

Please return all completed applications to:
 SJVAPCD Strategies and Incentives Department
 1990 East Gettysburg Avenue; Fresno, CA 93726-0244



San Joaquin Valley
 AIR POLLUTION CONTROL DISTRICT

PUBLIC BENEFIT GRANTS PROGRAM
New Alternative Fuel Vehicle Purchase
Application

Applicant Information

1. Public Agency Name (as it appears on Form W-9): County of Fresno		
2. Tax ID: Taxpayer ID Number (TIN) 94-6000512		
3. Address: 2281 Tulare St. Room #105		
4. City: Fresno	5. State: CA	6. ZIP Code: 93721
7. Mailing Address (if different from above): NA		
8. City: NA	9. State: NA	10. ZIP Code: NA
11. Have you applied to any other grant programs for any vehicle in this application? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – Name of Grant Program(s): _____		

Primary Contact Information

1. First Name: Stan		2. Last Name: Tiller	
3. Title: Interim Fleet Services Manager		4. E-Mail: STiller@co.fresno.ca.us	
5. Phone Number: (559) 600-7528	6. Alternate Contact Number: (559) 600-7530	7. Fax Number: (559) 600-7508	

Contract Signing Authority

1. First Name: Robert		2. Last Name: Bash	
3. Title: Director of Internal Services/Chief Information Officer			

New Vehicle Information- Complete a separate page for each vehicle make/model

1. Number of Vehicles: 7		
2. Vehicle Type (<i>please select one</i>):		
Electric <input checked="" type="checkbox"/> Light-light Duty Vehicle (GVWR ≤ 8,500 lbs.) <input type="checkbox"/> Transport/Utility Cart <input type="checkbox"/> Scooter <input type="checkbox"/> Bicycle <input type="checkbox"/> Other (specify): _____	Plug-In Hybrid <input type="checkbox"/> Light-Light Duty Vehicle (GVWR ≤ 8,500 lbs.) <input type="checkbox"/> Light-Medium Duty Vehicle (GVWR 8,501 – 14,000 lbs.) <input type="checkbox"/> Other (specify): _____	CNG, LNG, or LPG <input type="checkbox"/> Light-light Duty Vehicle (GVWR ≤ 8,500 lbs.) <input type="checkbox"/> Light-Medium Duty Vehicle (GVWR 8,501 – 14,000 lbs.) <input type="checkbox"/> Transport/Utility Cart <input type="checkbox"/> Other (specify): _____
3. Vehicle Make: GEM	4. Vehicle Model: EM1400 LSV	5. Vehicle Model Year: 2018
6. Vehicle GVWR: 2953	lbs.	7. Engine Horsepower/Kilowatts: 7HP
8. Fuel Type: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Plug-In Hybrid <input type="checkbox"/> CNG <input type="checkbox"/> LNG <input type="checkbox"/> LPG <input type="checkbox"/> Other (specify):		
9. Manufacturer's estimated range for fully charged vehicle (electric vehicles only): Up to 45 miles		
10. Total Cost of each New Vehicle: \$14,087.70	11. Total Funding Requested from SJVAPCD (per vehicle): 98,613.87	
12. Is there existing charging/fueling infrastructure in place for the proposed vehicle(s)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, please describe a plan for building infrastructure or gaining access to existing infrastructure:		
13. How do you intend to pay for the remaining balance of the project after the grant has been applied? <input type="checkbox"/> Co-funding (please name source): _____ <input checked="" type="checkbox"/> Other (please specify): N/A		

New Vehicle Dealer Information

1. Vehicle Dealer Name: Tulare Polaris	
2. Contact / Salesperson Name: John Wainwright	3. E-mail: info@tularepolaris.com
4. Phone Number: (559) 685-9144	5. Fax Number: (559) 685-9146

Internal use only

GMS Unit(s): _____

New Vehicle Activity Information- Complete a separate page for each vehicle make/model
***If applying for multiple vehicles that will be performing different activities, please complete a separate section for each different vehicle activity**

1. Number of vehicles with same vehicle activity: 7		
2. Use within SJVAPCD boundaries: 100 _____ %	3. Use within CA boundaries: 100 _____ %	4. Estimated Annual Vehicle Usage (per vehicle): 450 hours _____
5. Vehicle Vocation/Use (examples: law enforcement, emergency services, commuting, patrol, pool vehicle, etc.): Probation, law enforcement, parks and facilities maintenance.		
6. Please mark the reason for purchasing the new vehicle(s): <input type="checkbox"/> Fleet Expansion - Please list the vehicle(s) you would have purchased had you not applied for this grant: <input checked="" type="checkbox"/> Vehicle Replacement - Please list the year, make, and model of the vehicle(s) to be replaced: 2013 Club Carryall 6 LSV; 2004 Chrysler GEM; 2006 Columbia C6E-48S; 2006 Columbia C6E-48S; 2006 Columbia C10E-48S; 2006 P4E-LE-48S; 2006 Columbia P4E-LE-48S. <input type="checkbox"/> Other - Please specify:		

Internal use only

GMS Unit(s): _____

New Vehicle Activity Information

1. Number of vehicles with same vehicle activity:		
2. Use within SJVAPCD boundaries: _____ %	3. Use within CA boundaries: _____ %	4. Estimated Annual Vehicle Usage (per vehicle): _____
5. Vehicle Vocation/Use (examples: law enforcement, emergency services, commuting, patrol, pool vehicle, etc.):		
6. Please mark the reason for purchasing the new vehicle(s): <input type="checkbox"/> Fleet Expansion - Please list the vehicle(s) you would have purchased had you not applied for this grant: <input type="checkbox"/> Vehicle Replacement - Please list the year, make, and model of the vehicle(s) to be replaced: <input type="checkbox"/> Other - Please specify:		

Internal use only

GMS Unit(s): _____

Signature Form
Signing Authority to *initial and sign in blue ink*

Certifications

By **initialing each of the following sections**, I certify that I have read the Eligibility Criteria and Application Guidelines and agree to **ALL** of the following terms and conditions:

The new vehicle(s) will be based within the geographic area of the SJVAPCD and seventy-five percent (75%) or more of the vehicle miles traveled or fuel consumption will be within the boundaries of the SJVAPCD for at least three (3) years from the date the vehicle is placed into service.

Initial RMB

The new vehicle(s) will be used by a public agency located within the geographic area of the SJVAPCD.

Initial RMB

The vehicle(s) purchased is/are a new OEM **electric, plug-in hybrid, or alternative fuel** vehicle(s) eligible for this program in accordance with the program guidelines.

Initial RMB

Appropriate fueling or charging infrastructure for the new vehicle(s) is or will be readily available or accessible.

Initial RMB

Any funding received, including funding from other sources, combined with this grant will not exceed the full cost of the new vehicle(s).

Initial RMB

Additional funding sources, or other financial incentive(s) and funding amounts to be used towards this project are disclosed on the application.

Initial RMB

Project match funding is reasonably available to complete the project in a timely manner.

Initial RMB

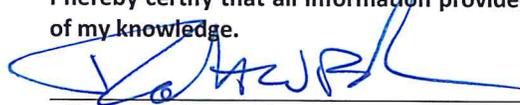
Applicant will not purchase or take delivery of the new vehicle(s) until receiving an executed contract with the SJVAPCD.

Initial RMB

SJVAPCD maintains the right to inspect the new vehicle(s) at any time during the contract period.

Initial RMB

I hereby certify that all information provided in this application and any attachments are true and correct to the best of my knowledge.



Signing Authority Signature

9/21/17

Date

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. COUNTY OF FRESNO		
	2 Business name/disregarded entity name, if different from above		
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input checked="" type="checkbox"/> Other (see instructions) ▶ GOVERNMENT		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) 3 Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) PO BOX 1247		Requester's name and address (optional)
	6 City, state, and ZIP code FRESNO, CA 93715		
	7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number	
[] [] [] - [] [] - [] [] [] []	
or	
Employer identification number	
9 4 - 6 0 0 0 5 1 2	

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	<i>Oscar J Garcia</i>	Date ▶ <i>11-3-16</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

- By signing the filled-out form, you:
1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 2. Certify that you are not subject to backup withholding, or
 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Application Packet Checklist

When submitting a project for consideration, submit a **complete** application packet. An incomplete application packet will lengthen the application processing time and delay possible incentive funding. A complete application packet includes the following items:

- Completed **Application** (Pages 1 thru 3), no required fields blank.
- Completed **Signature Form** (Page 4), signed in **blue ink**.
- First page of IRS **Form W-9**.
- Dated and itemized dealer **quote** for the new vehicle(s).
 - The quote must provide a breakdown of the total cost of the new vehicle and warranty (if not included in the purchase price), and include specific vehicle and engine information such as make, model, model year, engine horse power or watts, and vehicle GVWR.
- Resolution** from the Applicant's governing body (i.e. City Council or County Board of Supervisors), or other documentation signed by a duly authorized official with authority to make financial decisions, authorizing the submittal of the application and identifying the individual authorized to implement the new vehicle project.
- If applicable, documentation which demonstrates future availability/accessibility **and** specifies the timeframe when infrastructure will be available/accessible. Only applicants who currently do not have infrastructure, or access to infrastructure, specific to the new vehicle(s) applied for in this project are required to submit this documentation.



TULARE POLARIS

1730 North "J" Street
 TULARE, California 93274
 PHONE: (559) 685-9144 • FAX: (559) 685-9146



SOLD TO

COUNTY OF FRESNO
 FLEET SERVICES DIVISION
 FRESNO CA 93702

PAGE
 1
 CASH CHG. F.P.
 ACCT. NO.
 00001

SALESMAN 1	PURCHASE ORDER NO.	R.O. NO.	P.L. NO. Q107085	INVOICE DATE 09/13/2017	TIME 02:25 PM	INVOICE NO.	QUOTE
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QUANTITIES			PART NUMBER	DESCRIPTION	VENDOR BIN LOC.	PRICES	
ORDERED	B/O	SHIPPED					
7	7	7	2018 GEM EM1400 LSV (L18U2NAFLA)	WHITE 7 UNITS			
7	7	7	2018 GEM EM1400 LSV WH ITE	NS		10999.00	76993.00
28	28	28	FREIGHT SXS	FREIGHT		945.00	6615.00
7	7	7	NEWTIRE	RECYCLE		1.75	49.00
7	7	7	2879109	RANGER MID		299.99	1750.00
7	7	7	POLY ROOF				
7	7	7	2879228 REVERSE	WARNING IN	NS	40.00	280.00
7	7	7	0752012 BATTERY	UPGRADE	NS	745.00	5215.00
1	1	1	DELIVERY TO	FRESNO	NS	200.00	200.00
UNITS HAVE A 7HP ELECTRIC MOTOR GVW 2953 LB DMV TO BE HANDLED BY FLEET SERVICES SALES TAX 8.5% 2 YR LIMITED WARRANTY (ATTACHING DETAILS TO EMAIL)							
VISIT US ONLINE AT TULAREPOLARIS.COM							

SHIP VIA

Parts Return Policy:
 No returns after 30 days. All returns must be in original packaging and in new condition. No returns on electrical (including stereo) items if removed from original packaging. Not responsible for customer ordering errors. Upon installation or replacement of new or aftermarket parts or equipment, failure to request and receive original equipment forfeits such items to the dealership to be utilized or disposed of at our discretion; this includes but is not limited to items replaced or repaired under factory warranty. Freight charges are non-refundable. 15% restocking fees on all special-order items if returned under the guidelines of this policy.

Signature: _____

PARTS	NONTAXABLE	49.00
	TAXABLE	91053.00
FREIGHT		
SALES TAX		7511.87
		98613.87



WARRANTY

LIMITED WARRANTY

POLARIS Sales Inc., 2100 Highway 55, Medina, MN 55340, gives a TWO-YEAR, 8,000-MILE (12,900-km) or 750-HOUR, whichever comes first, LIMITED WARRANTY on all components (except batteries) of your GEM vehicle against defects in material or workmanship. Mileage is unlimited for the first 6 months of the vehicle warranty. Any time after month 6, the vehicle warranty expires at 8,000 miles (12,900 km), at 750 hours or at the end of the two-year period, whichever comes first. This warranty covers the parts and labor charges for repair or replacement of defective parts and begins on the date of purchase by the original retail purchaser. This warranty is transferable to another consumer during the warranty period through a GEM dealer, but any such transfer will not extend the original term of either warranty. The duration of this warranty and/or the battery warranty may vary by international region based upon local laws and regulations.

BATTERY COVERAGE

Battery coverage in this Limited Warranty begins on the date of purchase by the original retail purchaser and continues for twenty-four months, 8,000 miles (12,900 km) or 750 hours, whichever comes first. Mileage is unlimited for the first 6 months of the battery warranty. Any time after month 6, the battery warranty expires at 8,000 miles (12,900 km), at 750 hours or at the end of the two-year period, whichever comes first. During this time period, POLARIS warrants your vehicle's batteries against defects in materials or workmanship. After the first six months in service, a defective battery will be replaced on a manufacturer/customer shared basis provided that the warranty limit of 8,000 miles (12,900 km) or 750 hours has not yet occurred. Review the following table for guidelines.

TERM FOR VEHICLES WITH LESS THAN 8,000 MILES (12,900 KM) OR 750 HOURS	WARRANTY COVERAGE FOR BATTERIES DEEMED DEFECTIVE BY GEM
Purchase Date - 6th Month of Service	100% of the cost of an approved GEM battery at a GEM dealer
7th - 12th Month of Service	75% of the cost of an approved GEM battery at a GEM dealer
13th - 18th Month of Service	50% of the cost of an approved GEM battery at a GEM dealer
19th - 24th Month of Service	25% of the cost of an approved GEM battery at a GEM dealer

REGISTRATION

At the time of sale, the Warranty Registration Form must be completed by your dealer and submitted to GEM within three days. Upon receipt of this registration,

WARRANTY

GEM will record the registration for warranty. No verification of registration will be sent to the purchaser as the copy of the Warranty Registration Form will be the warranty entitlement. If you have not signed the original registration and received the customer copy, please contact your dealer immediately. NO WARRANTY COVERAGE WILL BE ALLOWED UNLESS YOUR VEHICLE IS REGISTERED WITH GEM. Initial dealer preparation and set-up of your vehicle is very important in ensuring trouble-free operation. Purchasing a machine in the crate or without proper dealer set-up will void your warranty coverage.

LIMITATIONS OF WARRANTIES AND REMEDIES

This POLARIS limited warranty excludes any failures that are not caused by a defect in material or workmanship. **THIS WARRANTY DOES NOT COVER CLAIMS OF DEFECTIVE DESIGN.** This warranty also does not cover acts of God, accidental damage, normal wear and tear, abuse or improper handling. This warranty also does not cover any vehicle, component, or part that has been altered structurally, modified, neglected, improperly maintained, or used for purposes other than for which it was designed, or for any damages which occur during trailer transit or as a result of unauthorized service or the use of unauthorized parts.

This warranty excludes damages or failures resulting from: improper lubrication; corrosion, surface imperfections caused by external stress, heat, cold or contamination; operator error or abuse; improper component alignment, tension, adjustment or altitude compensation; snow, water, dirt or other foreign substance contamination; improper maintenance; modified components; use of aftermarket or unapproved components, accessories, or attachments; unauthorized repairs; or repairs made after the warranty period expires or by an unauthorized repair center.

This warranty excludes damages or failures caused by abuse, accident, fire, explosion, or any other cause other than a defect in materials or workmanship and provides no coverage for consumable components, general wear items, or any parts exposed to friction surfaces, stresses, environmental conditions and/or contamination for which they were not designed or not intended, including but not limited to the following items:

- Wheels and tires Painted or otherwise finished surfaces
- Suspension components Upholstery
- Brake components Engine components
- Seat components Drive belts
- Clutches and components Hydraulic components and fluids
- Steering components Circuit breakers/Fuses
- Batteries Electronic components
- Light bulbs/Sealed beam lamps

The battery coverage included in this warranty provides no coverage for:

- Batteries that fail due to lack of battery maintenance, over-charging, under-charging, abuse or neglect
- Batteries that fail due to fire, wreckage, explosion, or freezing
- Broken batteries

WARRANTY

- Batteries damaged by defective chargers
- Batteries to which an additive is added
- Batteries which have been improperly stored and allowed to discharge
- Any battery pack with a mixture of code dates or with other manufacturer's products
- Any battery improperly installed or with loose or corroded hardware

This warranty provides no coverage for personal loss or expense, including mileage, transportation costs, hotels, meals, shipping or handling fees, product pick-up or delivery, replacement rentals, loss of product use, loss of profits, or loss of vacation or personal time.

The exclusive remedy for breach of this warranty shall be, at POLARIS' sole option, repair or replacement of any defective materials, or components or products. **THE REMEDIES SET FORTH IN THIS WARRANTY ARE THE ONLY REMEDIES AVAILABLE TO ANY PERSON FOR BREACH OF THIS WARRANTY. POLARIS SHALL HAVE NO LIABILITY TO ANY PERSON FOR INCIDENTAL, CONSEQUENTIAL OR SPECIAL DAMAGES OF ANY DESCRIPTION, WHETHER ARISING OUT OF EXPRESS OR IMPLIED WARRANTY OR ANY OTHER CONTRACT, NEGLIGENCE, OTHER TORT OR OTHERWISE. THIS EXCLUSION OF CONSEQUENTIAL, INCIDENTAL, AND SPECIAL DAMAGES IS INDEPENDENT FROM AND SHALL SURVIVE ANY FINDING THAT THE EXCLUSIVE REMEDY FAILED OF ITS ESSENTIAL PURPOSE.**

THE IMPLIED WARRANTY OF FITNESS FOR A PARTICULAR PURPOSE IS EXCLUDED FROM THIS LIMITED WARRANTY. ALL OTHER IMPLIED WARRANTIES (INCLUDING BUT NOT LIMITED TO THE IMPLIED WARRANTY OF MERCHANTABILITY) ARE LIMITED IN DURATION TO THE ABOVE 2-YEAR, 8,000-MILE OR 750-HOUR WARRANTY PERIOD. POLARIS DISCLAIMS ALL EXPRESS WARRANTIES NOT INCLUDED IN THIS WARRANTY STATEMENT. SOME STATES DO NOT PERMIT THE EXCLUSION OR LIMITATION OF INCIDENTAL OR CONSEQUENTIAL DAMAGES OR ALLOW LIMITATIONS ON THE DURATION OF IMPLIED WARRANTIES, SO THE ABOVE LIMITATIONS OR EXCLUSIONS MAY NOT APPLY TO YOU IF INCONSISTENT WITH CONTROLLING STATE LAW.

HOW TO OBTAIN WARRANTY SERVICE

If your vehicle requires warranty service, you must take it to a GEM Servicing Dealer. When requesting warranty service, you must present your copy of the Warranty Registration form to the dealer. (THE COST OF TRANSPORTATION TO AND FROM THE DEALER IS YOUR RESPONSIBILITY). POLARIS suggests that you use your original selling dealer; however, you may use any GEM Servicing Dealer to perform warranty service.

IN THE COUNTRY WHERE YOUR PRODUCT WAS PURCHASED:

Warranty or Service Bulletin repairs must be done by an authorized GEM dealer. If you move or are traveling within the country where your product was purchased, Warranty and Service Bulletin repairs may be requested from any authorized GEM dealer that sells the same line as your product.