

San Diego Air Pollution Control District Self-Certification Affidavit Contractor Orientation Workshop

Please fill out the information requested below along with a signature and date at the bottom of the form. This document will need to be completed by the individual that participates in or views the online Contractor Orientation Workshop.

Applicant Name:	Business Name:
Business Address:	
Phone Number:	
Incentive Program - Electric Landscape A	ssistance Funding Program (E-LEAF)
Date of workshop attendance or viewing: _	
I swear under penalty of perjury that I have attended or viewed the Contractor Orientation Workshop, and I will abide by all of the requirements of the contract between my company and the San Diego County Air Pollution Control District. I understand that I will be required to return the grant funds, if awarded, if it is discovered that I did not attend or view the Workshop.	
Name (Print):	
Signature:	
Date:	

Please email completed form to cleanairgrants@sdapcd.com