

# Yolo-Solano Air Quality Management District

## 2019 Clean Air Funds Application



**PROJECT TITLE** \_\_\_\_\_

**PROJECT CATEGORY**     Clean Vehicle Technology                       Alternative Transportation  
    Transit Services     Public Information/Education

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### APPLICANT INFO

Business/Organization Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

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### FUNDING

List the funding request and the total project cost (including matching and outside funds) below. Describe any matching or outside funds in detail in the full attached project proposal.

Funding Request \_\_\_\_\_ Total Project Cost \_\_\_\_\_

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### Project Proposal

Brief Description (one or two sentences)\*\* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
*\*\*Attach your full project proposal to this application. Include all required information as indicated in this application packet based on the project type.*

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This application must be signed by the responsible official listed above. By signing this document you are declaring that:

- All information contained in this document and in any attachments is true, accurate and complete to the best of your knowledge.
- The responsible official has the authority to apply for the grant funds on behalf of the applicant named.
- The applicant agrees to the terms and conditions of the agreement (included in this packet).
- Approved projects cannot be altered in any way without prior approval from the District (see agreement).

Print Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Note: Signed applications are due by 4:00 pm on the due date and may be transmitted by email (preferred): [cleanair@ysaqmd.org](mailto:cleanair@ysaqmd.org), by fax: (530) 757-3670, or by hard copy to the District office: 1947 Galileo Court, Suite 103, Davis, CA 95618. Signatures transmitted by email or fax have the same legal effect as an original.

**EXHIBIT A**  
Work Statement

Describe the Clean Air Fund Project (PROJECT) as approved by the Board (and be specific on what you are proposing to do). Describe any changes from the original application (especially due to reduced funding levels). All changes to the PROJECT after application approval must have prior written approval by the District before the PROJECT begins.

**EXHIBIT B**  
Cost Schedule

Applicant: \_\_\_\_\_

Budget:                      Total Project Amount:                      \$ \_\_\_\_\_  
    Amount Awarded by Y-S AQMD:                      \$ \_\_\_\_\_

Project Title: \_\_\_\_\_

Project Time Line:      Proposed Start Date:      \_\_\_\_\_  
    Proposed End Date:      \_\_\_\_\_  
    Project Life (years):      \_\_\_\_\_

Activity Description Breakdown – Total Project Amount (By period/expense)

1.	Period ____/2019 to ____/20____ Activity Description: _____	\$ _____
2.	Period ____/2019 to ____/20____ Activity Description: _____	\$ _____
3.	Period ____/2019 to ____/20____ Activity Description: _____	\$ _____
4.	Period ____/2019 to ____/20____ Activity Description: _____	\$ _____
<b>TOTAL</b>		\$ _____

Total Budget Breakdown:

	Y-S AQMD Grant	Other Match	Total
Capital	\$ _____	\$ _____	\$ _____
Personnel	\$ _____	\$ _____	\$ _____
Grant Administration	\$ XXXXXXXXX	\$ _____	\$ _____
Totals	\$ _____	\$ _____	\$ _____

## **EXHIBIT C**

### Final Report Format

The general format for the final report should include the following items as detailed below. The final report may be emailed, faxed or returned by hard copy to the attention of Planning and Air Monitoring Division, and is due within ninety (90) days following one full year of implementation of the project as described in Exhibit A or within thirty (30) days should this Agreement be terminated prior to the termination date set in Paragraph 3.A. Failure to provide the final report by the due date may disqualify the CONTRACTOR from receiving future DISTRICT grant funds.

1. Cover/Title Page/Agreement Number
2. Table of Contents – If necessary for text, tables, figures, etc.
3. PROJECT Description as Implemented – Describe PROJECT, outlining why it was done, including scope and duration, details of execution.
4. Copies of Paid Invoices

Note: After the final report is submitted to the District, staff will conduct a performance evaluation on the PROJECT, which may include an on-site inspection.

In addition to the general format, the following items should be included for the specific category as listed below:

#### ALTERNATIVE FUEL INFRASTRUCTURES

##### Infrastructure/Fueling Facilities

1. Describe any implementation problems.
2. Provide breakdown of PROJECT staff time if District funds were used for this purpose.
3. Provide copies of invoices, purchase orders, and agreement number.
4. Describe any PROJECT scope changes from original application along with written approval from DISTRICT permitting these changes. This includes construction bid changes and whether or not this resulted in a surplus or deficit of funds.
5. Provide amount of matching funds used and specify sources.
6. Provide estimated PROJECT life.
7. Provide any PROJECT OUTCOMES.

##### Clean Technologies/Low Emission Vehicles

1. Describe any implementation problems.
2. Provide breakdown of PROJECT staff time if the District provided funds for this purpose.
3. Provide copies of invoices, purchase orders, and agreement number.
4. Describe any PROJECT scope changes from original application along with written approval from DISTRICT permitting these changes. This includes construction bid changes and whether or not this resulted in a surplus or deficit of funds.
5. Provide amount of matching funds used and specify sources.
6. Provide estimated PROJECT life in years.
7. Provide annual vehicle miles.
8. The following information is required for clean fuel vehicle projects that have received more than \$10,000 in District Clean Air Funds:
  - a. Provide actual emission reductions: ROG, NOx, PM-10. List data sources, assumptions and methodologies used.
  - b. Cost information:
    - Provide capital costs (equipment, infrastructure)
    - Provide operating costs (fuel, labor, maintenance)
    - Total project cost
9. Provide any PROJECT OUTCOMES.

#### ALTERNATIVE TRANSPORTATION PROGRAM

1. Provide the total trip reductions and reductions in vehicle miles traveled (VMT) if applicable – list data sources, assumptions and methodologies used to determine travel reductions.
2. Describe any implementation problems.
3. Provide breakdown of PROJECT staff time if District funds were used for this purpose.
4. Provide copies of invoices, purchase orders, and agreement number.
5. Describe any Project scope changes from original application along with written approval from DISTRICT permitting these changes
6. Provide amount of matching funds used and specify sources.
7. Provide estimated project life in years.
8. Provide any PROJECT OUTCOMES.

## TRANSIT SERVICES

1. Describe any implementation problems.
2. Provide breakdown of PROJECT staff time if District funds were used for this purpose.
3. Provide copies of invoices, purchase orders, and agreement number.
4. Describe any Project scope changes from original application along with written approval from DISTRICT permitting these changes.
5. Provide amount of matching funds used and specify sources.
6. Provide PROJECT life in years.
7. Provide daily ridership of the new service, total trip reductions and reductions in vehicle miles traveled (VMT) if applicable – list data sources, assumptions and methodologies used to determine travel reductions.
8. The following information is required for transit service projects that have received more than \$10,000 in District Clean Air Funds:
  - a. Provide actual emission reductions: ROG, NOx, PM-10 – List data sources, assumptions and methodologies used.
  - b. Cost information:
    - Provide capital costs (equipment, infrastructure)
    - Provide operating costs (fuel, labor, maintenance)
    - Total PROJECT cost
9. Provide any PROJECT OUTCOMES.

## PUBLIC EDUCATION/INFORMATION

1. Describe the target audience including city, county, age group, and schools, if applicable.
2. What was the message that was delivered to the target audience? If so, please specify.
3. Did the message target specific behavioral changes to reduce emissions and did that message reach its audience? Please document.
4. Did the PROJECT have an evaluation component analyzing if and how well the message was received? Please explain the evaluation component and include any documentation.
5. Based on the evaluation component, did the target audiences' attitude and/or behavior change as a result of hearing or seeing the message? Did a behavioral change assist in or directly cause emissions reductions? If so, explain how?
6. Include survey form to be used to document behavioral changes during and after the program.
7. Provide an estimate of the number of individuals served by the program.
8. Provide breakdown of PROJECT staff time if District funds were used for this purpose.
9. Provide copies of the invoices, purchase orders, and agreement number.
10. Describe any PROJECT scope changes from original application along with written approval from DISTRICT permitting these changes.
11. Provide amount of matching funds used and specify sources.
12. Provide samples of all printed material, posters, press releases or any medium used to educate or inform.
13. What was the program life (the time frame of the PROJECT)?
14. Provide any PROJECT OUTCOMES.

## **EXHIBIT D**

### Insurance Requirements

CONTRACTOR shall furnish the DISTRICT with certificate(s) of insurance or self-insurance and/or original endorsement(s) and/or insurance binder(s) affecting coverage required below. The certificates, endorsements, and/or binders for each insurance policy are to be signed by a person authorized by the insurer to affect coverage on its behalf. The certificates, endorsements, and/or binders are to be received and approved by the DISTRICT before work commences. The DISTRICT reserves the right to require complete, certified copies of all required insurance policies, at any time. If CONTRACTOR provides self-insurance, it shall, on intervals specified by the APCO, provide financial statements sufficiently detailed so as to allow the APCO to assess where he finds that sufficient coverage will not be afforded to the DISTRICT.

During the term of the Agreement, CONTRACTOR shall, at its sole expense, obtain and maintain in full force IA or IB below. The type and limits of liability requirements are as follows:

#### **1. A. COMMERCIAL/GENERAL LIABILITY:**

Bodily Injury and Property Damage for premises and operations; Personal Injury and Advertising for premises and operations; Independent Contractors (if any basis); Incidental Contracts; Contractual Liability; and Products and Complete Operations.

"Claims made" policies are unacceptable.

Minimum Limits: \$1,000,000 combined single limit, on an occurrence policy form.

**B. BUSINESS AUTOMOBILE LIABILITY:**

Protection against loss of a result of liability to others caused by an accident and resulting in bodily injury and/or property damage, arising out of the ownership or use of any automobile. If CONTRACTOR has no owned automobiles, then only hired and non-owned automobile coverage is required.

Minimum Limits: \$1,000,000 per occurrence for bodily injury or property damage, combined single limit.

**C. Public Entities/Self-Insured Status:** CONTRACTOR shall maintain status as a legally self-insured public entity for general liability and shall maintain a self-insured retention of three hundred thousand dollars (\$300,000) per occurrence.

**2. Workers' Compensation and Employers Liability:** CONTRACTOR shall carry full Workers' Compensation insurance coverage for all persons directly employed or volunteers, in carrying out the work under this contract, in accordance with the "Workers' Compensation and Insurance Act," Division statutory limits will apply. If CONTRACTOR has no employees, no Workers' Compensation coverage is required. If CONTRACTOR hires subcontractors to perform under this agreement, the CONTRACTOR shall assure that the subcontractor carries Workers' Compensation insurance for all of its employees, who are required to be covered by applicable law.

**3. Notice of Cancellation:** Each insurance policy shall be endorsed, and evidence of such endorsement shall be provided to the DISTRICT, that coverage not be suspended, voided, canceled, reduced in coverage or in limits, or material change in coverage, except after thirty (30) days prior written notice has been given to the DISTRICT. Ten (10) days prior written notice of cancellation for non-payment of CONTRACTOR'S insurance premium is permissible.

**4. Additional Insured:** It is mandatory that all of the above insurance policies (except Workers' Compensation) shall include the DISTRICT as additional insured. The DISTRICT, its officials, trustees, agents, employees, and volunteers are to be covered as additional insured as respects liability arising out of activities performed by or on behalf of the CONTRACTOR.

**5.** In addition, it is understood and agreed that the following be made a part of the Agreement.

**A. Excess/Umbrella:** An excess policy or an umbrella policy (following form) may be utilized to meet the above required limits of liability.

**B. Supplementary Payments:** The above-stated limits of liability coverage for Commercial/Comprehensive General Liability, and Business Automobile Liability assumes that the standard "supplementary payments" clause will pay in addition to the applicable limits of liability and that these supplementary payments are not included as part of the insurance limits of liability. If any of the policies indicate that defense costs are included in the general limit, then the general aggregate limits must be a multiple of the per occurrence limits.

**C. Contractors' Insurance as Primary:** The CONTRACTOR'S insurance coverage shall be primary insurance. Any insurance or self-insurance maintained by the DISTRICT, its officials, trustees, agents, employees or volunteers shall be excess to the CONTRACTOR'S insurance and shall not contribute with it.

**D. Acceptability of Insurers:** Insurance is to be placed with admitted State of California insurers which have an A.M. Best's rating of no less than A:VII, or be an equivalent program of self-insurance.

**E. District Risk Manager Exceptions:** Any exceptions to the above insurance requirements are subject to the concurrence of the DISTRICT'S Risk Manager.