



Florida Department of Agriculture and Consumer Services
Office of Energy

ADAM H. PUTNAM
COMMISSIONER

**NATURAL GAS FUEL FLEET VEHICLE
REBATE PROGRAM**
RULE 50-4.001, FLORIDA ADMINISTRATIVE CODE

Applications must be submitted to the Florida Department of Agriculture and Consumer Services, Office of Energy, 600 South Calhoun Street, Suite 251, Tallahassee, Florida 32399-0001, by certified mail or hand-delivery no later than 5:00 P.M. Eastern Standard Time on June 30 of the fiscal year for which this application is to be considered.

The Department's ability to authorize rebates pursuant to the Natural Gas Fuel Fleet Vehicle Rebate Program (Program), Section 377.810, Florida Statutes, is contingent upon an annual appropriation by the Legislature of the State of Florida for the specific purpose of funding the Program. In the event of a state revenue shortfall, funding for the Program may be reduced. The Department, in accordance with direction from the Governor and/or Legislature, shall be the final determiner of the availability of any funds.

Applicant	
FEIN/Tax ID Number	
Authorized Corporate Officer	
Street Address	
Mailing Address (if different)	
Contact Person	
Phone Number	
Email Address	

Under penalty of perjury, I affirm that the information contained in the application and supporting documentation is true and correct, and that the vehicle I am seeking a rebate for has not previously received a Natural Gas Fuel Fleet Vehicle Rebate. I affirm that the vehicle I am seeking a rebate for is in compliance with applicable United States Environmental Protection Agency emission standards.

Signature of Applicant/Representative

Printed Name and Title

Date

Affidavit

Before me, the undersigned authority, this day personally appeared the affiant, who being first duly sworn, states from his/her personal knowledge that all information contained in the foregoing application and attached documents is true and correct.

Name & Title: _____
(Please print)

Sworn to and Subscribed before me this ____ day of _____.

Notary Public,
State of Florida: _____
(Notary signature)

Print Name: _____

_____ Personally known or;

_____ Produced Identification

Type of Identification produced: _____

FOR OFFICAL USE ONLY – To be completed by the Office of Energy.

Total Amount of Natural Gas Fuel Fleet Vehicle Rebate: \$ _____

OOE Authorizing Signature

Printed Name and Title

Date

Date Certification Sent to Applicant: _____

Type of Natural Gas Vehicle Investment	
Indicate Natural Gas Investment Type:	<input type="checkbox"/> Natural Gas Vehicle Conversion <input type="checkbox"/> Natural Gas Vehicle Purchase <input type="checkbox"/> Natural Gas Vehicle Lease
Type of Applicant:	<input type="checkbox"/> Commercial <input type="checkbox"/> Government

Type of Natural Gas Fuel System
<p><i>"Natural Gas Fuel" is defined by s. 377.810(2)(f), F.S. as any liquefied petroleum gas product, compressed natural gas product, or combination thereof used in a motor vehicle as defined in s. 206.01(23), F.S.. This term includes, but is not limited to, all forms of fuel commonly or commercially known or sold as natural gasoline, butane gas, propane gas, or any other form of liquefied petroleum gas, compressed natural gas, or liquefied natural gas.</i></p>
<p style="text-align: center;"><input type="checkbox"/> Compressed Natural Gas (CNG)</p> <p style="text-align: center;"><input type="checkbox"/> Propane</p> <p>Indicate Type of Natural Gas Fuel System: <input type="checkbox"/> Other: _____ <i>(Indicate type of natural gas fuel)</i></p> <p style="text-align: center;"><input type="checkbox"/> Bi-Fuel System: _____ <i>(Indicate type of natural gas fuel)</i></p>

Vehicle Information			
Vehicle Make:	Vehicle Model:	Vehicle Year:	VIN #:
Counties Where Vehicle is Predominately Fueled:		County Where Vehicle is Licensed:	
Has this vehicle previously received a rebate under the Natural Gas Fuel Fleet Vehicle Rebate Program?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	

CONVERSION INFORMATION			
Conversion Company			
Address			
Date of Conversion			
Conversion Kit Serial Number			
Total Eligible Conversion Costs <i>(The excess cost associated with retrofitting a diesel- or gasoline-powered motor vehicle to a natural gas fuel powered motor vehicle.)</i>	\$ _____	x 50% = \$ _____	= Amount of rebate request, up to \$25,000

PURCHASE/LEASE INFORMATION			
Seller			
Address			
Date of Purchase/Lease			
Total Eligible Incremental Costs <i>(The excess costs associated with the purchase or lease of a natural gas fuel motor vehicle as compared to an equivalent diesel- or gasoline-powered motor vehicle.)</i>	\$ _____	x 50% = \$ _____	= Amount of rebate request, up to \$25,000

SUPPORTING DOCUMENTATION	
<i>Attach the listed supporting documentation, required by s. 377.810, F.S., to this application. Please check each box to indicate that the corresponding supporting documentation has been attached to this application.</i>	
A legible photocopy of the purchased/leased or converted vehicle's valid and current registration	<input type="checkbox"/>
The Vehicle Identification Number (VIN) of the purchased/leased or converted vehicle	<input type="checkbox"/>
A clear and legible photograph of the Vehicle Identification Number (VIN) from the vehicle <i>(VEHICLE CONVERSIONS ONLY)</i>	<input type="checkbox"/>
A clear photograph of purchased/leased or converted vehicle <i>(VEHICLE CONVERSIONS ONLY)</i>	<input type="checkbox"/>
A clear photograph of the natural gas fuel tank system installed on the vehicle <i>(VEHICLE CONVERSIONS ONLY)</i>	<input type="checkbox"/>
Environmental Protection Agency Certificate of Conformity	<input type="checkbox"/>
Documentation of the equivalent diesel or gasoline vehicle cost <i>(VEHICLE PURCHASES ONLY)</i>	<input type="checkbox"/>
Valid and current Weights and Measures Permit pursuant to 531.60, F.S. <i>(TAXI CONVERSIONS ONLY)</i>	<input type="checkbox"/>

INVOICE AND PROOF OF PAYMENT			
<i>Attach an approved form of invoice and corresponding proof of payment as required by s. 377.810(4)(a), F.S. Please check each box to indicate that the corresponding documentation has been attached to this application.</i>			
Invoice	<input type="checkbox"/>	Proof of payment	<input type="checkbox"/>

ECONOMIC DATA

According to s. 377.810, F.S., applicants must submit a description of the converted or leased/purchased vehicle's economic impact in Florida. Please accompany your projections below with a narrative describing how you arrived at your projections.

When making the following projections, please use the following motor fuel equivalent gallon conversions:

Compressed natural gas- Gasoline Gallon Equivalent = 5.660 pounds
 Diesel Gallon Equivalent = 6.312 pounds

Liquefied natural gas- Gasoline Gallon Equivalent = 5.37 pounds
 Diesel Gallon Equivalent = 6.06 pounds

Liquefied petroleum gas- Gasoline Gallon Equivalent = 1.35 gallons
 Diesel Gallon Equivalent = 1.50 gallons

The total dollar value of investment in alternative fuels as a result of the project that is eligible for a Natural Gas Fuel Fleet Vehicle Rebate	
The projected amount of gasoline/diesel saved as a result of the vehicle purchase/lease or conversion (In gallons per year saved)	
The projected amount of money saved as a result of the vehicle purchase/lease or conversion (In dollars per year saved)	

Economic Data Narrative: Please use the space below (or attach separate page(s) to the application) to describe how the projected economic data was calculated. For more information on what economic data is required, please see Rule 5O-4.001(4), F.A.C.

Legible copies of the documents, in place of originals, will be accepted. If the Florida Department of Agriculture and Consumer Services, Office of Energy, determines the supporting documentation is illegible, the application will be determined incomplete. Incomplete applications submitted to the department will not secure a place in the first-come, first-served application process.