



New Jersey Department of Environmental Protection
Bureau of Mobile Sources
P.O. Box 420 / Mail Code 401-02E
401 E. State Street
Trenton, NJ 08625

eMobility Proposal Form

The New Jersey Department of Environmental Protection is seeking proposals for electric car sharing and ride hailing services (e-mobility projects) that will benefit low or moderate income communities disproportionately impacted by air pollution. Interested parties can use this form to submit eMobility project proposals. Questions and project proposals can be directed to VWcomments@dep.nj.gov. You will be notified if and when funding becomes available for eMobility projects.

CONTACT INFORMATION

Company/Organization

Address

Contact Person

Title/Position

Phone

E-mail

PROJECT INFORMATION

Project Name

Project Location (City/County)

Project Budget (Total budget and breakdown of all associated costs)

Project Cost Share (Budget % that will be covered by project applicant)

Project Type

Electric car sharing projects

Electric ride hailing projects

Other

Project Description (The project should aim to provide access to e-mobility in low or moderate income communities disproportionately impacted by air pollution. The emobility services should be safe, reliable, convenient, and affordable while at the same time reduce greenhouse gas emissions and other air pollutants.. The project should also be based on identified community transportation and mobility needs.)

Who are the intended users/riders for this project?

Estimated size of population benefiting from the project?

Describe your strategies for maintaining the proposed service(s) for a minimum of 5 years.

Number and types of vehicles included in the project?

What types of trips or destinations will be served?

Estimated vehicle usage (vehicle miles traveled/year or number of trips per week)

Type and number of electric vehicle charging stations included in the project?

Level 1

Level 2

DCFC

I have included an application for a charging stations with this project proposal. (charging station proposal at the end of this project proposal form)

I do not plan to seek a charging station grant for this project.

Will the project benefit one or more communities that are disproportionately impacted by air pollution? If so, please describe?

Describe your plan for community engagement to identify needs and gaps and to generate interest for the new service.

Shovel ready projects will be prioritized. Please list project partners. If project partners have not yet been secured, please describe the process you will use to secure any necessary project partners

Estimated timeframe for implementation? Include a project timeline that identifies start and end dates, as well as the timeline for key milestones.

Demonstrated success in implementing similar projects.

Has your organization been approved to receive and expend any other grant funds related to this project? If so, please provide details.

Additional space has been provided to expand answers to any of the questions above.

Supplemental Page 1

Additional space has been provided to expand answers to any of the questions above.

Supplemental Page 2



eMOBILITY Proposal Form

Charging Station Proposal Form

Project Information

Proposed Charging Station(s) Location (one form per facility or parking lot):	Street Address Line 1: Street Address Line 2: City: _____ County: _____ State: _____ Zip Code: _____
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The responses to the following questions must apply to all the charging station equipment entered on this form. Use a separate Project Information Form for each set of unique responses. For example, if a project involves installing chargers at both a public parking lot and an employee only parking lot at the same location, then separate Project Information Forms are required.

Location's Primary Category (Check only one):

Workplace Public Place Multi-Unit Dwelling Other

Is the location on government owned property and accessible to the public? Yes No

Is the location on non government owned property and accessible to the public? Yes No

Location's Primary Usage (Check only one):

Car Sharing Employee Use Fleet Use Public Use

Location's Primary Type (Check only one):

<input type="checkbox"/> Leisure Destination	<input type="checkbox"/> College / University	<input type="checkbox"/> Public Park
<input type="checkbox"/> Downtown Area	<input type="checkbox"/> Hotel / Motel	<input type="checkbox"/> Public Parking Lot or Garage
<input type="checkbox"/> Retail Area – Not Downtown	<input type="checkbox"/> Transit Center	<input type="checkbox"/> Residential / Apartments / Condos
<input type="checkbox"/> Other		



Charging stations being installed

Please provide the number of each type of charging station you propose to install as well as the make and model or other relevant information to describe the charging station(s).

Level 1 Charging Stations		Description
Number:		Make: Model:
Level 2 Charging Stations		Description
Number:		Make: Model:
DCFC Charging Stations		Description
Number:	Power:	kw

Name

Date

Signature