



Please scan and email application forms to: [dieselsolutions@pscleanair.gov](mailto:dieselsolutions@pscleanair.gov)

If you have any questions, please contact **Beth Carper** at **206-689-4057**.

## A. APPLICANT INFORMATION

Company:		
Project Contact:	Tel #:	E-mail:
Mailing Address:		
Website:	Date:	

## B. PROJECT INFORMATION

Vessel Type:  Ferry/Excursion  Pilot  Tug/Tow Boat  Work Boat  Other \_\_\_\_\_

Vessel Name or Identification Number: \_\_\_\_\_ Fleet Type:  Public  Private

Description of primary routes or areas of operation and percent of time on those routes or in those areas:  
\_\_\_\_\_ : \_\_\_\_\_ %  
\_\_\_\_\_ : \_\_\_\_\_ %

Please indicate route or areas of operation on map on Page 2.

How soon would you rebuild the engines on this vessel without any grant funds? \_\_\_\_\_ years

What is the total estimated cost of the project?

Estimated labor cost Estimated equipment cost

Existing Propulsion Engines		New Propulsion Engines	
Engine Tier:	No. of Engines:	Engine Tier:	No. of Engines:
Manufacturer:	Model:	Manufacturer:	Model:
Year:	Size (kW):	Year:	Size (kW):
Fuel Type: <input type="checkbox"/> Diesel <input type="checkbox"/> Other:		Fuel Type: <input type="checkbox"/> Diesel <input type="checkbox"/> Other:	
Annual Gallons of Fuel Used <b>per Engine</b> :		Annual Gallons of Fuel Used <b>per Engine</b> :	
Liters Displaced per Cylinder:		Liters Displaced per Cylinder:	
Annual Hours of Operation <b>per Engine</b> :		Annual Hours of Operation <b>per Engine</b> :	

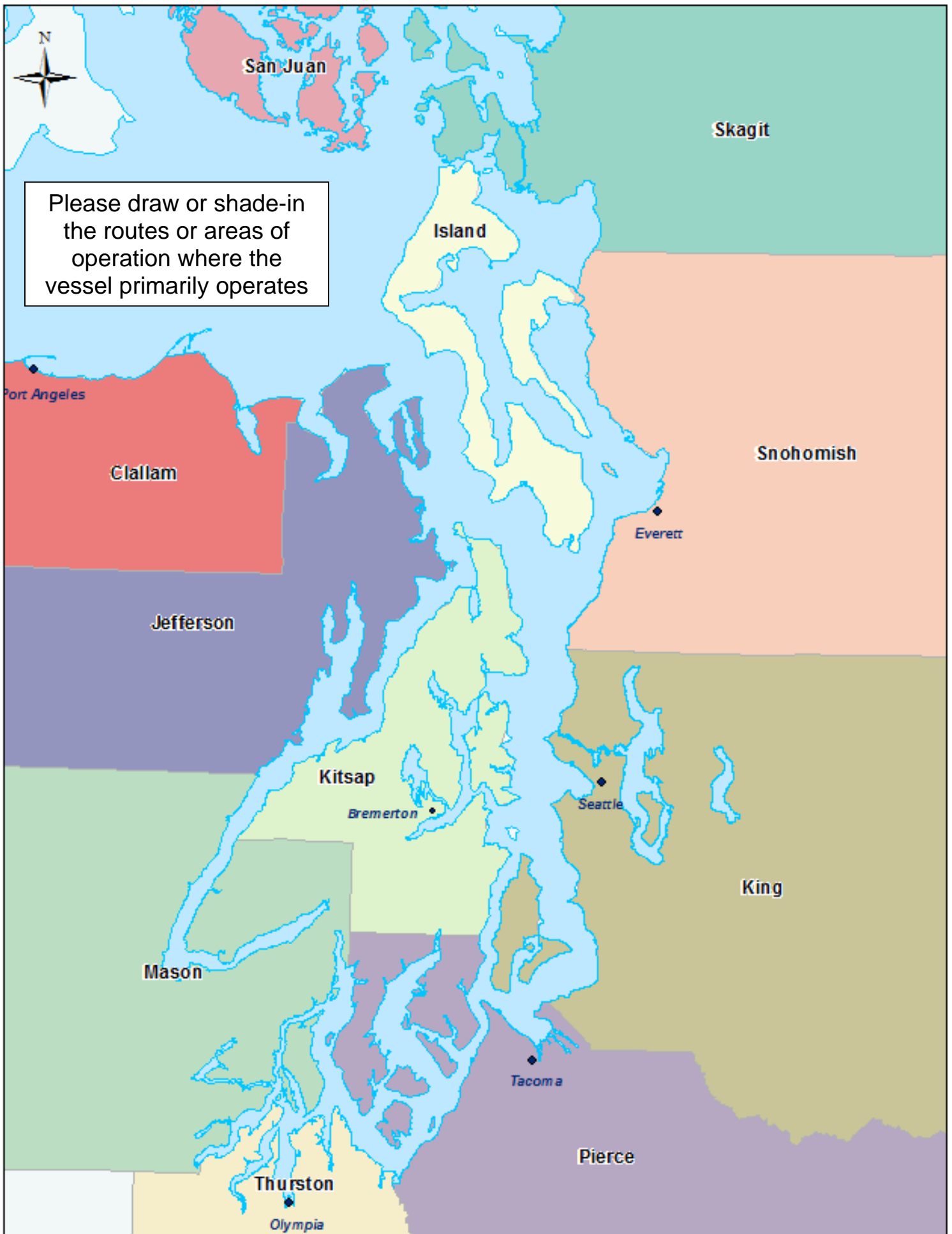
Are you willing to promote the success of this project?  Yes  No

Are you willing to promote other green activities your company has completed?  Yes  No

I verify that the information I am providing is true and accurate to the best of my knowledge:

Authorized Signatory: \_\_\_\_\_ Date: \_\_\_\_\_

Name Printed: \_\_\_\_\_ Title: \_\_\_\_\_



Please draw or shade-in the routes or areas of operation where the vessel primarily operates