**Vehicle Repair and Replacement Program (VRRAP)**

**Automobile Recycler Request for Applications**

**Application Release Date: October 24, 2024**

**I. Introduction:** The Salt Lake County Health Department Environmental Health Division received an Environmental Protection Agency (EPA) grant to administer the Vehicle Repair and Replacement Assistance Program (VRRAP) within Salt Lake County. This program will provide monetary assistance to repair emission control devices on vehicles and provide direct cash assistance for replacing a vehicle meeting program requirements.

The replacement component of the VRRAP program encourages owners of older vehicles to retire their automobiles early by providing cash assistance via voucher to purchase a replacement vehicle within the program grant period, which is available through August 1, 2026 or until funding is exhausted.

This RFA is to recruit automobile recyclers to participate in the recycling component of the VRRAP. The automobile recycling component of VRRAP renders vehicles replaced through the program inoperable and recycles those vehicles according to industry standards.

Applications will be accepted on an ongoing basis and those that meet qualifications will be awarded contracts.

**II. Qualifications:** Applicants must hold a current business license and be able to process vehicles for recycling within 14 days of being notified by the dealership.

**III. Outline of Grant Activities:** Successful applicants agree to take delivery of vehicles being replaced through the VRRAP, render the vehicles inoperable, and prepare for recycling by following guidelines below. Earned income from vehicle scrap will be returned to the VRRAP as outlined in Section IV below.

1. Vehicles being replaced through the VRRAP must be picked up and processed by the recycler within 14 days of the recycler being notified by the dealership.
2. Vehicles are to be crushed, and no parts are to be salvaged for reuse.
3. Once the vehicle has been processed the Recycler will submit paperwork evidencing appropriate disposal to SLCoHD by the 10th of each month detailing the previous month’s activities. Recyclers shall submit:
	1. A scale house ticket or similar that the recycler accepted the vehicle
	2. A certificate of destruction for each Vehicle Identification Number (VIN) accepted by the recycler for recycling
	3. A digital photo of the vehicle to be crushed, prior to being processed
	4. A digital photo of the vehicle once crushed
	5. A ledger or similar that documents:
		1. Monies yielded from scrap of each crushed vehicle
		2. Vehicle pickup/transportation costs
		3. Recycler processing and overhead costs

*SLCoHD will submit items III.C.i-iv listed in this RFA as well as a report to the EPA as part of VRRAP grant program activities.*

**IV. Program Income:** Monies yielded from scrap of each recycled vehicle are to be returned to the SLCoHD VRRAP within the 14-day timeframe detailed throughout this RFA.

Recyclers may retain monies to cover the following costs:

1. Vehicle pickup/towing/transportation costs
2. Processing and overhead costs

All other earned income from the scrap will be returned to SLCoHD via check:

Salt Lake County Health Department

Air Quality Bureau

788 E Woodoak Lane

Murray, Utah 84107

The Recycler will use fair market rate for payable scrap.

*Reference:* [*2 CFR Part 200.307(e)(2)*](https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-D/section-200.307)

**IV. RFA Application Process**: Applications will be accepted on an ongoing basis and those that meet qualifications will be awarded contracts.

Questions and completed applications should be emailed to Eric Michaels (emichaels@saltlakecounty.gov).

**Vehicle Repair and Replacement Program (VRRAP)**

**Automobile Recycler Application**

SECTION 1: RECYCLER INFORMATION

Organization Name: Click or tap here to enter text.

Physical Address: Click or tap here to enter text.

City: Click or tap here to enter text. State: UT Zip Code: Click or tap here to enter text.

Mailing Address (If different): Click or tap here to enter text.

City: Click or tap here to enter text. State: UT Zip Code: Click or tap here to enter text.

Dealer Contact Name: Click or tap here to enter text.

Phone Number: Click or tap here to enter text. Email: Click or tap here to enter text.

EIN/DUNS: Click or tap here to enter text.

Provide a brief description of your organization, area of Salt Lake County where your business is located, years in business and any other pertinent information that will help the Health Department understand the value of your participation in this program.

Click or tap here to enter text.

SECTION 2: QUALIFICATIONS & EVALUATION CRITERIA

*The answers to questions 1, 2, and 3 below must be marked “yes” and fully answered for your organization to qualify for a contract under this RFA.*

Requirements and Eligibility

1. Does your organization hold a current business license? [ ] YES [ ] NO
2. Does your organization understand and agree that monies yielded from scrap will be returned to VRRAP within 14 days as outlined in Section IV of this RFA? [ ] YES [ ] NO

Capacity

1. Does the automobile recycler have the capacity to process the vehicle for recycling within 14 days as described within the RFA? [ ] YES [ ] NO

Explain the process: Click or tap here to enter text.

Relevant Experience (*section will not be used to determine scoring/contract eligibility)*

1. Are you familiar with VRRAP [ ] YES [ ] NO
2. Additional information you’d like SLCoHD to know about your organization and/or interest in this RFA: Click or tap here to enter text.

 SECTION 3: AUTHORIZED SIGNATURE

As owner, manager, or authorized representative of the above stated business, I request to participate in the Vehicle Repair and Replacement Assistance Program. My business meets the participation requirements and I agree to follow the assurances and procedures outlined in this document.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_