



Fast Charge Your Ride
2020-2021 Application
Corridor Locations



Date of Application: _____

Name of Applicant Lead Organization: _____

Address: _____

City: _____ State: __ Zip: _____

Employer/Taxpayer ID (EIN/TIN): _____ DUNS Code: _____

Name of Main Point of Contact (printed/typed): _____

Title of Main Point of Contact: _____

Contact Address: _____

Telephone: _____

E-mail: _____

Eligible Applicant Type (check one):

- Business registered in Montana with Secretary of State
- Federal, State, Local or Tribal Government Agency
- Incorporated Nonprofit

Partner Organizations:

If applicable, please list names of additional organizations involved in the proposed project under this application and include documentation of involvement:

Eligible Project Type (check one):

- I-15 Corridor
- I-90 Corridor
- U.S. Hwy 93 Corridor
- U.S. Hwy 2 Corridor

Project Schedule: Provide a detailed project schedule that reflects a closing date no more than 24 months from the effective date of the grant agreement unless a longer project schedule is approved by DEQ.

Milestones	Proposed Completion Date	Notes
Applicant seeks bids for charging station(s) and installation		
Applicant selects charging station vendor and contractor to complete project		
Applicant secures site location(s)		
Applicant receives electrical and other necessary permits		
Charging station installation and necessary construction is complete		
Charging station is operational		
Applicant submits reimbursement to DEQ		

Project Location and Type: Please fill out the relevant information below to include all planned projects. Please attach supporting information or documents for each project, limited to three pages per project.

Host site community	Host site street address, including county	Type of and number of plugs for each station (DCFC & Level 2)	Distance from nearest DCFC station	Distance from amenities

Project Cost Summary: For each charging station, please fill out information requested below. Additional spreadsheets and documentation can be attached if necessary.

Host site community	Total Location Cost	Applicant share (\$/%)	VW Fund Share (\$/%)	Estimated Charging Equipment Cost	Estimated installation cost	Other costs (permitting, utility, signage, battery storage or PV system cost etc.)

Project Narrative: Please answer the following questions (limit 250 words per question):

1. Describe the project in more detail including if the project proposes to complete an entire corridor and, if not, why. Also describe the type of location(s), distance from other DCFC locations, distance the host site is from the highway or interstate corridor, and distance from nearby amenities. Additional documentation may be attached.

2. Describe the roles of project partners (if any) and how they are clearly documented and defined.

3. Documentation of communication with electric utility provider(s) if applicant is not an electric utility. Describe anticipated issues with utility that may occur during project activities.

4. Are the stations sited within Priority Air Quality Counties and Areas? If so, please list. See Appendix A of the Request for Applications.

5. Are the stations located near sensitive areas and/or will it serve sensitive populations? Please use EPA's Environmental Justice screening tool to determine locations in sensitive areas and serving sensitive populations. The tool can be found at: <https://www.epa.gov/ejscreen>.

6. Will the project include the ability for future installation of higher capacity or additional chargers (future-proofing)? If so, please describe how you are doing this and include additional information (site design plans, station specifications, electrical plans).

7. Will the host site locations include an on-site renewable energy system powering the EVCS?

8. Please provide additional budget details beyond what is included in the Project Cost Summary table above. Describe the ability to meet match requirements including cash on hand, funds from another grant, financing, or other sources of match. Is any of the applicant match awaiting a final commitment? Justify the cost share between the applicant and DEQ including why the full DEQ grant amount is necessary, if requested. Additional documentation may be attached.

Additional Materials: In addition to this application, please submit the following information for all charging stations as attachments:

- Letter(s) of Commitment, if available, from the owner of EVCS location(s) demonstrating assurance that the charging stations will remain at the location and operational for a minimum of five years.
- Letter(s) of Commitment for match from the applicant and from additional project funding partners (if applicable), who will provide necessary matching funds for the project.
- Documentation from the utility providing electrical service such as a letter of service notice, indicating power supply availability for the proposed project and any additional documentation of support or involvement in the proposal.
- Bids for EVCS – please provide three different bids for each EVCS. If you are not able to receive three bids, please include a written explanation of the reason why.
- Bids for installation work – please provide three different bids for the installation of the EVCS. If installation is being provided by EVCS manufacturer or seller, please provide documentation. If you are not able to receive three bids, please include a written explanation of the reason why.
- Plans and photo documentation, if available, that shows exact charger and parking space locations.
- Completion of Appendix C, Insurance Information & changes to draft model grant agreement.

Certification: I certify that all proposed activities will be carried out; that all grant money received will be utilized solely for the purpose for which it is intended; that records documenting the planning process and implementation will be maintained and submitted when requested. It is understood that if this project is selected a Grant Agreement with DEQ will be executed.

Authorized Representative Printed Name: _____ Title: _____

Authorized Representative Signature: _____ Date: _____