

SRP A+ BUS APPLICATION

Thank you for your interest in the SRP A+ Bus Program.

Please download and complete the following application, which consists of seven sections. Each section of the application identifies the required person at the school district (Delegate) who shall complete the information for that section. The Delegate may also be responsible for providing required documentation according to the section instructions. All sections must be signed and certified by the required Delegate. Listed below are the seven sections and their corresponding Delegates.

Section I: **General Information**

Delegate: Superintendent

Section II: **Fleet & Fuel Supply Information**

Delegate: Fleet Manager

Section III: **Emission Control Device**

Delegate: Fleet Manager

Section IV: **Project Schedule**

Delegate: Fleet Manager

Section V: **Educational Program**

Delegate: Superintendent

Section VI: **Minimum Requirements & Certifications**

Delegate: Superintendent

Section VII: **Application Checklist & Certification**

Delegate: Superintendent

The completed application, including all required documentation and signatures, must be postmarked no later than December 22, 2010.

If submitted via e-mail: aplusbus@srpnet.com

If sent by regular mail:

SRP A+ Bus Program
PAB355
P.O. Box 52025
Phoenix, AZ 85072-2025

If hand-delivered or sent by expedited mail:

SRP A+ Bus Program
PAB355
SRP Mail Services Shipping/Receiving Center
2727 E. Washington St.
Phoenix, AZ 85034-1403

If you have any questions or want more information about the SRP A+ Bus Program, please contact Tina Drews, SRP Project Manager, at (602) 236-2497 or by e-mail at aplusbus@srpnet.com, or visit srpnet.com/aplusbus.



SECTION I: GENERAL INFORMATION

Delegate: Superintendent

Instructions: The Superintendent's office is responsible for filling out Section I: General Information.

Name of School District: _____

School District mailing address: _____

City: _____ State: _____ ZIP: _____

Name of Superintendent: _____

Phone number: _____ Fax number: _____

E-mail address: _____

Superintendent's mailing address: _____

City: _____ State: _____ ZIP: _____

Name of Fleet Manager: _____

Phone number: _____ Fax number: _____

E-mail address: _____

Fleet Manager's mailing address: _____

City: _____ State: _____ ZIP: _____

Physical location of fleet: _____

City: _____ State: _____ ZIP: _____

Total number of schools in the district: _____

Number of schools in the district that are Title I: _____

Number of schools in the district participating in the A+ Bus Program: _____

Total number of students in the district: _____

Number of students that will ride retrofitted buses: _____

SECTION I: GENERAL INFORMATION

Delegate: Superintendent

1. Is this district a public school district?

YES NO

2. Is this district legally obligated to reduce bus emissions?

YES NO

3. Has this district purchased or installed emission control devices with funding received from other programs?

YES NO

4. Does this district have the legal authority to receive and use funds as it relates to this project?

YES NO

5. Would the district still be interested in receiving funding if the amount we are able to fund was less than what the district is requesting?

YES NO

6. Identify entity that should receive payments: _____

Section I Certification

With my signature, I certify that I have knowledge of the information contained in this section of the application and that this information is true, accurate and complete to the best of my knowledge and belief. If it is later determined that any information provided in this application is incorrect, I will promptly notify SRP in writing.

Superintendent/Assistant Superintendent:

Signature

Date

Printed name

Title

SECTION II: FLEET & FUEL SUPPLY INFORMATION

Delegate: Fleet Manager

Instructions: The Fleet Manager's office is responsible for filling out Section II: Fleet & Fuel Supply Information. Please provide all required documentation and attach it to this section.

Physical location of fleet: _____

City: _____ State: _____ ZIP: _____

1. Does this district's fleet run on ultra-low sulfur diesel (ULSD)?

YES NO

2. If yes to #1, please provide the following ULSD fuel supplier information:

a. Name: _____

b. Company: _____

c. Phone number(s): _____

d. E-mail: _____

e. Description of practices that will be used to ensure that buses always use ULSD (please attach description):

3. Number of buses in fleet that meet the following minimum requirements: _____

a. Model year 1994 or newer

b. Diesel engine

c. Gross vehicle weight rating \geq 19,500 pounds

d. Travel \geq 10,000 miles per year

e. In service \geq four days per week during the school year

4. For each bus you are requesting to retrofit through this program, please provide the following data on a separate piece of paper and attach it to this section:

a. Bus license number

b. Bus identification number

c. Bus manufacturer

d. Bus type

e. Bus location

f. Gross vehicle weight rating

g. Engine manufacturer

h. Engine model

i. Engine year

Section II Certification

With my signature, I certify that I have knowledge of the information contained in this section of the application and that this information is true, accurate and complete to the best of my knowledge and belief. If it is later determined that any information provided in this application is incorrect, I will promptly notify SRP in writing.

Fleet Manager:

Signature

Date

Printed name

Title

SECTION III: EMISSION CONTROL DEVICE

Delegate: Fleet Manager

Instructions: The Fleet Manager's office is responsible for filling out Section III: Emission Control Device.

Note: The A+ Bus Program requires that the retrofit of school bus diesel engines must achieve emission reductions of particulates of 60% to 90%, as measured from the pre-retrofit emissions for the particular diesel school bus.

1. Selected emission control device per choices offered in this application: _____
2. Please provide the following information about the selected control device:
 - a. Product type: _____
 - b. Manufacturer: _____
 - c. Any unusual circumstances (please attach description): _____
 - d. Product warranty (please attach documentation): _____
3. Please supply the following information in regard to your selected control device vendor:
 - a. Name: _____
 - b. Company: _____
 - c. Phone number(s): _____
 - d. E-mail: _____
4. Estimated cost per bus, including control technology cost, installation costs, data logging costs and maintenance costs (please attach a quote from your vendor listed in #3 who supplied you with this information, along with detailed documentation describing how costs were determined): \$ _____ /bus
5. Number of buses the district is requesting to participate in this program: _____
6. Total funding amount requested (multiply responses to #4 and #5): \$ _____

Section III Certification

With my signature, I certify that I have knowledge of the information contained in this section of the application and that this information is true, accurate and complete to the best of my knowledge and belief. If it is later determined that any information provided in this application is incorrect, I will promptly notify SRP in writing.

Fleet Manager:

Signature

Date

Printed name

Title

SECTION III: EMISSION CONTROL DEVICE

TABLE 1-1: EPA-VERIFIED TECHNOLOGIES AS OF FEBRUARY 2010 FOR $\geq 60\%$ PM REDUCTION							
Emission Control Device	Manufacturer	Product/Technology	Applicability	Reductions			
				PM (%)	CO (%)	NOx (%)	HC (%)
A	Engine Control Systems	Purifilter Plus /passive diesel particulate filter (DPF) including active regeneration at garage/maintenance yard	Highway; heavy, medium and light heavy-duty; urban bus; four-cycle; model years (MY) 1994–2006; turbocharged or naturally aspirated; non-EGR engines	90	75	N/A	85
B	Engine Control Systems	Purifilter /passive DPF using exhaust heat	Highway; heavy and medium heavy-duty; urban bus; four-cycle; MY 1994–2003; turbocharged or naturally aspirated; non-EGR engines	90	75	N/A	85
C	Johnson Matthey	CRT+ (Continuously Regenerating Technology)/passive regenerating DPF	Highway; medium and heavy heavy-duty; four-cycle; non-EGR; MY 1994–2006; turbocharged or naturally aspirated engines	90	72	N/A	93
D	Johnson Matthey	ACCRT (Advanced Catalyzed CRT)/passive DPF combined with a downstream NO ₂ decomposition device	Select MY 2002–2006 on-road heavy-duty diesel engines; 2.5g NO _x EGR and non-EGR engines	90	50	N/A	N/A

TABLE 1-2: CARB-VERIFIED TECHNOLOGIES AS OF FEBRUARY 2010 FOR $\geq 60\%$ PM REDUCTION							
Emission Control Device	Manufacturer	Product/Technology	Applicability	Reductions			
				PM (%)	NOx (%)		
E	Cleaire	Horizon /active DPF with electric heater regeneration	Most four-stroke, on-road diesel engines MY 1993–2006 (specific MY 2006); OE diesel oxidation catalysts; no two-stroke engines; no OE DPR	85	N/A		
F	Cleaire	Longview /passive DPF with a lean NO _x catalyst	MY 1993–2006 heavy-duty diesel engines in on-road vehicles; no two-stroke engines; no OE DPF; no external EGR; turbocharged engines only	85	25		
G	Cleaire	Vista /active DPF with diesel burner regeneration	MY 1993–2006 heavy-duty diesel engines used in on-road vehicles (light-duty cycle); no two-stroke engines; no OE DPF; no OE oxidation catalyst; no external EGR	85	N/A		
H	Donaldson	LNF (Low NO ₂ Filter)/catalyzed pre-filter and a catalyzed DPF with a back pressure monitor	MY 1993–2006 high NO _x diesel engines used in on-road applications; four-stroke, turbocharged engines; select EGR and non-EGR	85	N/A		
I	Donaldson	LXF (Low NO _x Filter)/catalyzed pre-filter and a catalyzed DPF with a back pressure monitor	MY 2002–2006 low NO _x diesel engines used in on-road applications; four-stroke, turbocharged engines; select EGR and non-EGR	85	N/A		
J	Donaldson	SEF (Semi-Active Electric Filter)/diesel oxidation catalyst, heating element and an un-catalyzed DPF with a back pressure monitor	MY 1991–2006 diesel engines used in on-road applications; four-stroke, turbocharged or naturally aspirated	85	N/A		
K	HUSS	FS-MK /series of DPFs that use a silicon carbide wall-flow filter with a fuel burner for regeneration	Most on-road engines through MY 2006 and most off-road diesel engines through MY 2008	85	N/A		
L	Johnson Matthey	EGRT (Exhaust Gas Recirculation Technology)/combination of an exhaust gas recirculation system and a DPF	2000 International DT-466, 2000 Cummins ISM, 2001 Cummins ISB, 1998–2002 Cummins ISC, 2001 Cummins ISL, 2001 DDC – 50 and 2001 DDC – 60; on-road; CARB diesel	85	40		
M	SK Energy	Econix DPF-A /active DPF that includes a metal mesh wall-flow filter, a diesel-fueled burner assembly and a system controller	MY 1994–2006; on-road; CARB diesel	85	N/A		

Notes:

- (1) Technology must be EPA- or CARB-verified emissions control technology.
- (2) Technology must achieve emission reductions of particulates of 60% to 90%, as measured from the pre-retrofit emissions from the particular diesel school bus.

SECTION IV: PROJECT SCHEDULE

Delegate: Fleet Manager

Instructions: The Fleet Manager is responsible for filling out Section IV: Project Schedule.

Assuming funding was reserved for your district on January 3, 2011, please attach a project schedule including dates on which:

- a. The contract will be signed with the vendor(s) that will perform the control device installation;
- b. The contract will be signed with the fuel supplier for ULSD (if necessary);
- c. Fueling policies will be adopted to ensure the use of only ULSD in the retrofitted buses;
- d. Installation of the control devices will be initiated;
- e. Installation of the control devices will be completed for all buses in the project; and
- f. Project completion documentation will be submitted.

Section IV Certification

With my signature, I certify that I have knowledge of the information contained in this section of the application and that this information is true, accurate and complete to the best of my knowledge and belief. If it is later determined that any information provided in this application is incorrect, I will promptly notify SRP in writing.

Fleet Manager:

Signature

Date

Printed name

Title

SECTION V: EDUCATIONAL PROGRAM

Delegate: Superintendent

Instructions: The Superintendent's office is responsible for filling out Section V: Educational Program. SRP will provide educational materials related to air quality, environment and pollution control. Please describe how the educational materials provided by SRP will be incorporated into the curriculum at schools within the district, including which grade levels will be impacted. (Please attach additional information.)

Section V Certification

With my signature, I certify that I have knowledge of the information contained in this section of the application and that this information is true, accurate and complete to the best of my knowledge and belief. If it is later determined that any information provided in this application is incorrect, I will promptly notify SRP in writing.

Superintendent:

Signature

Date

Printed name

Title

SECTION VI: MINIMUM REQUIREMENTS & CERTIFICATIONS

Delegate: Superintendent

Instructions: The Superintendent's office is responsible for certifying Section VI: Minimum Requirements & Certifications.

If your district is selected for the SRP A+ Bus Program, the Superintendent must certify the following is true:

1. The school district is able to complete the installation of the retrofit equipment within three months of being notified of selection for the program.
2. The school district agrees to allow representatives of SRP and the EPA to have access to buses participating in the program as well as related project records for the purposes of inspection and data verification.
3. The school district ensures that it will comply with local, state and federal requirements for the disposal of waste generated from the control technology.
4. The school district agrees to deliver an objective results summary report within 60 days of the end of the first full school year following installation of the school bus control device.
5. The school district agrees to submit detailed annual reports at the conclusion of every school year through the school year ending in 2015.
6. The school district will make all reasonable efforts to use and maintain the equipment purchased and installed under the SRP A+ Bus Program from the date of installation through December 31, 2015.
7. The school district agrees to maintain records of the district's involvement in the A+ Bus Program, including installation and related maintenance records.
8. The school district will use funding under this program for the specific purposes identified in the program description.
9. The buses retrofitted with pollution control equipment under this program will conform to the program requirements.
10. Buses retrofitted under this program are owned and operated by the applicant, and the applicant is a school district.
11. The school district will avail itself of the warranty as needed to ensure that the equipment funded under this program remains in good working order through December 31, 2015.
12. The school district will not use funding under this program to purchase hardware, services or fuel for which the school district has received, or will receive, payment from another source or under another program.
13. The school district will only use ULSD in the buses retrofitted under this program.
14. The school district will clearly label ULSD tanks and retrofitted buses with "use only ULSD fuel."
15. The school district will receive approval from the school board or other governing body to apply and make use of the funding under this program.
16. The school district will follow district procedures to procure the products and services funded under this project.

Section VI Certification

With my signature, I certify that I have knowledge of the information contained in this section of the application and that this information is true, accurate and complete to the best of my knowledge and belief. If it is later determined that any information provided in this application is incorrect, I will promptly notify SRP in writing.

Superintendent:

Signature

Date

Printed name

Title

SECTION VII: APPLICATION CHECKLIST & CERTIFICATION

Delegate: Superintendent

Instructions: The Superintendent's office is responsible for certifying the application in its entirety. Please complete the following checklist and review all information provided in each section to ensure completeness and accuracy.

Application Checklist

- Section I: General Information, Superintendent
- Section II: Fleet & Fuel Supply Information, Fleet Manager
- Section III: Emission Control Device, Fleet Manager
- Section IV: Project Schedule, Fleet Manager
- Section V: Educational Program, Superintendent
- Section VI: Minimum Requirements & Certifications, Superintendent
- Section VII: Application Checklist & Certification, Superintendent

Section VII Certification

With my signature, I certify that the information contained in this application is true, accurate and complete to the best of my knowledge and belief. If it is later determined that any information provided in this application is incorrect, I will promptly notify SRP in writing.

Superintendent:

Signature

Date

Printed name

Title