

GRANT ANALYSIS FORM OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: Department of Public Works – Operations Division, Fleet Services & Infrastructure Services Division – Facilities Management

Contact Person & Phone No: Paul Klajbor x3271

Category of Request	
<input checked="" type="checkbox"/> New Grant	
<input type="checkbox"/> Grant Continuation	Previous Council File No. _____
<input type="checkbox"/> Change in Previously Approved Grant	Previous Council File No. _____

Project/Program Title: Wisconsin Clean Transportation Program

Grantor Agency: US Department of Energy through the Wisconsin Office of Energy Independence and Wisconsin Clean Cities – Southeast Area

Grant Application Date: _____ Anticipated Award Date: _____

1. Description of Grant Project/Program (Include Target Locations and Populations):

The grant totals \$4,842,060 of which \$3.6 million is for the construction of 2 compressed natural gas (CNG) refueling facilities and \$1.198 million for the incremental cost to purchase 20 CNG powered heavy duty vehicles and \$44,000 to purchase 22 neighborhood electric vehicles. The 20 heavy-duty vehicle purchases are replacement vehicles and already scheduled for purchase in 2010 and 2011. The grant provides the added cost to purchase the vehicles as CNG rather than conventional diesel fuel.

2. Relationship to City-Wide Strategic Goals and Departmental Objectives:

It is the goal of the Department of Public Works to reduce energy costs, find and implement alternative forms of energy, and reduce pollution outputs where possible. This grant allows for CNG to replace diesel power in vehicles and to reduce the pollution related to the diesel vehicles.

3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

NA

4. Results Measurement/Progress Report (Applies only to Programs):

NA

5. Grant Period, Timetable and Program Phase-Out Plan:

Grant period through December 31, 2013 with expenditures for vehicle purchases by December 31, 2011

6. Provide a list of Subgrantees:

NA

7. If Possible, complete Grant Budget Form and attach to back.

Attached