

A. Contact Information			
1. Company name:		2. Website:	
3. Primary contact:		4. E-mail:	
5. Mailing address:			6. Tel #:
B. Project Overview			
7. Sector:	Off-Road Vehicles (port/rail/transfer station)	Off-Road Vehicles (construction)	On-Road Vehicles
8. Project type:	Vehicle Replacement	Engine Replacement/Conversion	Retrofit
9. Project Description:			
10. Infrastructure. Does your project involve charging equipment costs?			Yes No
11. Project period. 11a. Start date:		11b. Completion Date:	
12. Project costs. 12a. Vehicle/Engine:		12b. Vehicle/Engine related labor:	
12c. Charging equipment:		12d. Charging related labor:	
12e. Total project cost:			
13. Promotion of new technology. Will this project help promote the adoption of new technology? If so, how?			
C. Impacted Communities			
There is a direct correlation between racial and social equity and environmental health. Addressing equity is critical to the Agency's mission to protect public health and reduce our region's contribution to climate change. We will prioritize projects with large emission reductions that also positively impact local communities with higher environmental health and racial equity barriers. Questions 14-17 are intended to explore how your project might benefit these communities.			
14. Communities. 14a. Describe the people or communities that will benefit from or be affected by this project such as: communities of black, indigenous, or people of color; employees; customers; residential areas; schools, or hospitals.			
14b. Determine the Department of Health's environmental health disparity ranking for your project area by going to <a href="https://fortress.wa.gov/doh/wtn/wtnibl/">https://fortress.wa.gov/doh/wtn/wtnibl/</a> . Select 'Environmental Health Disparities' in the top left to view the map. Click on the exact location of project and rank will appear in left-hand column adjacent to "Environmental Health Disparities V 1.1" Rank: _____			
15. Unintended Impacts. What are potential unintended impacts from this project (e.g. road congestion due to construction or workforce reductions due to autonomous vehicles) on communities identified in question 14a? How might additional outreach and education mitigate these impacts?			
16. Community Outreach. 16a. Are you willing to promote this project and participate in outreach activities?			Yes No
16b. Are you okay with the Agency promoting this project?			Yes No
17. Community Relationships. Describe any past and present community engagement activities undertaken by your company (e.g., environmental sustainability efforts, volunteering activities, community outreach/events, social justice activities, partnerships, coalitions etc.)			

D. Existing Diesel Vehicle/Equipment Information				
18. Vehicle type:	19. No of vehicles:	20. Class:	5/6	7 8 n/a
21. Vehicle manufacturer:		22. Engine manufacturer:		
23. Vehicle model:		24. Engine model:		
25. VIN:		26. Engine Serial #:		
27. Engine year:	28. Engine size (hp):	29. Engine Tier:		
30. Annual operation (hours/year): (If off-road vehicle)		31. Annual vehicle miles traveled, VMT (miles/year): (If on-road vehicle)		
32. Annual fuel use (gal/year):		Estimated remaining useful life (years):		
34. Location. 34a. Address of existing vehicle: 34b. Description of operation route:  34c. Operation in region: King County: _____%, Kitsap County: _____%, Pierce County: _____%, Snohomish County: _____%				
E. Proposed Vehicle/Equipment Information				
35. Vehicle type:	36. No of vehicles:	37. Class:	5/6	7 8 n/a
38. Fuel type:	Diesel	Propane	Compressed natural gas	Liquefied natural gas Electric
39. Vehicle manufacturer: (if replacing the vehicle)		40. Vehicle model: (if replacing the vehicle)		
41. Engine manufacturer: (if replacing the engine)		42. Engine model: (if replacing the engine)		
43. Engine year:	44. Engine size (hp):	45. Engine Tier:		
46. Annual fuel use (gal/year):				
47. Annual operation (hours/year): (If off-road vehicle)		48. Annual vehicle miles traveled, VMT (miles/year): (If on-road vehicle)		
49. Location. (if different than above) 49a. Address of new or upgraded vehicles: 49b. Description of operation route:  49c. Operation in region: King County: _____%, Kitsap County: _____%, Pierce County: _____%, Snohomish County: _____%				
F. Authorized Signature				
I certify that the information I am providing is true and accurate to the best of my knowledge.				
Authorized signature:			Date:	
Printed name:		Title:		