

APPENDIX A

**LAWN AND GARDEN EQUIPMENT
REPLACEMENT PROJECT APPLICATION**



LGER PROJECT APPLICATION

Please print clearly or type all information on this application.

A. APPLICANT INFORMATION

1. Air District:		
2. Contact Name and Title:		
3. Air Pollution Control Officer (APCO):		
4. Air District Mailing Address and Contact Information:		
Street:		
City:	State:	Zip Code:
Phone: ()	Fax: ()	
E-mail:		

I hereby certify under penalty of perjury that all information provided in this application and any attachments are true and correct.

Printed Name of APCO:	Title:
Signature of APCO:	Date:

Third Party Certification (if applicable)

I have completed the application, in whole or in part, on behalf of the applicant.

Printed Name of Third Party:	Title:
Signature of Third Party:	Date:
Amount Being Paid for Application Completion in Whole or Part:	Source of Funding to Third Party:

B. APPLICANT QUALIFICATIONS

1. Qualifications Narrative: Please provide an attachment describing your experience/expertise developing, implementing, or administering lawn and garden equipment replacement programs and working with lawn and garden manufacturers, vendors, users, and other stakeholders, and identify how this background will enable you to efficiently and effectively implement the LGER Project. This narrative should not exceed two pages.

2. Staff Information: Include information for each staff member to be involved in developing, implementing, or administering the LGER Project.

Name:	Hourly rate:
Phone:	E-mail:
Title:	
Expected duties:	
Name:	Hourly rate:
Phone:	E-mail:
Title:	
Expected duties:	
Name:	Hourly rate:
Phone:	E-mail:
Title:	
Expected duties:	

If more room is needed, this form may be copied or recreated.

Subcontractor/Implementing Partner Information: Applicants may partner with other entities. Responsibility for deliverables lies with the primary applicant. Provide the names and information for any and all subcontractors/partners. Attach resumes, letters of commitment, or a Memorandum of Understanding.

Name:	Hourly rate:
Phone:	E-mail:
Title:	
Expected duties:	
Name:	Hourly rate:
Phone:	E-mail:
Title:	
Expected duties:	
Name:	Hourly rate:
Phone:	E-mail:
Title:	
Expected duties:	

If more room is needed, this form may be copied or recreated.

C. APPLICANT RESOURCES TO IMPLEMENT THE PROJECT

In no more than one page, please identify the staff, infrastructure, match funding or other resources you have available and will utilize to effectively and efficiently implement the LGER Project. Staff time, and/or administrative, outreach or other costs needed to implement the project should be detailed as part of your Proposed Budget (See Section E).

D. PROJECT IMPLEMENTATION PLAN

Please provide your Project Implementation Plan for completing key tasks required of the LGER Project. The Project Implementation Plan should be no longer than five pages long and contain a clear and concise description of how the following and other key tasks will be completed, as well as the timeline and resources needed for their completion.

- Outreach to consumers and lawn and garden equipment manufacturers
- Timeline for project completion
- Development of LGER Project webpage
- Timely redemption of vouchers or rebates (from registration to exchange event)
- Steps to ensure project transparency and accountability
- Reporting to ARB

Be specific. Where applicable, applicants should provide examples of past experiences in successfully completing similar tasks.

E. PROPOSED BUDGET

Please describe your proposed budget for completing the tasks of LGER Project, consistent with the Draft Implementation Manual, your Project Implementation Plan and the requirements of the LGER Project solicitation. Your budget must include all estimated labor and material costs associated with managing the project, the total LGER Project funds requested, the total administrative funds requested, and a detailed description of match funding that identifies all or sources of match funding. The total administrative and outreach costs ARB shall reimburse to the Grantee for outreach and administration of the LGER Project shall not exceed 10 percent of the total grant award.

In-kind services refer to resources or services contributed by the air district to manage the project but not charged to the LGER Project. Please be as specific as possible when describing in-kind services (i.e. itemize staff time, infrastructure, or other costs that are being committed). In-kind services provided in the form of outreach efforts must be appropriate for a regional rebate/voucher program. In-kind services committed in this application must be documented by the air district in the LGER Project Final Report (See Section 4.3 of the Draft Implementation Manual).

Match funding refers to funds contributed by the air district to the LGER Project to fund additional eligible equipment. Match funding does not include in-kind match (i.e. funding provided by the applicant for other similar incentive projects or programs). Only direct match funding contributed to the LGER Project will be considered in scoring this application. The applicant must include a letter describing and authorizing any proposed match funding commitment as part of this application.

E-1: Sample Proposed Budget

(Applicant may modify this sample budget to meet their specific needs. This page may also be edited, or deleted if not used)

<u>DIRECT LABOR</u>	<u>HOURS</u>	<u>RATE</u>	<u>TOTAL</u>	<u>IN-KIND MATCH</u>
Program Manager	_____ @	_____	_____	\$ _____
Staff Assistant(s)	_____ @	_____	_____	\$ _____
			TOTAL \$ _____	

PARTNER(S)/SUBCONTRACTOR(S) COST ITEMIZED

INDIRECT COSTS (OVERHEAD AND FRINGE BENEFITS)

Overhead Rate	_____	_____	\$ _____
Fringe Benefits	_____	_____	\$ _____
		TOTAL \$ _____	

DIRECT COSTS (EXCEPT LABOR)

Travel Costs	_____	\$ _____
Equipment and Supplies (Itemized)	_____	\$ _____
Other Direct Costs (Itemized)	_____	\$ _____
	\$ _____	\$ _____
	Total	Total

TOTAL COSTS TOTAL EQUIPMENT FUNDS REQUESTED \$ _____

TOTAL ADMINISTRATIVE FUNDS REQUESTED* \$ _____

ONE TO ONE MATCH

SOURCE	AMOUNT

*In no event will an air district receive administrative funds for more than 10 percent of administrative costs based on the grant award.

F. CONFLICT OF INTEREST DECLARATION

Please summarize any current, ongoing, or pending direct or indirect interest your organization (or any subcontractor identified in Part B of this application) has which poses an actual, apparent, or potential conflict of interest with your ability to fulfill the duties of the LGER Project Grantee. These may include but are not limited to financial arrangements with or interest in zero emission lawn and garden equipment manufacturers, dealers, fleets, or related organizations. ARB may consider the nature and extent of any potential or apparent conflict of interest in evaluating, considering, or scoring the application and may disqualify the applicant at ARB's sole discretion.