

Grant Application

As a part of the Port Authority of New York and New Jersey (the “Port Authority”) Truck Replacement Program (the “TRP” or “Program”) the Port Authority is accepting applications for grant funding to be applied toward the purchase of newer, and more environmentally friendly Class 8 drayage trucks. The Port Authority aims to incentivize the scrappage of Engine Model Year (“EMY”) 1998 through 2006 Class 8 drayage trucks, with United States Environmental Protection Agency (“EPA”) emission compliant Class 8 drayage trucks that have an EMY 2014 or newer.

To qualify for grant assistance for the purchase of a replacement Class 8 drayage truck, applicants must accurately complete this application. If additional information or documents are needed to complete this grant application, the applicant will be contacted using the information provided in Form 1, Part 2. All paperwork must be provided to Tetra Tech, Inc. (the “Port Authority Grant Administrator”) by email, mail or fax at the addresses as shown on page 4 of this application.

Completion of this application and submission of all supporting documentation does not guarantee that you will receive Program funding.

Important Program Information

- Only completed applications, as determined by the Port Authority, will be processed. All completed applications will be processed on a first-come, first-served basis with final right of approval reserved by the Port Authority. Applicants must comply with the following deadlines:
 - 10 business days to complete application;
 - 45 business days to pick the replacement truck and submit to program administrator for review and approval; and
 - 30 business days to purchase and replace the qualifying truck after program administrator approval of the replacement truck
- Applicants may only apply for grant funding for a maximum of two (2) replacement trucks or as approved by Program Administrator.
- Any funding awarded as a part of this Program may cover up to, but no more than, fifty percent (50%) of the replacement truck purchase price, or a maximum of \$25,000, whichever is less.
- If approved to participate in the Program, the participant is **required** to make a five (5) year Program commitment.
- For the duration of the five (5) year Program commitment, the participant’s replacement truck must perform regular operations at Port Authority Marine Terminals by making trips to the Marine Terminals for a minimum of 150 times per year.
- Applications are being sought from independent owner operators (IOO) and Licensed Motor Carriers (LMC) that meet Program requirements.

For additional information, assistance, or to receive application materials, please contact us by:

website: <https://www.panynj.gov/port/en/our-port/sustainability/truck-replacement-program.html>

email: panynj@tetrattech.com | phone: 866-515-1716 | Fax: 866-515-1716

Truck Replacement Program

- If approved to participate in the Program, you will be required to execute the programmatic Terms & Conditions, which further sets out the rules and requirements of participating in the Program.
- In order to be eligible for funding, you may **not** order or purchase any replacement truck prior to obtaining written approval from the Port Authority Grant Administrator. Any new truck purchased **prior** to written approval is **ineligible** for grant funding.
- In order to be eligible for grant funding, you may **not** scrap a truck prior to obtaining written approval from the Port Authority Grant Administrator. Any truck scrapped **prior** to written approval is **ineligible** for grant funding.
- Participants shall either coordinate delivery of the qualifying truck to be scrapped with the Scrappage Operator directly or allow a dealership to deliver the qualifying truck to the Scrappage Operator for scrappage. The qualifying truck must be delivered to the Scrappage Operator location with **the chassis attached, the engine intact and in drivable condition.**
- Participants will only be able to get replacement trucks from dealerships that have been approved to participate in this Program and have entered into a Dealership Participation Agreement with the Port Authority. The grant funding will be distributed to the participating dealership after the Port Authority receives confirmation that the replacement truck has been delivered to the applicant and the qualifying truck has been submitted for scrappage.
- None of the terms and conditions of this application may be modified or changed by the applicant in any way prior to submission. Applications submitted with altered language or forms will be voided and not processed.

Grant funding received under this Program shall not be combined with any other governmental financial purchase contributions.

Criteria for Eligibility of Applicants & Qualifying Trucks

- Qualifying applicants must have performed 150 or more drayage trips (with the Class 8 truck to be replaced) to Port Authority Marine Terminals during each 12 month period for the 24 months immediately preceding the submission of the application. Trips will be verified by the Port Authority Grant Administrator using the PortTruckPass system.
- Port Authority Marine Terminals consist of Port Newark/Elizabeth Port Authority Marine Terminal, Port Jersey Marine Terminal, Brooklyn Marine Terminal, and Howland Hook Marine Terminal.
- Qualifying applicants must currently own and operate the existing vehicle or equipment and have owned and operated the vehicle during the 24 months prior to replacement.
- To be eligible for funding, the existing vehicle must have accumulated at least 7,000 miles during each 12 months for the 24 months prior to replacement.

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Truck Replacement Program

- Qualifying applicants must not be delinquent in tolls for any Port Authority Bridge or Tunnel Crossings.
- Only Class 8 trucks with EMY 1998 through 2006 will qualify for replacement and scrappage under the Program.

Application Instructions

HOW TO APPLY:

1. Complete **Form 1 – Part 1: Notice of Obligations**. This part of the application must be initialed where applicable, signed and dated. Please check the Type of Applicant that best applies (IOO or LMC), see definitions below:

- **“Independent Owner/Operator”** or **“IOO”** shall mean a self-employed truck driver who owns and operates his or her own drayage truck(s) to earn a living.
- **“Licensed Motor Carrier”** or **“LMC”** shall mean a motor carrier company that is licensed either (1) by New York State to transport property, or (2) by the United States Department of Transportation as a Federal Motor Carrier. A motor carrier company that operates solely as an intrastate carrier in New Jersey and is exempt from all requirements to register with the Federal Motor Carrier Safety Administration qualifies under this definition.

2. Complete **Form 1 – Part 2: Designation of Officials and Access to Records Location**.
3. Complete and attach **Form 2 – Supplemental Application Form** for each drayage truck that you wish to replace using grant funding under this truck replacement program.

Please note:

- All forms must be legible and unaltered. None of the Terms and Conditions or the forms may be modified or changed by the applicant in any way prior to submission. Altered application forms will not be accepted or processed.
4. Submit a copy of title for each old **Qualifying Truck** – Title must be free and clear of all liens, applicant must be listed as the registered owner and the Vehicle Identification Number (the “VIN”) on the title must match the VIN on the grant application and vehicle registration.
 5. Submit copies of registration for each old **Qualifying truck** – Applicant must provide copies of the previous 24 months of vehicle registration. If a truck is seasonally registered, program qualifications will be evaluated on a case-by-case basis by the program administrator.
 6. Submit **Proof of Insurance** – Applicant must provide the old Qualifying truck’s Primary Liability Coverage for the previous 12 months (e.g. Acord form).
 7. Submit a photo of the qualifying truck’s **Gross Vehicle Weight Rating (GVWR)** – Applicant must submit a photo of the Manufacturer’s GVWR sticker, which can be found on the driver’s side doorframe.

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Truck Replacement Program

8. *(For Independent Owners/Operators (IOOs) only)* – Submit a copy of your **Commercial Driver License**. This requirement does not apply to Licensed Motor Carriers (LMCs).
9. Submit Truck Replacement Program Eligibility Certificate– Applicant must provide a completed and signed certificate verifying that the qualifying truck has accumulated at least 7,000 miles during each of the 12 months for the 24-month period prior to replacement
10. Applicants may be required to provide alternative documentation (e.g. bills of lading, invoices, trip tickets, driver’s logs, etc.) to verify that the qualifying truck complies with the 150-trip requirement.

APPLICATION PROCESS:

If the application and all supporting documentation has been submitted as required, the Port Authority Grant Administrator will review the application. The applicant will be notified if any additional information is needed or if there are any discrepancies in the documents submitted.

- Submission of an application does not guarantee grant funding.
- Replacement trucks must be equipped with an engine that meets or exceeds USEPA on-road emission standards for model year 2014 or newer heavy-duty trucks. Also, the truck replacement must have a Gross Vehicle Weight Rating (GVWR) of 33,001 pounds or greater.

PUBLIC INFORMATION NOTICES

Upon application submission, all documents become the property of the Port Authority and as such become subject to the Port Authority of New York and New Jersey Public Records Access Policy, which applicants can view at <http://corpinfo.panynj.gov/documents/Access-to-Port-Authority-Public-Records/>. The applicant shall alert the Program Grant Administrator promptly to any errors that may have been made on its application. Following notification, applicants may get an opportunity to correct said errors made. To review such information, contact the Port Authority.

Submit applications by:

Email: panynj@tetrattech.com

Mail: Truck Replacement Program c/o Tetra Tech, Inc.

Attn: Grant Administrator
249 E. Ocean Boulevard, Suite 325
Long Beach, CA 90802

Fax: 866-515-1716

For additional information, assistance, or to receive application materials, please contact us by:

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FORM 1: Grant Application

Part 1: Notice of Obligations

Applicant/Company Name: _____

Type of Applicant: Independent Owner Licensed Motor Carrier

Certifications

Grant funding received through the Truck Replacement Program (“TRP”) to help purchase a newer drayage truck are federal funds. Please read the following statements and certify that you understand your obligations if you receive a grant funding through the TRP.

I understand that before I can receive TRP grant funding from the Port Authority of New York and New Jersey (“Port Authority”), I certify that I have read and comprehend the requirements set forth in this Application. I also agree to ALL of the following terms and conditions, which is indicated by **my initialing next to each of the following:**

- | | |
|----------------|--|
| Initial | _____ Agree to a five (5) year commitment to operate the replacement (newer) drayage truck and perform drayage trips at Port Authority Marine Terminals* for at least 150 trips per year. |
| Initial | _____ <u>Scrap my drivable drayage truck equipped with an EMY 1998 to 2006 and replace it with a Class 8 truck that is equipped with an EMY 2014 or newer U.S. EPA emissions compliant engine.</u> |
| Initial | _____ Applicant will not purchase the replacement truck(s) until receiving written approval from the Port Authority Grant Administrator and any replacement truck purchased prior to written approval is ineligible for grant funding. |
| Initial | _____ Applicant will not scrap the old qualifying truck(s) until receiving written approval from the Port Authority Grant Administrator. |
| Initial | _____ I understand that completion of the Grant Application for the TRP does not guarantee acceptance into the TRP. |
| Initial | _____ Applicant is not delinquent in tolls for any Port Authority Bridge or Tunnel Crossing. |
| Initial | _____ I have read and agree to the conditions and requirements of the Port Authority TRP as stated in this document. |

* Port Newark/Elizabeth Port Authority Marine Terminal, Port Jersey Marine Terminal, Brooklyn Marine Terminal, and Howland Hook Marine Terminal.

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Signature of Authorized Official:

I hereby certify that to the best of my knowledge and belief that all information provided in this application and any attachments is true and correct. If the application was prepared by a third party, I certify that I have read the complete application after all forms and information were completed. I agree with the information provided, and the date provided below is the date I signed the form. I further understand that prior to incorporating these forms and information into a grant Participation Agreement, the data and information may be revised by the Port Authority or Port Authority Grant Administrator for accuracy and that acceptance of a grant Participation Agreement will constitute agreement with those revisions. Failure to sign the application or signing it with a false statement may result in the Participation Agreement being voided. Intentional falsification of these forms may be prosecuted to the fullest extent allowed under the law and may be used as an adverse factor in assessing an applicant's prospective for receiving any future grant funding or doing business with the Port Authority.

Applicant/Company Name:	
Signature of Authorized Official:	
Date:	
Print Name of Authorized Official:	
Authorized Official Title:	

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FORM 1: Grant Application

Part 2: Designation of Officials and Access to Records Location

1. Authorized Official: The person with legal authority to sign this application on behalf of the Applicant.

Name: (Mr. or Ms.): _____ **Title:** _____

Mailing Address: _____
Street Address City State Zip

Physical Address: _____
 (for express delivery, *Street Address City State Zip*
 No P.O. Box)

Main Phone Secondary Fax
Number: Number: Number: _____

Email Address: _____

2. Designated Project Representative: The applicant or an employee of the applicant who will serve as the Grant contact and will be responsible for receiving and submitting the Grant Participation Agreement documents.

Same as No. 1 above

Name: (Mr. or Ms.): _____ **Title:** _____

Mailing Address: _____
Street Address City State Zip

Physical Address: _____
 (for express delivery, *Street Address City State Zip*
 No P.O. Box)

Main Phone Secondary Fax
Number: Number: Number: _____

Email Address: _____

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FORM 2: Supplemental Application Form

(Attach to Form 1: Grant Application)

1. Attachment Checklist for Each Truck (Be sure to provide a copy of each item in the checklist below for each qualifying truck).

- _____ **Total Number of Trucks** (maximum of 2 trucks per applicant)
- _____ **Truck Registration** (current and previous 2 years of vehicle registration. If a truck is seasonally registered, program qualifications will be evaluated on a case-by-case basis by the program administrator.)
- _____ **Truck Title** (clear title with no liens)
- _____ **Insurance Coverage** (Auto Liability, one year)
- _____ **GVWR Photograph** (sticker located on the inside doorframe of driver’s door; truck must meet vehicle Class 8 requirements of 33,001 lbs. or greater)
- _____ **Engine Nameplate Photograph** (to verify the engine serial number and engine family name)
- _____ **Commercial Driver’s License** (required only for IOO applicants)
- _____ **Truck Photographs** (front, back, left side and right side of truck exterior)
- _____ **Truck Replacement Program Eligibility Certificate** (completed and signed)

2. Qualifying Truck Information (Please fill out all fields below)

	Truck 1	Truck 2
Vehicle Identification Number (VIN)		
Truck Make		
Truck Model		
Truck Model Year		
Truck Body Type (Day Cab or Sleeper)		
Engine Make		
Engine Family Name (12-digits)		
Engine Serial Number		
Engine Model Year (EMY)		
Engine Horsepower		
Current Odometer Reading		

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3. Dealer Contact Information (if known)

Dealership: _____

Contact Name: _____ **Phone:** _____

Address: _____
Street Address City State Zip

Email Address: _____

4. Mandatory Scrappage for All Qualifying Trucks

Qualifying class 8 trucks with EMY 1998 through 2006 **must** be scrapped and replaced with an EMY 2014 or newer U.S. EPA emission compliant Class 8 drayage truck.

Initial _____ I will scrap my class 8 qualifying truck at a Scrapyard that the Port Authority has approved to participate in the Program or will coordinate with the Dealership listed to have the truck scrapped.

Initial _____ My class 8 qualifying truck will be in a fully operational condition upon arrival to a Scrapyard approved by the Port Authority. I will not remove integral and necessary components from my qualifying truck and/or engine that will render it inoperable.

Initial _____ If I run into any issues when delivering my qualifying truck to a Scrapyard approved by the Port Authority, I will immediately notify the Program Administrator of the situation.

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