

**SACRAMENTO REGION HYBRID VEHICLE REPLACEMENT PROGRAM
EXCLUDED PARTIES LIST SYSTEM (EPLS) SELF-CERTIFICATION**

By signing this document, I, _____, do certify the following;

1. I understand that this program is funded by the United States Environmental Protection Agency (EPA).
2. Please select and complete one of the following:

Dealership or business: I affirm that neither _____
_____ (business name) or any of the
principals of _____ (business name)
are identified on the **EXCLUDED PARTIES LIST SYSTEM (EPLS)**, as
identified on the EPA website, www.epls.gov.

Individuals dba as a business: I affirm that _____
_____ (responsible party(s)) am/are not
identified on the **EXCLUDED PARTIES LIST SYSTEM (EPLS)**, as identified
on the EPA website, www.epls.gov.

Public entity: I affirm that _____
(public entity) is not identified on the **EXCLUDED PARTIES LIST SYSTEM
(EPLS)**, as identified on the EPA website, www.epls.gov.

Signed,

Authorized Signature & Title

Date

Authorized Signatory Name & Title (print)

Company/Agency Name

Street Address, City, State, Zip Code