

ev LOAN PROGRAM*electric vehicles for public fleets***Interest Form**

Agency Name:		
Address:	City:	Zip Code:
Contact Person:		Phone:
Email:		

Do you have convenient access to a recharging station? Yes No
 (If no, we likely can install a temporary charger)

What kind of electric vehicle are you interested in? (Check all that apply)

GM EV1 Ford Ranger pickup truck Toyota RAV4

What kind of outreach does your organization participate in, and how often? _____

How will this vehicle be used in outreach? _____

What is the estimated length of the average trip? _____ miles (round trip)

Have you ever driven an electric vehicle? Yes No

Does your agency currently lease or own any alternatively fueled vehicles? Yes No

Are you interested in leasing an electric vehicle? Yes No Undecided

How did you hear about the program? _____

Please check all that apply after reading the attached insurance requirements.

- I understand the insurance requirements.
- I have questions about the insurance requirements. Please call me to discuss
- My agency is self-insured and I have either attached a letter or other documentation of self-insurance coverage at the amounts specified above or will provide documentation of self-insurance coverage the amounts specified above prior to the start of the loan (1 month in advance is preferred, if possible).
- My agency will provide insurance coverage. I understand that that the ev Loan Program Manager will provide the Vehicle Identification Number, license plate number and any other information needed for the vehicle.

Please return completed form:

Mail: Air Resources Board, P.O. Box 2815, Sacramento, CA 95812

Fax: (916) 322-3923

Attention: Melissa Meuser

Email: mmeuser@arb.ca.gov