

**Air Resources Board
Subvention Program**

Form
SP-1

2017/2018 Subvention Application

APPLICANT DISTRICT:

District Name: Mendocino County AQMD
Street Address: 306 E. Gobbi St
City: Ukiah
Contact Person: Donna Roberts Nash

Zip: 95482
Phone: 707/463-4354

Type of Subvention: Coordinated ☒ Special ☐
Rural ☒ Non-Rural ☐

Expenditures

1	Salaries and Benefits	\$689,999.00
2	Operating Expenses	\$200,968.00
3	Fixed Assets	\$0.00
4	Total Expenditures (Total of Lines 1 thru 3)	\$890,967.00

Revenue (Local Matching Funds)

5	County Contributions	
6	Fees	\$1,680,317.00
7	Fines	\$2,500.00
8	Interest Earned	\$5,000.00
9	Other (Non-Grants): (Specify) - Motor Vehicle Fees 923 & 2766	\$552,000.00
10	Total Local Matching Funds (Total of lines 5 thru 9)	\$2,239,817.00

State Subvention Funds

11	State Subvention Funds (Refer to Subvention Funds Worksheet Form SP-2)	\$34,400.00
12	State Supplemental Funds (Refer to Supplemental Funds Request form SP-3)	\$30,000.00
13	Total State Subvention Funds (Total of lines 11 thru 12)	\$64,400.00

Local Non-Matching Funds

14	ARB Contracts	
15	Federal Grants/Contract	
16	Other: (Specify) State PERP fees, federal PM 2.5 Funds	\$20,900.00
17	Total Local Non-Matching Funds (add lines 14 thru 16)	\$20,900.00
18	Total Subvention Program Revenue (Total of Lines 10 & 13)	\$2,304,217.00

FEE SYSTEM CERTIFICATION: The district has a fee system in place as required by Health and Safety Code Section 39802

Yes ☒ No ☐

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.

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 Cod of Regulations §903060(d) and shall revert to the State General Fund.

DISTRICT AUTHORIZATION

Print (Name) Barbara A. Moed
Signature: _____
Title: Air Pollution Control Officer
Date: _____

**Air Resources Board
Subvention Program**

Form

SP-2

2017-2018 Subvention Funds Worksheet

APPLICANT DISTRICT:

District Name:	<u>Mendocino County AQMD</u>		
Street Address:	<u>306 E. Gobbi St</u>		
City:	<u>Ukiah</u>	Zip:	<u>95482</u>
Contact Person:	<u>Donna Roberts Nash</u>	Phone:	<u>707/463-4354</u>

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:

(Enter) District Population - 88,995.00 X 0.23 \$20,468.85

OR

B. Enter - **\$34,400** (rural districts), if amount greater than A. \$34,400.00

C. Enter the greater amount (Between A & B) \$34,400.00

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.

DISTRICT AUTHORIZATION

Print (Name)	<u>Barbara A. Moed</u>
Signature:	<u></u>
Title:	<u>Air Pollution Control Officer</u>
Date:	<u></u>

**Air Resources Board
Subvention Program**

Form
SP-3

2017 / 2018 Supplemental Funds Request

APPLICANT DISTRICT:

District Name: Mendocino County AQMD
Street Address: 306 E. Gobbi St
City: Ukiah
Contact Person: Donna Roberts Nash

Zip: 95482
Phone: 707/463-4354

Proposed use of Supplemental Funds for Subvention Year: 2017/2018

Item / Activity	Time Frame for Purchasing or Completing Activity	Amount
Alternative Fuel Vehicle	Fiscal Year 2017/2018	\$30,000.00
Total Supplemental Funds Requested		\$30,000.00

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

Signature

Date

Type Title and Name Barbara A. Moed, APCO

Air Resources Board						Form
2017 / 2018 Subvention Program: Year-End Financial Report						SP-4
APPLICANT DISTRICT:		Mendocino County AQMD				
Street Address:	306 E. Gobbi St					
City:	Ukiah				Zip:	95482
Contact Person:	Donna Roberts Nash				Phone:	707/463-4354
REPORT OF ACTUAL EXPENDITURES & REVENUE FOR SUBVENTION YEAR 2016-2017						
Actual Expenditures						
1	Salaries and Benefits					\$665,347.00
2	Operating Expenses					\$232,914.00
3	Fixed Assets					
4	Total Expenditures (Lines 1 thru 3)					\$898,261.00
Actual Revenue						
Local Matching Funds						
5	County Contributions					\$0.00
Fees						
a	Operating Permits					\$291,087.00
b	Variance / Hearing Board					
c	Engineering (Permits A to C)					\$23,160.00
d	Motor Vehicle Registration Surcharge					\$589,340.00
e	Toxic Hot Spots					\$14,350.00
f	Source Test					
g	Vapor Recovery					
h	Clear Air Act					
i	Asbestos					\$7,795.00
j	Clean Fuels					
k	Ag Burning					\$22,980.00
l	Trip Reduction					
m	Others Fee (Please enter info on form 4a)					\$3,650.00
n	Carryover Fees from Prior Fiscal Years					\$1,210,421.00
6	Total Fees					\$2,162,783.00
7	Fines					\$7,849.00
8	Interest Earned					\$8,567.00
9	Other (Non-Grants): (Describe)					
10	Total Local matching Funds (add lines 5,6,7,8 & 9)					\$2,179,199.00
Total Subvention revenue received from ARB						
11	State Subvention Fund Coordinated Base and Special Subvention Award (Refer to Award Letter)					\$48,147.00
13	Total State Subvention Funds (add lines 11 thru 12)					\$48,147.00
Local Non-Matching Funds						
14	ARB Contracts					\$0.00
15	Carl Moyer Program					\$0.00
16	Perp Inspections					\$14,688.00
17	Federal Grants / Contract					
18	Other (FEDERAL) (Specify)	PM 2.5 Funds				\$12,000.00
19	Total Local Non-Matching Funds (lines 14 thru 18)					\$26,688.00
20	Total Subvention Program Revenue (lines 10 and 13)					\$2,227,346.00
21	Total Unspent or Unencumbered State Subvention Funds**					\$0.00
<p>**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.</p>						

Air Resources Board
2017 / 2018 Subvention Program: Year-End Financial Report

Form
SP-4

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 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

Signature

Date

Typed Name, Title

Barbara A. Moed, APCO

**Air Resources Board
Subvention Program
2017 / 2018 Year-End Financial Report**

Form
SP-4a

APPLICANT DISTRICT: Mendocino County AQMD
Street Address: 306 E. Gobbi St
City: Ukiah **Zip:** 95482
Contact Person: Donna Roberts Nash **Phone:** 707/463-4354

Line M - Other Fees		
Number	Please specify	Amount
1	Technical Services Fees	\$ 3,650.00
2		
3		
4		
5		
6		
7		
8		
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11		
12		
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21		
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23		
24		
25		
Total		\$ 3,650.00

DISTRICT AUTHORIZATION

Print (Name) Barbara A. Moed
Signature: _____
Title: Air Pollution Control Officer
Date: _____