



Usage Report

Texas Clean Fleet Program (TCFP)

Texas Emissions Reduction Plan (TERP)

Texas Commission on Environmental Quality (TCEQ)

Introduction

As part of receiving TCFP grant funds, you agreed to submit a record of the equipment’s (activity’s) usage. The TERP program emails or mails usage reports for the life of the activity. These usage reports are specific to the contract— containing pre-filled information, like contact and certain activity information.

Complete the following report **if you don’t have the usage report containing pre-filled information**. Once complete, submit to TCEQ by its specified deadline using one of the following methods:

Email: TERP-Monitoring@tceq.texas.gov

Fax: (512) 239-6161

Regular Post Delivery:

Express Delivery:

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

Texas Commission on Environmental Quality
Air Grants Division
Compliance Section, MC-204
12100 Park 35 Circle
Building F, 1st Floor, Room 1301
Austin, TX 78753

Do you have questions about the Usage Report? Contact the Compliance Section at (512) 239-0578

Contract Number and Performing Party

Enter as it is shown in your current contract.

Contract Number:

Performing Party:

Contact Information

Enter **current** contact information, even if it’s different from what’s in your contract.

Full Name:

Mailing Address:

City:

State:

ZIP:

Primary Phone:

Ext:

Secondary Phone:

Ext:

Fax:

Email:

Is any **Contact Information** different from what’s in your contract?

Yes

No

Affirmation of Signature

The Texas Emissions Reduction Plan (TERP) Usage Report must be signed by the Authorized Official (AO) or Designated Project Representative (DPR). If filing electronically, the AO or DPR may type their name into the appropriate field on the document as a signature. Submission of the document with a typed signature will constitute the same legal meaning and intention as would a handwritten signature.

Contract Number:

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Performing Party:

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I affirm, as an authorized representative of the grant recipient, that the information contained in this report is, to the best of my knowledge and understanding, complete and accurate.

AO or DPR Signature:	
Printed Name:	
Title:	
Date:	