Air Resources Board

Subvention Program: Subvention Application FORM: SP-1

APPLICANT DISTRICT:

District Name: Mendocino County Air Quality
Street Address: 306 East Gobbi Street

City: <u>Ukiah</u> **Zip:** 95482

Contact Person: Donna Roberts Nash Phone: (707)463-4354

TYPE OF SUBVENTION:
☐ Coordinated ☐ Special

 $oxed{oxed}$ Rural $oxed{\Box}$ Non-Rural

AIR POLLUTION CONTROL BUDGET SUBVENTION YEAR: 2016 - 2017

Expenditures			
1	Salaries and Benefits	\$718399	
2	Operating Expenses	\$247708	
3	Fixed Assets	\$0	
4	Total Expenditures (Add Lines 1 thru 3)	\$966107	
Reve	nue		
Loca	l Matching Funds		
5	County Contributions	\$0	
6	Fees	\$332480	
7	Fines	\$2500	
8	Interest Earned	\$5000	
9	Other (Non-Grants): Motor Vehicle Fees	\$552000	
10	Total Local Matching Funds (add lines 5,6,7,8, & 9)	\$891980	
State	State Subvention Funds		
11	State Subvention Funds (Refer to Subvention Funds Worksheet Form SP-2)	\$34400	
12	State Supplemental Funds (Refer to Supplemental Funds Request Form SP-3)	\$129347	
13	Total State Subvention Funds (add lines 11 thru 12)	\$163747	
Local Non-Matching Funds			
14	ARB Contracts	\$0	
15	Federal Grants/Contract	\$10000	
16	Other: State PERP fees, Other	\$33050	
17	Total Local Non-Matching Funds (add lines 14 thru 16)	\$43050	
18	Total Subvention Program Revenue (add lines 10 & 13)	\$1055727	

FEE SYSTEM CERTIFICATION: The district has a fee system in place as required by Health and Safety Code Section 39802. ☑ Yes ☐ No

Air Resources Board Subvention Program: Subvention Application

I certify under penalty of perjury that to the best of my knowledge and belief, data in this application are true and correct. The document has been duly approved and authorized by the governing board of the applicant and the applicant will maintain a program in compliance with Title 17, Subchapter 3, Sections 90050 to 90500 of the California Code of Regulations.

FORM: SP-1

I hereby certify under penalty of perjury that the receipt of these funds shall not result in the reduction of fees paid by permittees to the district and understand that any unspent or unencumbered state subvention funds must be returned to the Air Resources Board upon request pursuant to California Code of Regulations §903060(d) and shall revert to the State General Fund.

DISTRICT AUTHORIZATION			
Signature:			
	Page 2 of 2		
ARB USE ONLY:			
Date Received	Reviewed By:	Approved:	Disapproved:

Form Last Revised: June 2016

Air Resources Board FORM: SP-2

Subvention Program: Subvention Funds Worksheet

Subvention Funds Worksheet (For Calculation of Estimated Base Award Only)

1. COORDINATED BASE SUBVENTION

Non-Rural

It is estimated that the per capita rate will be **\$0.23** if the appropriate match (one to one) is provided.

Rural

It is estimated that the per-capita rate will be **\$0.23** but not less than \$34,400 if the appropriate match (one to one) is provided and a fee system is in place.

A. Coordinated Base Subvention:

District Population x Estimated **\$0.23**or
\$34,400 (rural districts), whichever is greater
\$34400

B. Local Match (equal to or greater than item 1A): \$891980

2. SPECIAL SUBVENTION

Pursuant to Health and Safety Code Section 39804, a special subvention may be granted to a district participating in a coordinated basinwide program and lying in an air basin whose population is less than 98,000. For multi-district basins, the basin special subvention and match requirements are pro-rated to the individual districts based on their share of the basin population.

- A. State Special Subvention for Air Basin (\$45,000): \$____
 Note: If multi-district basin, amount is pro-rated by district share of basinwide population
- B. Local Match for Air Basin:

 Basin Population x Estimated **\$0.23** \$_____

COORDINATED BASE AND SPECIAL SUBVENTION SUBTOTAL

State Award – add the amounts from items 1A and 2A \$\frac{34400}{891980}\$

Required Local Match – add the amounts from items 1B and 2B \$\frac{891980}{891980}\$

3. SUPPLEMENTAL SUBVENTION

Supplemental subvention funds will be limited in total by the amount requested by the district on the Supplemental Funds Request form. Therefore, please be sure the Supplemental Funds Form SP-3 is a complete listing of any projects or purchases requiring funding.

Form Last Revised: April 2016

Air Resources Board

Subvention Program: Supplemental Funds Request

Supplemental Funds Request Form

FORM: SP-3

APPLICANT DISTRICT:

District Name: Mendocino County Air Quality Management District

Street Address: 306 East Gobbi Street

City: Ukiah Zip: 95482

Contact Person: Donna Nash Phone: (707)463-4354

Proposed Use of Supplemental Funds for Subvention Year: 2016-2017

Item/Activity	Time Frame for Purchasing or Completing Activity	Amount
Stationary Source Enforcement Action Legal Fees	Spent in Fiscal Year 2015/2016	\$99347
Alternative Fuel Vehicle	To be purchased in Fiscal Year 2016/2017	\$30000
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
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		\$
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		\$
		\$
		\$
	Total Supplemental Funds Requested	\$129347

I certify under penalty of perjury that to the best of my knowledge and belief, data in this application are true and correct.

District Authorization

	Robert Scaglione, APCO		11/14/16
Signature	Typed Name, Title		Date
ARB USE ONLY: Date Received	_ Reviewed By:	Approved:	Disapproved:

Last Revised: April 2016

Air Resources Board Subvention Program: Supplemental Funds Request

FORM: SP-3

Last Revised: April 2016

Air Resources Board **Subvention Program – Disbursement Request**

APPLICANT DISTRICT:

District Name: Mendocino County Air Quality Management District

Street Address: 306 East Gobbi Street

City: Ukiah **Zip:** 95482

Contact Person: Donna Roberts Nash Phone: (707)463-4354

I hereby certify under penalty of perjury that the applicant district intends to participate in the Air Resources Board subvention program for the fiscal year indicated on this request and will comply with the provisions of Title 17, Subchapter 3, Sections 90050 through 90500 of the California Code of Regulations as they apply to the district.

Form: SP-4

I further certify that the applicant district will submit by no later than November 15 of the subvention year an application pursuant to Section 90300 of the ARB Subvention Regulations (Subchapter 3, Title 17, California Code of Regulations) with the applicant district's formally adopted budget submitted no later than November 22; or refund to the State in full all payments to the applicant district made as a result of this document.

I understand that the first disbursement of subvention funds to the applicant district as a result of this document will be calculated by the Air Resources Board and that adjustments will be made based on the district's approved application and on the availability of funds required to be disbursed pursuant to Section 90360 of the subvention regulations.

District Authorization

	Robert Scaglione, APCO		11/14/16
Signature	Typed Name, Title		Date
ARB USE ONLY:			
Date Received	Reviewed By:	Approved:	Disapproved:
1st Disbursement Award \$			

Form Last Revised: April 2016

Air Resources Board

Subvention Program – Year-End Financial Report

District Name: Mendocino County Air Quality Management District

Street Address: 306 East Gobbi Street

City: Ukiah Zip: 95482

Contact Person: Donna Roberts Nash Phone: (707)463-4354

REPORT OF ACTUAL EXPENDITURES & REVENUE FOR SUBVENTION YEAR: 2015-2016

Form: SP-5

Actu	al Expenditures	
1	Salaries and Benefits	\$689583
2	Operating Expenses	\$310790
3	Fixed Assets	\$0
4	Total Expenditures (Add Lines 1 thru 3)	\$1000373
	al Revenue	
Loca	I Matching Funds	
5	County Contributions	\$0
6	Fees (add lines a thru p below)	\$2135077
а	Operating Permits	\$254982
b	Variance/Hearing Board	\$550
С	Engineering (Permits/A to C)	\$19218
d	Motor Vehicle Registration Surcharge	\$579241
е	Toxic Hot Spots	\$8053
f	Source Test	\$0
g	Vapor Recovery	\$0
h	Clean Air Act	\$0
i	Asbestos	\$3080
j	Clean Fuels	\$0
k	Ag Burning	\$21782
I	Trip Reduction	\$0
m	Other Fees Technical and Other Fees	\$1082
n	Other Fees	\$0
0	Other Fees	\$0
р	Carryover Fees from Prior Fiscal Years	\$1247089
7	Fines	\$8889
8	Interest Earned	\$4450
9	Other (Non-Grants): Describe Other Sources	\$0
10	Total Local Matching Funds (add lines 5,6,7,8, & 9)	\$2148416
	Subvention Funds	
11	State Subvention Fund Coordinated Base and Special Subvention	\$34400
	Award (Refer to Award Letter)	
12	State Subvention Fund Supplemental Award (Refer to Award Letter)	\$13259
13	Total State Subvention Funds (add lines 11 thru 12)	\$47659
	Non-Matching Funds	
14	ARB Contracts	\$0
15	Federal Grants/Contract	\$0
16	Other: State PERP fees, Other	\$14772
17	Total Local Non-Matching Funds (add lines 14 thru 16)	\$14772
18	Total Subvention Program Revenue (add lines 10 and 13)	\$2196075
19	Total Unspent or Unencumbered State Subvention Funds**	\$0

^{**}Any unspent or unencumbered State Subvention Funds must be returned to the Air Resources Board pursuant to California Code of Regulations §90360(d) and will be reverted to the State General Fund.

Air Resources Board Subvention Program – Year-End Financial Report

I certify under penalty of perjury that the foregoing is true and correct. I hereby certify I under penalty of perjury that the receipt of these funds did not result in the reduction of

Form: SP-5

fees paid by permittees to the district and funds were spent in compliance with the provisions of Title 17, Subchapter 3, Sections 90050 through 90500 of the California Code of Regulations. I hereby certify that the applicable evaluation criteria established in the Air Resources Board's "Evaluation Criteria for Air Pollution Control Districts Participating in the Subvention Program," adopted on April 23, 1981, and amended May 27, 1983 were accomplished.			
District Authorization			
	Robert A. Scaglione, APCO	11/14/16	
Signature	Typed Name, Title	Date	

ARB USE ONLY:				
Date Received	Reviewed By:	Approved:	Disapproved:	
Form Last Revised: April 2016				

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Form: SP-5