

**Delaware Heavy Duty Vehicle Rebate Program****\$20,000****Heavy Duty Natural Gas Vehicle Rebate Application Form**

Invoice Number (internal)

**Division of Energy and Climate****100 W. Water Street, Suite 5A, Dover, DE 19904****Phone: (302) 735 - 3480 & Fax (302) 739 - 1840****Website: <http://www.dnrec.delaware.gov/energy>****Submit Application to: [DNREC.Transportation@state.de.us](mailto:DNREC.Transportation@state.de.us)****Applicant Information/ Primarily Point of Contact**

Name of Company:

Name of Contact (First and Last name)

Federal Tax ID #

Daytime Phone:

Cell Phone:

Mailing Address:

City:

State:

Zip code:

Street Address (as it appears on Driver's License):

City:

State:

Zip code:

Driver's License Number and State:

**Motor Carrier Information**

Motor Carrier Name:

Company Contact Person (first and last name):

Motor Carrier USDOT or  
DeIDOT #

Email Address (for Retrofitter Contact Person):

Federal Tax ID #

Mailing Address:

City:

State:

Zip code:

Daytime Phone:

**Vehicle Information**

Make:

Model:

Year:

Vehicle Identification Number (VIN):

Manufacturer:

Base Vehicle Cost (\$)

Natural Gas Vehicle Cost (\$)

Gross Vehicle Weight (pounds)

Estimated Vehicle Miles (annual)

Estimated MPG of comparable vehicle with comparable duty cycle in fleet

Lease Vehicle

Comparable Vehicle Fuel Source (check)

diesel

gasoline

Yes

No

## Delaware Heavy Duty Vehicle Rebate (cont.)

### Applicant/Primary Point of Contact Name :

### Documentation Requirements

The documents listed below must be submitted with your application to the Heavy Duty Vehicle Rebate Program:

1. State Substitute W-9 Form      Please fill out and submit the W-9 online at <https://w9.accounting.delaware.gov/W9form.aspx>

### Applicant/Point of Contact Declarations

#### Purchaser must initial each clause in space provided:

\_\_\_\_\_ I have read, understand, and agree to the eligibility requirements (see attached).

\_\_\_\_\_ I certify that I am representing a commercial entity, non-profit, individual, or business located in the State of Delaware and the information provided on this application is true and correct.

\_\_\_\_\_ I acknowledge that I must continue to operate the applied for vehicle in the State of Delaware for a period of no less than 3 years and submit quarterly vehicle mileage to the Division of Energy and Climate for a period of 3 years.

\_\_\_\_\_ I understand that funding is limited and all rebates are subject to funding availability and this application does not guarantee payment.

\_\_\_\_\_ I understand that only vehicles retrofitted between November 1, 2016 and June 30, 2018 are eligible for the Delaware Heavy Duty Vehicle Rebate Program.

\_\_\_\_\_ I understand that incomplete applications will not be processed and submitting an incomplete application may result in loss of rebates due to limited funding availability.

\_\_\_\_\_ I understand that I must submit a "7 day form", "30 day form" and "Reimbursement Completion Form" along with all required documentation supporting documentation to DEC within 120 days of the rebate award notice. A "120 Day Extension Form" must be submitted if the vehicle delivery does not occur within 120 days of receiving the Rebate Commitment Letter.

### Signature

#### Applicant/Point of Contact

Printed  
Name:

\_\_\_\_\_

Signature:

\_\_\_\_\_

Date:

### Motor Carrier Declarations

#### Purchaser must initial each clause in space provided:

\_\_\_\_\_ I have read, understand, and agree to the eligibility requirements (see attached).

\_\_\_\_\_ I certify that I am authorized to make representations on behalf of the motor carrier and that the contents in this application are true and correct.

\_\_\_\_\_ I acknowledge that I must continue to operate the applied for vehicle in the State of Delaware for a period of no less than 3 years and submit quarterly vehicle mileage to the Division of Energy and Climate for a period of 3 years.

\_\_\_\_\_ I understand that funding is limited and all rebate are subject to funding availability and this application does not guarantee payment.

\_\_\_\_\_ I affirm that the motor carrier has applied for and received no more than 5 rebate under this program.

\_\_\_\_\_ I understand that only vehicles retrofitted between November 1, 2016 and June 30, 2018 are eligible for the Delaware Heavy Duty Vehicle Rebate Program.

\_\_\_\_\_ I understand that incomplete applications will not be processed and submitting an incomplete application may result in loss of rebate due to limited funding availability.

**Signatures**

**Motor Carrier**

Printed  
Name:

\_\_\_\_\_

Signature:

Date:

Submit all applications to [DNREC.Transportation@state.de.us](mailto:DNREC.Transportation@state.de.us) or 100 W. Water Street, Suite 5A. Dover DE. 19904