**Request for Reimbursement Form**

**Name of Applicant:**

Date new bus was delivered:

Engine Model Year of New Bus: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Instructions****:* Fill in the information below to summarize the Reimbursement Request.

**Reimbursement Summary**

|  |  |
| --- | --- |
| Final Purchase Price of Bus | $ |
| Rebate Amount (not to exceed awarded amount) =Final Purchase Price X percentage from award | $ |
|  |  |
| \*Program Income from Salvage/Scrappage | $ |

\*If scrapped or salvaged engines/vehicles are to be sold, program income requirements apply. Program income may be used to meet the cost-sharing or matching requirement of the award, including any mandatory or voluntary cost-share. The amount of the award remains the same.

 Please attach a completed IRS W-9 Form

 Please attach evidence of final bus purchase price such as a copy of the dealer invoice, receipt, or canceled check

 Please attach Certificate of Disposal Form and photos verifying disposal

 if requesting the 35% rebate, please attach a copy of the engine certificate showing it meets CARB’s Low-NOx Standards.

Requests are to be submitted by email to barb.regynski@state.sd.us or by mail to:

Bus Rebate Programs

SD DANR – AQ Program

523 E Capitol

Pierre, SD 57501