## ALTERNATIVE FUEL VEHICLES PURCHASE INFORMATION

*AGENCY NAME:				
*AGENCY NUMBER:				
*AGENCY ADDRESS:				
*AGENCY CONTACT:				
*PHONE: FA	X: EM	AIL:		
*VEHICLE TYPE: (ex., mid-size s	sedan)			
INFORMATION REQUIRED FOR CONTRACT)	ALL VEHICLES YOU PLAN	O PURCHASE (	CONTRACT AN	D NON-
*1. GVWR(See contract, previous contra	What is the Gross \ct, or contact dealer for this info	ehicle Weight Ra ormation.)	ting? (for trucks	only)
*2. Parish?	In what parish will	the vehicle be loc	cated?	
*3. Will the vehicle be used 75% of the time in EPACT metropolitan area?			Yes N	lo
*4. Is this a law enforcement or emergency vehicle?			Yes N	lo
*5. Home storage?			Yes N	lo
*6. Off-road use. Will vehicle be used 100% of the time off-road? (EXAMPLE: Farming, construction)		?	Yes N	lo
If you have any questions, please	contact Richard Janis at (225)	342-3491 or by e	mail <u>Richard.Jar</u>	nis2@la.gov
Please submit this information to this model year. After LPA. Office of State Purchasing and order will be processed. This LPAA's website, www.lpaa.la.go	A approves and returns this d denoted with your order of form may be accessed, cor	form to you, it or requisition nunpleted and sub	must be submarmber before yomitted electron	nitted to the your vehicle nically from
Order / Requisition No.				
FOR LPAA & STATE PURCHASING USE ONLY				
	Excluded, No AFV of this Class/Type on current State Contract  Excluded From EPACT  Excluded From EPACT, however LPAA recommends AFV  Alternative Fuel Vehicle			
Alt Fuel Form #1	Signature:	Date:	:	

**Alt Fuel Form #** (Rev. 6/4/2018)