CARL MOYER MEMORIAL AIR QUALITY STANDARDS ATTAINMENT PROGRAM

FISCAL YEAR 2006-2007 (YEAR 9) APPLICATION

1. APPLICANT DISTRICT

District Name Santa Barbara County APCD
Street Address 260 No. San Antonio Rd., Suite A
City/Zip Santa Barbara, CA 93103
Contact Person Gary Hoffman
Phone (805) 961-8818 Email Address gah@sbcapcd.org

2. CARL MOYER PROGRAM FUNDING REQUESTED

Check one box. If box 2b or 2c is checked, complete the requested amount.

- ❑ a. District requests the minimum allocation of $200,000
- ❑ b. District requests the tentative allocation (Table 1 or 2) of _____
- √ c. District requests, and has match for, up to **$825,000**
- ❑ d. District declines the funds for Year 9

3. DISTRICT MATCHING FUNDS

a. District funds already obligated for projects* $ 96,900

Attach detailed project descriptions, using ARB's FY 2005/2006 reporting spreadsheet, to document the projects qualified as Carl Moyer Program match funding. (See Attached Summary*)

b. District funds for future match
(Specify funds by type and amount)

Admin (in-kind)	$ 17,100
Total district funds for future match	**$114,000**

4. BOARD RESOLUTION

Check one box. If box 4b is checked, complete the date.

√ a. The original application for $705,642 allocation has been duly approved and authorized by the governing board of the applicant, as specified in the previously attached resolution. Any additional funding allocation from ARB in the proposed $825,000 request is subject to district board approval as well.

❑ b. This application is scheduled to go before the district board on _____
(date)

5. DISTRICT

To the best of my knowledge and belief, the information in this application is true and correct.

	Terry Dressler	
APCO Signature	Typed Name	Date