TRUCK REPLACEMENT APPLICATION								
I. APPLICANT INFORMATION								
1	a. Applicant Name: City of Deadwood	d		b. DUNS Number: 17-328-6894				
2	Applicant Address: 102 Sherman Street							
3	a. City:Deadwood		b. State:SD	c. Zip + 4: 57732				
4	a. Contact Name: Robert Nelson		b. Contact Title: Public Works Director					
5	a. Contact Phone: (605) 578-3082		b. Contact Fax:					
6	Contact Email: bobjr@cityofdeadwood.com							
II. EXISTING TRUCK INFORMATION:								
1	Truck Storage Address: 67 Dunlop Ave.							
2	a. City: Deadwood	b. County: Lawrence c.		c. Zip Code:57732				
3	Truck Type/Use (e.g. snow plow, dump truck): Plow/Sanding Truck							
4	Class: ⊠ 4, ☐ 5, ☐ 6, ☐ 7, ☐ 8							
5	Short Haul-Single Unit, ☐Short Haul-Combo, ☐Long Haul-Single Unit, ☐Long Haul-Combo, ☐Refuse Hauler (short = 200 miles, long 200 miles, single=truck on single frame, combo=tractor with at least 1 trailer)							
6	a. Truck Manufacturer: International a. Truck Model: 4800 b. Truck Model Year: 199							
7	Type of Fuel: Diesel Estimated Annual Fuel Usage for this Truck (gallons): 700							
8	a. Cumulative Mileage: 39,427	b. Estimated Annual Mileage: 3,000 c. Annual Idling Hours: 720						
9	Vehicle Identification Number (VIN): 1HTSEAANOSH216531							
10	a. Engine Manufacturer: NAVISTAR b. Engine Model: 466DT c. Engine Model Year: 1995							
11	Engine Serial Number: 466D6DASA							
12	Estimated remaining life (years): Three							
III. N	NEW REPLACEMENT TRUCK INFORI							
1	Truck Type/Use (e.g. plow truck, dum	np truck, refuse	truck): Dump Truc	K				
	Class: ⊠ 4, ☐ 5, ☐ 6, ☐ 7, ☐ 8							
2	a. Truck Manufacturer : Freightliner a. Truck Model: 108SD b. Truck Model Year: 202							
3	Truck Type of Fuel:  ☐ ULSD, ☐ CNG, ☐ LNG, ☐ LPG/Propane, ☐ Electric, or ☐ Other							
4	Rebate: ∑ 50%, ☐ 60% if certified to meet CARB's Low-NOx Standards, or ☐ 70% of an all-electric							
6	a. Price of New Truck: \$140,404.00							
7	a. Estimated Purchase Order Date: 9/21 b. Estimated Date of Truck Delivery: 11/21							
8	a. Engine Manufacturer: Cummins		Model: CM2450	c. Engine Model Year: 2022				
	V. SCRAPPING COMPANY/DISMANTLER INFORMATION							
1	Describe Method of Disposal of Truck: Core the Engine Block and Cut Frame							
2	Scrapping Company/Dismantler Name: City of Deadwood							
3	Contact Name: Bill Burleson							
4	Address: 67 Dunlop Ave							
5	a. City:Deadwood	b. State:SD	)	c. Zip Code:57732				
6	a. Phone: (606)578-3082 b. Fax:							
7	Email: bill@citvofdeadwood.com							

TRUCK REPLACEMENT APPLICATION							
V. TRUCK MANUFACTURER/DEALER INFORMATION							
1	Truck Manufacturer/Dealer: Sanitation Products						
2	Contact Name: Ben Kreklow						
3	Address: 901 E. 48th ST N						
4	a. City: Sioux Falls	b. State: SD	c. Zip Code: 57104				
5	a. Phone: (605) 332-2487	b. Fax:	b. Fax:				
6	Email: ben@spi-sd.com						
VI.	APPLICANT'S CERTIFICATION						

I certify that to the best of my knowledge the information contained in this application and in the supplemental material is correct and complete. I certify that the funding requested satisfies the eligibility requirements for this Program as represented in the Program Description and related materials. I certify that I understand that the funding under this Program is subject to restrictions and other conditions listed in the Program Description.					
1	The applicant will use the funding under this Program for the specific purposes defined in the Program Description.				
1	The applicant has received approval to apply and make use of the funding under this program.				
1	The applicant is not currently debarred or suspended from receiving federal funding.				
<b>√</b>	The applicant agrees to complete scrappage of the truck being replaced.				
<b>√</b>	The applicant certifies that all vendors will be selected in accordance with contracting laws.				
I authorize DENR to make any necessary inquiries to verify the information that I have presented. I acknowledge that the information in this application is not confidential and may be released as required by the Program.					
Printed Name of Responsible Party:		Title:			
Signature of Responsible Party:		Date:			

Applications are to be submitted by email to <a href="mailto:barb.regynski@state.sd.us">barb.regynski@state.sd.us</a> or by mail to: VW Rebate Program SD DENR – AQ Program 523 E Capitol Pierre, SD 57501