

Rebate Grants Program

Project Application Form

TCEQ-20332

Version 13.01



1. Applications with altered language or forms will be void.
2. Applications are selected for funding on a first-come-first-served basis.
3. Only one vehicle or piece of equipment is allowed per application. Separate applications are required for each additional vehicle or piece of equipment up to a maximum of 10 applications.
4. All applications will include: Form TCEQ-20332 (this form), and ONE of the following Forms: Form 20332(a) Replacement or Form 20332(b) Repower.

ELIGIBLE COUNTIES

Austin Area (Bastrop, Caldwell, Hays, Travis, and Williamson Counties)

Beaumont-Port Arthur Area (Hardin, Jefferson, and Orange Counties)

Corpus Christi Area (Nueces and San Patricio Counties)

Dallas-Ft. Worth Area (Collin, Dallas, Denton, Ellis, Hood, Johnson, Kaufman, Parker, Rockwall, Tarrant, and Wise Counties)

Houston-Galveston-Brazoria Area (Brazoria, Chambers, Fort Bend, Galveston, Harris, Liberty, Montgomery, and Waller Counties)

San Antonio Area (Bexar, Comal, Guadalupe, and Wilson Counties)

Tyler-Longview Area (Gregg, Harrison, Rusk, Smith, and Upshur Counties)

Victoria Area (Victoria County)

Application Deadline:

Rebate applications will be accepted until 5 p.m. Central Time on June 28, 2013, subject to the criteria in the Notice of Rebate Grant (NRG)

Texas Commission on Environmental Quality
Air Quality Division
Implementation Grants Section (Rebate), MC-204
P.O. Box 13087
Austin, TX 78711-3087

www.terpgrants.org

TCEQ USE ONLY
Application #

TCEQ USE ONLY
Contract #

Texas Commission on Environmental Quality (TCEQ)
Texas Emissions Reduction Plan (TERP)
Rebate Grant Application
Form 1: Signature Page

1. Applicant/Company Legal Name:

(Applicant/Company Legal Name for Contracting Purposes)

2. Primary Area for the Project: Please only check one.

Austin Area (Bastrop, Caldwell, Hays, Travis, and Williamson Counties):	
Beaumont-Port Arthur Area (Hardin, Jefferson, and Orange Counties):	
Corpus Christi Area (Nueces and San Patricio Counties):	
Dallas-Ft. Worth Area (Collin, Dallas, Denton, Ellis, Hood, Johnson, Kaufman, Parker, Rockwall, Tarrant, and Wise Counties):	
Houston-Galveston-Brazoria Area (Brazoria, Chambers, Fort Bend, Galveston, Harris, Liberty, Montgomery, and Waller Counties):	
San Antonio Area (Bexar, Comal, Guadalupe, and Wilson Counties):	
Tyler-Longview Area (Gregg, Harrison, Rusk, Smith, and Upshur Counties):	
Victoria Area (Victoria County):	

3. Authorized Official: Applicant or an employee of the applicant authorized to apply for the grant.

I hereby certify that to the best of my knowledge and belief all information provided in this application and any attachments is true and correct. If the application was prepared by a third party, I certify that I have read the complete application after all forms and information were completed, I agree with the information provided, and the date provided below is the date I signed the form. I further understand that prior to incorporating this information into a grant contract the data and information may be revised by the TCEQ for accuracy and that the acceptance of a grant contract will constitute agreement with those revisions. Failure to sign the application or signing it with a false statement may make the submitted offer or any resulting contracts voidable.

Signature of Authorized Official:	
<i>PLEASE SIGN IN BLUE INK. Faxed or photocopied signature pages will not be accepted. The application, with an original signature, must be received by the application deadline or the application will not be accepted.</i>	
Printed Name of Authorized Official:	
Authorized Official's Title:	
Date of Signature (must be the date the form was signed in blue ink):	

Intentional falsification of these forms will be prosecuted to the extent allowed under the law and may be used as an adverse factor in future grant selection decisions.

If you have questions on how to fill out this form or about the Texas Emissions Reduction Plan (TERP) program, please contact us at 1-800-919-TERP (8377).

Upon submission, all proposals become the property of the State of Texas and as such become subject to the Texas Public Information Act, V.T.C.S. art. 6252-17a.

Personal Information Policy: Individuals are entitled to request and review their personal information that the agency gathers on its forms. Individuals may also have any errors in their information corrected. To review such information, contact the TCEQ TERP program at 1-800-919-TERP (8377).

Do NOT alter forms. Altered forms will be void.

This form is only valid for the application period ending June 28, 2013.

Rebate Grant Application

Form 2: Third-Party Preparer Signature Page

Was this application prepared by a third party, including a consultant, dealer, or other person not employed by the applicant? (Mark the appropriate box with an X.)

Yes:	<input type="checkbox"/>	No:	<input type="checkbox"/>
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If "yes" then the preparer must complete and sign below. The form must be submitted with an ORIGINAL signature.

I hereby certify that to the best of my knowledge and belief all information provided in this application and any attachments is true and correct, as represented to me by the applicant. I understand that failure to sign the application or signing it with a false statement may make the submitted offer or any resulting contracts voidable.

Signature of Third-Party Preparer: (Please sign and date in BLUE ink)	
Printed Name (include Mr. or Ms.):	
Title:	
Company Name:	
Address:	
Phone Number:	
E-Mail Address:	
Date of Signature (in ink):	

Intentional falsification of these forms will be prosecuted to the extent allowed under the law and may be used as an adverse factor in future grant approval decisions for applications involving the third-party preparer.

**Rebate Grant Application
Form 3: Activity Information**

1. Activity Type. (Mark with an "X" the type of form attached.)

Supplemental Application Form Attached (Mark only one)	
Replacement (Form 20332a):	<input type="checkbox"/>
Repower (Form 20332b):	<input type="checkbox"/>

2. Emission Source. (Mark the appropriate Emission Source box with with an "X".)

On-Road Vehicle:	<input type="checkbox"/>
Non-Road Equipment:	<input type="checkbox"/>

3. Activity Life. (Mark the appropriate box with an "X".)

5 Years:	<input type="checkbox"/>	7 Years:	<input type="checkbox"/>
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4. Waiver of eligibility requirements. Waiver requests must be in writing in accordance with the instructions in Appendix G of the NRG.

A. Have you submitted a waiver request prior to submitting the application? (Mark the appropriate box with an "X".)			
No:	<input type="checkbox"/>	Yes:	<input type="checkbox"/>
If Yes, enter the control number assigned to your request (if known):		<input type="text"/>	
B. Are you submitting a waiver request with the application? (Mark the appropriate box with an "X".)			
No:	<input type="checkbox"/>	Yes:	<input type="checkbox"/>
If YES, attach a written waiver request in accordance with the instructions in Appendix G of the NRG.			

5. Other Grant Applications. Has the vehicle or equipment been included in a previous grant application to the TCEQ?

No:	<input type="checkbox"/>	Yes:	<input type="checkbox"/>
If Yes, enter the name of the TERP Grant previously applied for:		<input type="text"/>	
Date Applied:		<input type="text"/>	

6. Has purchase or repower already been acquired? (Mark the appropriate box with an "X".)

No:	<input type="checkbox"/>	Yes:	<input type="checkbox"/>
If Yes, enter the acquisition or repower completion date:		<input type="text"/>	

7. Is the Applicant a Small Business? (Refer to the NRG for definition of small business.)

No:	<input type="checkbox"/>	Yes:	<input type="checkbox"/>
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Rebate Grant Application
Form 4: Contact Information

1. Authorized Official: Applicant or an employee of the applicant authorized to apply for the grant.

Name and Title:									
Prefix:		First:		MI:		Last:		Suffix:	
Title:									
Mailing Address:									
Street Line 1:									
Street Line 2:									
City:		State:		Zip code:					
Physical Address: (For express delivery of legal documents)									
Street Line 1:									
Street Line 2:									
City:		State:		Zip code:					
Primary Phone:				Secondary Phone:					
Fax Number:				E-Mail Address:					

2. Designated Project Representative: Mark the box with an "X" if the Designated Project Representative is the same as Authorized Official.
Note: if they are the same, you do not need to complete the Designated Project Representative information.

Name and Title:									
Prefix:		First:		MI:		Last:		Suffix:	
Title:									
Mailing Address:									
Street Line 1:									
Street Line 2:									
City:		State:		Zip code:					
Physical Address: (For express delivery of legal documents)									
Street Line 1:									
Street Line 2:									
City:		State:		Zip code:					
Primary Phone:				Secondary Phone:					
Fax Number:				E-Mail Address:					

3. Designated Location for Records Access and Review by the TCEQ or its Representative:
(Must be a Physical Address)

Street Line 1:									
Street Line 2:									
City:		State:		Zip code:					

Rebate Grant Application

Supplemental Form 1: General Certifications

This section serves to assure the TCEQ that you understand and agree to the statements. These provisions relate to the basic contract form which will be in force between the applicant and the TCEQ upon award of a grant. TCEQ urges applicants to download a copy of the example grant contract from www.terpgrants.org and review it so that any questions can be discussed early in the application review process. By signing this application, the applicant assures and certifies that:

1. **Legal Authority.** It possesses legal authority in the State of Texas to apply for the grant and that the applicant's governing body has authorized the filing of the application, including all understandings and assurances contained therein, and directing and authorizing the person identified as the authorized official to act in connection with the application and to provide such additional information as may be required.
2. **Uniform Grant Management Standards.** It will comply with the Uniform Grant Management Standards (UGMS), adopted by the Texas Office of the Governor, in accordance with Chapter 783, Texas Government Code.
3. **Procurement of Goods and Services.** In procuring goods and services, it will comply with Part II. Cost Principles for State and Local Governments and Other Affected Parties and Part III. State Uniform Administrative Requirements for Grants of the UGMS. All procurement transactions will be conducted in a manner providing full and open competition.
4. **Historically Underutilized Businesses (HUBs).** Qualified HUBs, as defined and designated under state law, shall have the maximum practicable opportunity to participate in the performance of the work arising out of this project.
5. **Conflict of Interest.** Applicant has not given, offered to give, nor intends to give at anytime hereafter, any economic opportunity, future employment, gift, loan gratuity, special discount, trip, favor, or service to a public servant in connection with the submitted application. Under Government Code § 2155.004, no person involved in the preparation of the Request for Grant Applications may have any financial interest in this application. If applicant is not eligible, then any contract resulting from this application shall be immediately terminated. Furthermore, under Section 2155.004, Government Code, the applicant certifies that the individual or business entity named in this bid or contract is not ineligible to receive the specified contract and acknowledges that this contract may be terminated and payment withheld if this certification is inaccurate.
6. **Nondiscrimination.** It will comply with all State and Federal statutes relating to nondiscrimination.
7. **Grant Administration.** It will maintain an appropriate grant administration system to ensure that all terms, conditions, and specifications of the grant, including these certifications and assurances, are met.
8. **Audit.** Pursuant to Section 2262.003 of the Texas Government Code, the state auditor may conduct an audit or investigation of the vendor or any other entity or person receiving funds from the state directly under this contract or indirectly through a subcontract under this contract. The acceptance of funds by the applicant or any other entity or person directly under this contract or indirectly through a subcontract under this contract acts as acceptance of the authority of the state auditor, under the direction of the legislative audit committee, to conduct an audit or investigation in connection with those funds. Under the direction of the legislative audit committee, the applicant or other entity that is the subject of an audit or investigation by the state auditor must provide the state auditor with access to any information the state auditor considers relevant to the investigation or audit. Applicant will ensure that this clause concerning the authority to audit funds received indirectly by subcontractors through the vendor and the requirement to cooperate is included in any subcontract it awards.
9. **Debt to the State.** It is not indebted to the state or has an outstanding tax delinquency. It further understands that the Texas Comptroller is precluded by law from paying a person who is indebted to the state or has a tax delinquency. The applicant must comply with all State and Federal tax laws and fee requirements and is solely responsible for filing all State and Federal tax and fee forms.

Continued on next page

Rebate Grant Application

Supplemental Form 1: General Certifications (continued)

10. Grant Contract. It understands that a copy of the grant contract shell is available from the TCEQ, including a copy posted on the TCEQ's web site at www.terpgrants.org. It further understands that the TCEQ will not normally change the contract language to deal with individual requests from grant recipients.

11. Contracting with an Executive of a State Agency. Under Government Code § 669.003, relating to contracting with an executive of a state agency, Applicant represents that no person who, in the past four years, served as an executive of the Texas Commission on Environmental Quality (TCEQ) or any other state agency, was involved with or has any interest in this Application. If Applicant employs or has used the services of a former executive head of TCEQ or other state agency, then Respondent shall provide the following information: name of former executive, name of state agency, date of separation from state agency, position with Applicant, and date of employment with Applicant.

12. Debarment. Applicant certifies that the applying entity and its principals are eligible to participate in this transaction and have not been subjected to suspension, debarment, or similar ineligibility determined by any federal, state or local governmental entity and that Respondent is in compliance with the State of Texas statutes and rules relating to procurement and that Respondent is not listed on the federal government's terrorism watch list as described in Executive Order 13224. Entities ineligible for federal procurement are listed at <http://www.epls.gov>.

13. Hurricane Katrina and Other Natural Disasters. Under Section 2155.006(b) of the Texas Government Code, a state agency may not accept a bid or award a contract, including a contract for which purchasing authority is delegated to a state agency, that includes proposed financial participation by a person who, during the five-year period preceding the date of the bid or award, has been: (1) convicted of violating a federal law in connection with a contract awarded by the federal government for relief, recovery, or reconstruction efforts as a result of Hurricane Rita, as defined by Section 39.459, Utilities Code, Hurricane Katrina, or any other disaster occurring after September 24, 2005; or (2) assessed a penalty in a federal civil or administrative enforcement action in connection with a contract awarded by the federal government for relief, recovery, or reconstruction efforts as a result of Hurricane Rita, as defined by Section 39.459, Utilities Code, Hurricane Katrina, or any other disaster occurring after September 24, 2005.

Under Section 2155.006 of the Texas Government Code, the applicant certifies that the individual or business entity named in this Application is not ineligible to receive the specified contract and acknowledges that any contract resulting from this RFGA may be terminated and payment withheld if this certification is inaccurate.

Rebate Grant Application

Supplemental Form 2: Payee Information

1. Applicant/Company Legal Name: (Applicant/Company Legal Name for Contracting Purposes)			
2. Payee Identification Number (PIN): Indicate the type of number you are providing to be used for your PIN. Provide one of the following numbers. Do <u>not</u> complete both A and B.			
A. Social Security Number (SSN): (Only complete if you are applying as an individual or Sole Proprietor.)			
B. Federal Employer's Identification (FEI) Number: (Only complete if you are applying as a company or other entity, including DBA's.)			
3. Mark the box with an "X", if the applicant is currently reporting any Texas tax to the Comptroller's Office other than unemployment (e.g., sales tax, franchise tax).			
If the applicant is currently reporting any Texas tax to the Comptroller's Office other than unemployment (e.g., sales tax, franchise tax), please enter in the Texas Taxpayer Number.			
4. Mark the box with an "X", if you plan to assign your grant payments to a third party.			
Mailing Address for Grant Payments: Include individual or entity name, address, city, state, and zip code.			
Name:		Address:	
City:		State:	Zip Code:
5. Ownership Codes: Mark with an "X", only one (1) ownership type that applies to this application and matches the legal name.			
I - Individual Recipient (not owning a business):		L - Limited Partnership:	
S - Sole Ownership (individual owning a business):		Texas File #:	
Owner's Name:		T - Texas or Limited Liability Corporation:	
Owner's SSN:		Texas Charter #:	
P - Partnership:		A - Professional Association:	
Name:		Texas Charter #:	
SSN/FEI#:		C - Professional Corporation:	
Name:		Texas Charter #:	
SSN/FEI#:		O - Out-of-State Corporation:	
J - Joint Venture:		U - State Agency/University:	
G - Governmental Entity:		N - Other (explain):	
6. Describe Applicant's Primary Business Type: (i.e., transit system, gravel hauling, excavation, school, etc.)			

**Rebate Grant Application
Supplemental Form 3: Child Support Certification**

All individuals or business entities, including sole proprietors, must complete this section, regardless if child support obligations apply to the applicant.

Certification Regarding Child Support Obligations

Under Section 231.006, Texas Family Code, a child support obligor who is more than 30 days delinquent in paying child support and a business entity in which the obligor is a sole proprietor, partner, shareholder, or owner with an ownership interest of at least 25% is not eligible to receive a state-funded grant or loan. All applicants must include in the application the name and social security number of the individual or sole proprietor and each partner, shareholder, or owner with an ownership interest of 25% of the business entity submitting the application.

Please check one of the options below. If the first option is checked, list the Name and Social Security Numbers of any individual who owns 25% or more of the business entity submitting this application, regardless if child support obligations apply to that individual.

<input type="checkbox"/> Check if the applicant is an individual or sole proprietorship, or if one or more individuals own 25% or more of the business entity. List the names and social security numbers (SSN) below.	
Name:	SSN:
<input type="checkbox"/> Check if there is not a single individual who owns 25% or more of the business.	
<input type="checkbox"/> Check if the applicant is not an individual or business entity.	

I certify that to the best of my knowledge and belief that the individual or business entity submitting this application is eligible to receive a grant. I acknowledge that the grant contract may be terminated and any payments withheld if this certification is inaccurate.

Signature of Authorized Official:
(Please sign and date in BLUE ink)

Date:

Rebate Grant Application

Supplemental Form 4: Federal W-9 Information Request for Taxpayer Number and Certification

A signed copy of the IRS form W-9 (Request for Taxpayer Number and Certification) is required with all applications. Do not use an invalid Social Security Number (SSN), or a SSN issued to a different person. **Numbers submitted may be verified and discrepancies found and not corrected may result in the rejection of a grant application or termination of an awarded grant.**

Where to get the most current Form W-9:

The IRS maintains the most current copies of its forms and they can be found at

www.irs.gov/Forms-&-Pubs

Applicants without a Social Security Number:

For applicants not having a SSN, completion of the W-9 form may require that an applicant obtain an Individual Taxpayer Identification Number (ITIN) from the Internal Revenue Service. See IRS Publication 1915 available at the IRS website address referenced above or by calling the IRS at 1800-829-1040.