

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	\$
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*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 evidence of final bus purchase price such as a copy of the dealer invoice, receipt, or canceled check
- Please attach Certificate of Disposal 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 DENR – AQ Program
523 E Capitol
Pierre, SD 57501