# **DRIVE CLEAN STATION APPLICATION FORM**



#### A. Primary Point of Contact (PPC) Information

	First Name	Last Name	Company Name	Federal Tax ID #
	Phone		Email Address	
	Mailing Addre		Suite/Apt/Bl	dg.
	City	State	Zip	County
Project Inf	ormation			
1.)				
	Project Address			
2.)	City	State	Zip	County
	Project A	ddress		
	City	State	Zip	County
3.)	Project A	ddress		
4.)	City	State	Zip	County
	Project A	ddress		
5.)	City	State	Zip	County
	Project A	ddress		
	City	State	Zip	County

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#### C. Funding Request Information

(C1) Total Project Cost (C2 + C3)	(C2) Applicant Cost Contribution	(C3) Request Grant Reimbursement Amount
Applicant Percent Cost Share (C2/C1)	Total Number of Station Installations	Est. Gallons of Fuel Dispensed Annually

### Agency Statement of Certification:

This proposal has been duly authorized by the governing body of the proposed. The proposed activities, dates, availability of resources, staff, cost, and all statements made are true and correct. The applicant will comply with all rules and regulations of the funding agency and will revise this proposal if necessary.

Authorized Signer's Name	Authorized Signature
Authorized Signer's Title	Date Signed
	re clean ICAGO
	Form Electronically. application via email to:
	@DriveCleanChicago.com Intha.Bingham@CityofChicago.org