

SAN JOAQUIN VALLEY AIR POLLUTION CONTROL DISTRICT  
**AGENCY APPLICATION**  
**REMOVE II**  
VANPOOL VOUCHER INCENTIVE PROGRAM

*Please fill out in **blue ink***

1. Agency:		
2. Contact:		
3. Signing Authority:		
4. Required – TAX ID #		
5. Address:		
6. City:	7. State:	8. Zip Code:
9. Mailing Address (If different from above):		
10. City:	11. State:	12. Zip Code:
13. Contact Phone Number:	14. Contact E-mail:	
15. Total Fleet #:		
16. Indicate which counties your agency operates vanpools (including counties outside of the District):		

**Required Documentation**

- Complete Application
- Copy of Insurance
- Form W-9

**Procedures**

- Fill out a REMOVE II Vanpool Voucher Incentive Program: Participating Vanpool Agency Application and submit with additional documents.
- After acceptance into Vanpool Voucher Incentive Program, sign contract agreement with District.

### Certifications

I have read the RFA and Program Guidelines and agree to **ALL** the following terms and conditions by initialing each of the following sections:

- Initial \_\_\_\_\_ Vanpool must originate within the boundaries of the District and must commute a minimum of twenty (20) miles one-way; however, the final destination of the vanpool may be outside of the District boundaries.
- Initial \_\_\_\_\_ Vanpools funded by District will **not** be used as marketable emission reduction credits, or to offset any emission reduction obligation.
- Initial \_\_\_\_\_ The driver of each vanpool has signed an agreement with the participating vanpool agency to operate the vanpool in a nonprofit manner.
- Initial \_\_\_\_\_ The driver has a Class C license, carries proof of a Class B medical, and maintains in the vehicle a signed statement or declaration per Section 12804.9, j.
- Initial \_\_\_\_\_ The vehicle is maintained and serviced to meet the requirements found in AB 550 and Section 34509, a through e, of the Vehicle Code.
- Initial \_\_\_\_\_ Owner has disclosed any additional funding sources, or other financial incentive(s) and funding amounts to be used towards this program.
- Initial \_\_\_\_\_ The vanpool shall be equipped with an operable fire extinguisher which is of the dry chemical or carbon dioxide type and an aggregate rating of at least 4-B:C and which is securely mounted and readily accessible.
- Initial \_\_\_\_\_ The vanpool vehicle shall be equipped with a first aid kit, conforming to the minimum requirements for school buses. First aid kits shall be readily visible, accessible, and plainly marked "First Aid Kit."
- Initial \_\_\_\_\_ The vanpool vehicle shall be regularly and systematically inspected, maintained, and lubricated in accordance with the manufacturer's recommendations, or more often if necessary to ensure the safe operating condition of the vehicle. The maintenance shall include, as a minimum, an in-depth inspection of the vehicle's brake system, steering components, lighting system, and wheels and tires, to be performed at intervals of not more than every six months or 6,000 miles, whichever occurs first.
- Initial \_\_\_\_\_ Vanpool vehicles being operated pursuant to the exceptions specified in this section shall display, upon the rear and sides of the vehicle, a sign or placard, clearly visible and discernable for a distance of not less than 50 feet, indicating that the vehicle is being used as a vanpool vehicle.
- Initial \_\_\_\_\_ Detail maintenance and repair records must be maintained. A summary of routine maintenance and inspections is kept in the vehicle.
- Initial \_\_\_\_\_ The participating vanpool agency will submit redeemed vouchers to the District for reimbursement along with a Claim for Payment Form on a regular basis.
- Initial \_\_\_\_\_ Follow all rules and guidelines set forth by the District under the REMOVE II Vanpool Voucher Incentive Program.

I hereby certify that all information provided in this application and any attachments are true and correct to the best of my knowledge (*Please Initial and sign in blue ink*).

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Signing Authority Signature

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Date

Please return all completed applications to the Central Regional Office ONLY:

San Joaquin Valley Air Pollution Control District  
Strategies and Incentives Program  
1990 East Gettysburg Avenue Fresno, CA 93726-0244  
Phone: (559) 230-5800 | Fax: (559) 230-6112