# APPENDIX A – PROJECT PROPOSAL FORM

All project applications shall provide the information required in the 2020 Project Proposal Form. A copy of this application form is available at the [NHDES DERA website](http://www.des.nh.gov/business-and-community/loans-and-grants/dera). Applicants may either utilize that application form or create their own form that contains the same required information in the same order.

Any questions regarding information to be included in the application should be submitted by email to:

Jessica Wilcox, Grants Manager

New Hampshire Department of Environmental Services

[jessica.wilcox@des.nh.gov](mailto:jessica.wilcox@des.nh.gov)

**New Hampshire Clean Diesel Grant Program**

**2020 PROJECT PROPOSAL FORM**

Technical Services Bureau / Air Resources Division

New Hampshire Department of Environmental Services (NHDES) requests proposals for eligible DERA projects. The following information is **required** for consideration. Incomplete submissions will be disqualified.

If you are submitting a proposal for more than one vehicle/equipment/engine, please advise if the applications should be considered as separate projects or as one combined project.

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| **Project Applicant (name of entity):** | | | |
| **Contact Name:** | | **Phone:** | |
| **Address:** | | | |
| **Town:** | **State/ZIP:** | **Email:** | |
| **Project Location:** | | **Project Partners (if any):** | |
| **Percentage of operation in NH (based on hours of operation or miles traveled):** | | **Is applicant a Government Entity or is use of school bus under a contract with a Government Entity?** | |
| **Project Type (check all that apply) – *please read project descriptions in Section 1.9 of the RFP before selecting project type(s):*** | | | |
| **Vehicle/Equipment Replacement** | | **Idle Reduction Project** | |
| **Engine Replacement/Upgrade** | | **Exhaust Control** | |
| **Total Project Cost:       Percentage of funding you are applying for:** | | | |
| **Total funds requested:       Total funds provided as project match:** | | | |
| **Question 1. Please provide a brief description of your project to include 1) What type of diesel engine/vehicle/equipment the project will be applied to, 2) how and where it operates, and 3) any sensitive receptors (schools, hospitals, nursing homes, other – please identify if other) that are impacted by the existing engine/vehicle/equipment.** | | | |
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| **Question 2. Please provide specific information about your project (i.e. engine/vehicle/equipment being replaced and the proposed new engine/vehicle/equipment) in the section below. (This information can also be submitted using an alternative document or format. Please include all of the required information.) This information will be used to calculate air quality benefits and cost effectiveness for the proposed project.** | | | |
| **Existing Engine/Vehicle/Equipment Information** | | | |
| **Number of Engines/Vehicles/Equipment** | | |  |
| **Engine Type (onroad/highway; nonroad; locomotive; marine)** | | |  |
| **Vehicle Weight Class (for onroad/highway only – e.g. Class 5 -8)** | | |  |
| **Engine Horsepower (for nonroad projects only)** | | |  |
| **Engine Make** | | |  |
| **Engine Model** | | |  |
| **Vehicle/Equipment Make (if applicable)** | | |  |
| **Vehicle/Equipment Model (if applicable)** | | |  |
| **Engine Model Year** | | |  |
| **Vehicle/Equipment Model Year (if applicable)** | | |  |
| **Engine Emissions Certification Level (Tier Level, for non-road only)** | | |  |
| **Average miles traveled per year (onroad/highway) or hours of operation (nonroad)** | | |  |
| **Fuel type** | | |  |
| **Gallons of fuel used per year** | | |  |
| **Idling Hours per year (please provide an estimate)** | | |  |
| **Proposed Engine/Vehicle/Equipment Information** | | | |
| **Number of Engines/Vehicles/Equipment** | | |  |
| **Engine Type (onroad/highway; nonroad; locomotive; marine)** | | |  |
| **Vehicle Weight Class (for onroad/highway only – e.g. Class 5 -8)** | | |  |
| **Engine Horsepower (for nonroad projects only)** | | |  |
| **Engine Make** | | |  |
| **Engine Model** | | |  |
| **Vehicle/Equipment Make (if applicable)** | | |  |
| **Vehicle/Equipment Model (if applicable)** | | |  |
| **Engine Model Year** | | |  |
| **Vehicle/Equipment Model Year (if applicable)** | | |  |
| **Engine Emissions Certification Level (Tier Level, for non-road only)** | | |  |
| **Average miles traveled per year (onroad/highway) or hours of operation (nonroad)** | | |  |
| **Proposed Fuel Type** | | |  |
| **Question 3. Please provide the timeframe (e.g. calendar quarter, fiscal year, etc.) in which this engine/vehicle/equipment is currently scheduled to be replaced absent availability of the funds offered through this program. Applicants that are selected for funding will be asked to provide verification of the original replacement schedule, such as a business plan or capital improvement plan.** | | | |
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| **Question 4. If an alternative fuel vehicle is proposed, please provide details on the infrastructure that will be used to refuel the new engine/vehicle/equipment purchased through this grant (e.g., propane/CNG fueling station; electric charging stations, etc.).** | | | |
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| **Question 5. Please indicate any additional benefits (*other than air quality*) this project will have on the community or environment.** | | | |
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| **Question 6. Please provide a brief description of why you feel this project will be completed successfully. Please include the source of the required matching funds and whether such funds will be available in time for the project; any experience the applicant has had completing other grants or similar projects; and any other aspects that will contribute to successful completion of this project.** | | | |
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| **Question 7. Will your project positively impact an economically disadvantaged community or population? If so, please explain how.** | | | |
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