

## Alternative Fuel Vehicle Incentive Program Program Opportunity Notice

A **\$1,000 Alternative Fuel Vehicle (AFV)** incentive is offered to local **residents** within the AVAQMD jurisdiction including the cities of Lancaster and Palmdale and unincorporated areas of Los Angeles County (see list of District zip codes). AFV incentives are two per person or entity, per **new** electric/electric hybrid vehicle purchase or lease agreement made with local Antelope Valley Dealerships. AFVs purchased outside of Antelope Valley Dealerships are eligible for half of the incentive. Electric Home Charging and Refueling Unit incentives are currently unavailable. Incentives are paid as reimbursement after submittal and processing of application.

If you are considering the purchase or have completed the purchase of an eligible vehicle here is an overview of the application/reimbursement process:

- ❖ Complete the attached application package and W-9 form and submit the completed forms to the AVAQMD.
  - ❖ Note that funds **cannot** be reserved/guaranteed without a completed application and w-9 form.
- ❖ Submit the following documentation to the AVAQMD:
  - ❖ Complete copy of executed sales contract for the vehicle purchased.
  - ❖ Complete copy of the large window sticker for the vehicle purchased which includes price, VIN number and documentation of the alternative fuel option.

Applications can be delivered or mailed to: Antelope Valley AQMD  
43301 Division Street, Suite 206  
Lancaster, CA 93535  
Attn: Julie McKeehan

If you have questions regarding this incentive program, please contact Julie McKeehan, Grants Analyst at 661-723-8070Ext. 8 or [jmckeehan@avaqmd.ca.gov](mailto:jmckeehan@avaqmd.ca.gov).

**ANTELOPE VALLEY AIR QUALITY MANAGEMENT DISTRICT  
ALTERNATIVE FUEL VEHICLE INCENTIVE PROGRAM APPLICATION**

All applicants must complete this form.

Please print or type all information on this and any attached applications.

<b>APPLICANT INFORMATION</b>			
Vehicle Purchaser/Owner:	Mailing Address		
Phone Number:	City		
	State	ZIP	
E-mail Address:	Fill in project address below if different from mailing address		
	Physical Address		
	City		
	State	ZIP	

<b>Dealership Information</b>			
Contact	Address		
Company	City		
Phone	State	ZIP	
Fax	E-mail		

**Please read each section and initial in the space provided**

- \_\_\_\_\_ The purchase of this alternative fuel, low-emission vehicle is NOT required by any local, state, and/or federal rule or regulation.
- \_\_\_\_\_ I understand that reimbursement of any grant funds awarded cannot be processed without a completed W-9 form.
- \_\_\_\_\_ I understand that an IRS Form 1099 will be issued to me for incentive funds received under the AVAQMD Mobile Source Emission Reduction Program. I understand that it is my responsibility to determine the tax liability associated with participating in the Program.
- \_\_\_\_\_ I understand that Projects funded via this program cannot generate Emission Reduction Credits (ERCs) pursuant to AVAQMD Regulation XIV.
- \_\_\_\_\_ I understand that all project applications must be accompanied by proper documentation.

**Application Statement**

All information provided in this application will be used by the Antelope Valley Air Quality Management District to evaluate the eligibility of this application to receive incentive funds. AVAQMD staff reserves the right to request additional information of the applicant and can deny the application if such information is not provided.

⊕ I certify to the best of my knowledge that the information contained in this application is true and correct.

Printed Name of Owner:	Owner Signature:
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PROJECT INFORMATION

<b>Operation within California (%):</b>	<b>Operation within AVAQMD Boundaries (%):</b>
<b>Annual Miles within AVAQMD Boundaries:</b>	
<b>Manufacturer's estimated fuel economy (MPG/MPGe):</b>	
<b>Estimated Annual Fuel Consumption (if applicable):</b>	

**New Vehicle Information**

Make:	Model:	Model Year:	VIN:	Odometer:
Fuel Type: <input type="checkbox"/> Electric <input type="checkbox"/> Electric/Hybrid <input type="checkbox"/> CNG <input type="checkbox"/> Other:				
Total New Vehicle (AFV) Cost:	Estimated cost of similar vehicle if purchased in gasoline or diesel:	Total Vehicle Incentive Sought:  <b>**incentive amount may not exceed \$1,000</b>		
Certified Emission Standard: <input type="checkbox"/> ZEV <input type="checkbox"/> AT PZEV <input type="checkbox"/> PZEV <input type="checkbox"/> SULEV <input type="checkbox"/> ULEV	List any other financial incentives/programs (tax credits, deductions, grants, or other public assistance) applied to project:  <input type="checkbox"/> State \$ _____ <input type="checkbox"/> Federal \$ _____ <input type="checkbox"/> Other \$ _____			
Primary function of vehicle ( e.g. local delivery, personal commuting):				

# 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.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <b>Note.</b> 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 type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ 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.)	Requester's name and address (optional)
6 City, state, and ZIP code	
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.

<b>Social security number</b>	
	-
	-
<b>OR</b>	
<b>Employer identification number</b>	
	-
	-

## Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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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](http://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.