten years? If so, please list the project(s) submitted and/or completed:

<b>Program Applied To</b>	<b>Application Date</b>	<b>Project Number (if applicable)</b>	<b>Brief Project Description</b>	<b>Grant Received</b>