

United States Environmental Protection Agency National Clean Diesel Rebate Program Rebate Application

OMB Number: 2060-0686 Expiration Date: 10/31/2015

Α	pplicant Information		Year 2013	Target Flee	et Con	struct	ion	Reba	te Type	Retro	ofit/Replac	cement	
	Organization Name												
	Address												
	City		c	County/Parish				Sta	ite		ZIP		
Employer/Taxpayer No. (EIN/TIN)				Organizational DUNS Code									
	Eligible Entity Information (Private Equipment Owner Applicants Only) Private equipment owners are able to apply for funding from the National Clean Diesel Rebate Program if the equipment, for which funding is being requested, is currently contracted or leased to an eligible entity. An eligible entity is a federal, regional, State, local, olivinal gency or port authority with jurisdiction over transportation or air quality. For additional information regarding private equipment owner application and argible entities, please refer to the Program Guide.												
	Eligible Entity Type		Eligible Entity	Name				digita	le Thuy	Location	on (City, Stat	te)	
	I certify the equipment, for which rebate funds are being requested, meet the requirements for private equipment owners as described above and in the terms and conditions within the Program Guide.												
0	Priginal Equipment												
	Equipment Type	Techn	nology **	Engine Serial Number	n lgir	Name	Engine Model Year	Gals Used Last 12 Mos	Hrs of Use Last 12 Mos	HP	Location Operation County		Rebate Amoun
*	Excavator	T1	to T3	6NC13641	YC 10	.SMRF	2000	3759	500	225	Lake	IN	\$15,000
*	Crane	T3 ac	dd DPF	MWX 642	5XL12	.5ESK	2008	4632	600	388	Cook	IL	\$30,000
1													
2													
3			.0.										
4													
5		420											
Ξxa	imple	**	julated, also re	ferred to as Tier	r 0				l	1	Total	\$	6
	I certify that the grees listed for retrofit or replacement are operational and meet the eligibility regiments defined in the Program Guide. Replacements ally: I certify that the engines listed for replacement will be properly disposed of according to the requirements defined in the Program Guide.												
Α	pplicant Signature	,											
	By signing, I certify the statements and information provided in this application are true and accurate to the best of my knowledge. If selected for funding, I agree to provide the required documentation and assurances necessary for funding.												
	Funding for the National Clean Diesel Rebate Program is subject to continuing federal appropriations. Please see the Program Guide for additional funding information.												
	Authorized Representative Name												
	Title		E-mail							Phone	2		
	Authorized Represen	itative Signat	ture							Date			

Rebate Application Instructions EPA Form 5600-260

Applicant Information					
Item:	Entry:				
Organization Name	Enter the legal name of Applicant applying for the rebate.				
Address	Enter the Street Address where the Applicant is located.				
City	Enter the City where the Applicant is located.				
County / Parish	Enter the County / Parish where the Applicant is located				
State	Enter the State where the Applicant is located.				
Zip	Enter the Zip where the Applicant is located.				
Employer / Taxpayer Number (EIN/TIN)	Enter the Employer or Taxpayer Ident heatic Number (EIN or TIN) as assigned by the Internal Revenue Se vice.				
Organizational DUNS Code	Enter the Applicant's DUNS or I C IS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number can be found at www.dnb.com .				
Eligible Entity Type	For Private Equipment Owner Applicants Only - In order to be eligible to apply for rebate fraction the Applicant must own and operate the equipment under a contract, or lease with one of the following entities with jurisdiction of extransportation or air quality: a releast department or agency bar gional, state, local, or tribal government agency or port authorities Estate type of the entity with which the Applicant has a current contract clease for operation of the equipment (e.g., "state agency").				
Eligible Entity Nam	For Private Equipment Owner Applicants Only - Enter the name of the entity with which the Applicant has a current contract or lease for operation of the construction equipment (e.g., "Tennessee Department of Environment").				
Eligible Entity Location (City, State)	For Private Equipment Owner Applicants Only - Enter the location (city and state) where the Eligible Entity with which the Applicant has a current contract or lease is located.				
Eligible Entity Certification	For Private Equipment Owner Applicants Only - Check the box to certify that the Applicant's equipment, for which rebate funds for retrofits or replacements are being requested, meet the requirements for private equipment as described above and in the Program Guide.				

Original Equipment					
Item:	Entry:				
Equipment type	Select from drop down menu.				
Technology	Select from drop down menu.				
Existing Engine Serial Number	Enter engine serial # for current engine. See Appendix D in Program Guide				
Existing Engine Family Name	Enter family name for the current engine. See Appendix D in Program Guide				
Existing Engine Model Year	Enter model year of current engine. See Appendix D in Program Guide				
Gals Used Last 12 mos	Enter gallons of diesel fuel used in last twelve months for this pi ce of equipment				
Hrs of Use Last 12 mos	Enter hours of operation for the equipment in the last twelv in mass				
Location of Operation	Enter county and two letter state abbreviation for county who equipment is operated at time of application and the three months plant application.				
Rebate Amount	Select from drop down box				
Total Rebate Funds Requested	Sum the requested rebate amounts for e ch piccs of equipment and enter the total.				
Eligibility Certification	Check the box to certify that the equipment are operational and meet the eligibility requirements defined in the Program G. ide.				
Scrappage Certification	Check the box to certify that a periphent will be properly disposed of according to the requirements defined in the Program Guide.				

Applicant Signature

Statement Certification	Check the Applicant Signature box to certify that the statements and information provided in this application are true and accurate to the best of the Applicant kin wledge. By checking the box, Applicant agrees to provide the require documentation and assurances necessary for funding.
Name, Title, E-mail, Phone, Signature, Date	representative of the Applicant initiation. Enter the name (first and last name required), title (required), Email address (required), and telephone number (required), of the person authorized to sign for the Applicant.

Application policy in the first solution of the original bill of sale, original invoice, or other documentation had demonstrates ownership for each piece of equipment to be replaced. Please review the Program tuide (see Appendix C - Rebate Application Checklist) to ensure all program requirements have been met before submitting application packages to CleanDieselRebate@epa.gov.

The public reporting and recordkeeping burden for this collection of information is estimated to average 4 hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. **Do not** send the completed form to this address.