



November 18, 2008

Dear Member:

The Owner Operator Independent Drivers Association Foundation has been awarded a grant from the Environmental Protection Agency (EPA) to administer an Innovative Finance Program to help small business truckers obtain Auxiliary Power Units (APUs). The grant will pay 40 percent of the cost to purchase and install the units. To be eligible applicants must meet all EPA requirements and program guidelines:

- Must be an OOIDA member
- Only new installations approved under the Innovative Finance Program
- Truck must be titled in the applicant's name
- Applicants must apply for a 3 year loan through the OOIDA Equipment Finance Department
- Only Auxiliary Power Units and only those certified by the EPA. A list of certified APUs is included (discounts currently offered to members on 3 of the certified APUs)
- Complete and return the accompanying questionnaire to help the EPA and the Foundation determine the best possible emissions reduction benefit
- Complete and return the credit application and supporting documents.
- An Electronic Control Module download of the idling time for 1 year prior to installation must be obtained to establish an emissions reduction baseline. The ECM printout must be sent to the Foundation on or about the installation date. Additional ECM readings or readings from the hour meter on the APU will be required twice each year for 3 years to evaluate the reduction in idling time. All ECM downloads will be at your expense

If you are selected and the loan is funded, the first rebate check will come to you after you make your first loan payment. Each subsequent rebate check will be mailed to you on the 6-month anniversary of the loan origination date, but only after you have provided a current ECM or APU hour meter reading. There will be 7 rebates in all covering 40% of the cost. Example: \$10,000 for APU and installation x 40% / 7 = \$571.43 per rebate check.

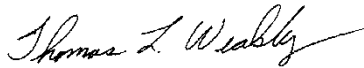
Funding for 2008 is now available. There will be additional funds in 2009 and 2010. Funds will be awarded through a selection process that includes checking member status, scoring the questionnaire and running a credit check. Eligible applicants will be electronically selected at random for the grant award. There will be three selections for funding as follows:

- 2008 - applications must be received by December 5, 2008 (approximately 50 awards)
- 2009 – applications will be review to the time that we reach our 2009 spending limit.
- 2010 - application deadline to be announced in late 2009

Eligible applicants that are not randomly selected in one or both of the first two years will have another chance to be selected the next year until all funds are expended in 2010.

For additional information contact the OOIDA Equipment Finance Department at 800-444-5791.

Good luck!

A handwritten signature in cursive script that reads "Thomas L. Weakley".

Tom Weakley
Director of Operations

Questionnaire:

Only one truck/tractor in your fleet is eligible. Responses to the following must directly relate to the truck/tractor you intend to submit as a candidate for installation of idle/fuel reduction technology.

1. Which of the following best describes your type of operation?
 - a) Local
 - b) Regional
 - c) Long Haul

2. Is the candidate truck equipped with an ECM capable of downloading idling time?
 yes no

3. Will you own this truck for at least a year after installation?
 Yes No

4. Is this truck equipped with a sleeper berth?
 Yes No

5. Which, if any, idle/fuel reduction technology is currently installed on this truck?
 - a) None
 - b) Generator
 - c) Auxiliary Power Unit
 - d) Shore Power
 - e) Autonomous Heater/Cooler
 - f) Fuel-fired heater
 - g) Other _____ (describe)

6. What model year is this truck? _____

7. Approximately how many hours did this truck idle last year? _____

8. Which auxiliary power unit would you prefer?
*Certified Auxiliary Power Units (Basic features include: heating, air conditioning, electrical power).
 Pony Pack
 Black Rock
 Carrier Transicold
 Thermo King
 Rigmaster
 Other _____

Member #: _____

Name: _____

Address: _____

Home Phone #: _____ Mobile Phone: _____

Auxiliary Power Units and Generator Sets (APU/GS)

An APU/GS device contains an EPA certified engine, as certified under 40 CFR Part 89. APU/GS devices supply cooling, heating, and electrical power to Class 8 trucks and other applications. EPA has determined through its own test program that these devices reduce emissions and fuel use on Class 8 trucks and other applications when compared to the baseline truck's emissions.

Verified technologies include the APU/GS systems manufactured by the following companies:

Trucks:

- **Auxiliary Power Dynamics, LLC** www.auxiliarypowerdynamics.com or www.willisapu.com
- **Black Rock Systems** www.blackrockapu.com
- **Carrier Transicold (ComfortPro)** www.trucktrailer.carrier.com
- **Comfort Master** www.comfortmaster.com
- **Craufurd Manufacturing, Inc.** www.craufurdmanufacturing.com
- **Cummins** www.cumminsonan.com
- **Diamond Power Systems, LLC** www.diamondpowersystems.com
- **Double Eagle Industries** www.doubleeagleind.com/gen-pac.htm
- **Flying J Inc** www.fjesolutions.com
- **Frigette Truck Climate Systems** www.scsfrigette.com/html/products
- **Gates Corporation** www.gates.com
- **Idlebuster** www.idlebuster.com
- **Kohler** www.kohlerpower.com
- **Kool-Gen** www.kool-gen.com
- **Life Force** www.lifeforceapu.com
- **Mechron Power Systems** www.ccslightning.com
- **Navistar**
- **P D M Industries** www.pdindustries.net
- **Pony Pack, Inc.** www.ponypack.com
- **Power Technology Southeast** www.powertech-gen.com
- **Rig Master Power** www.rigmasterpower.com
- **Star Class, Inc.** www.starclassinc.com
- **Thermo King Corporation** (Ingersoll Rand) www.thermoking.com
- **TRIDAKO Energy Systems** www.tridako.com
- **Truck Gen** no website listed.
- **Truck Mate** www.truckmategenerators.com



EPA Grant & OOIDA Equipment Finance Program

Items to be returned:

- Page 1 & 2 of credit application. Please make sure to sign the 2nd page of the application. Make sure to fill out the application very thoroughly. If a question does not apply to you, please put “NA”. It is very important that you fill out the Transaction Information section with the purchase price and down payment, and the amount you need to finance.
- Dealer invoice for APU.
- Copy of your title to the truck that you are installing the APU on.
- Specification Form. Please give details of the truck you are mounting the APU to.
- Personal Financial Statement – Completely fill this form out & sign it.
- Bank Statements – the past 3 months, first page only.
- Complete EPA questionnaire.

All of the above items must be returned, at the same time, in order for your name to be in the random drawing. If you have any questions, please call our office at 1-800-444-5791, before returning the application.

Thank you.



EQUIPMENT FINANCE CREDIT APPLICATION

Owner-Operator Services, Inc.

PO Box 1000, Grain Valley, MO 64029 / Phone# 1-800-444-5791 / Fax# 1-816-867-2153 / finance@ooida.com

PERSONAL INFORMATION

OOIDA Member #:	CDL # and State:	E-Mail Address:
LEGAL First Name:	Middle Initial:	Last Name:
Social Security #:	Date of Birth:	Cell Ph #:
Street Address:	Home Ph #:	
City/State/ZIP/County:	Fax #:	
<input type="checkbox"/> Rent <input type="checkbox"/> Own Landlord/Mtg Name:	Ph #:	Pmt \$:
Spouse's LEGAL Name:	Social Security #:	Date of Birth:
Previous Address (Required if not at current address for 5 years):		How long?
TWO Closest Relatives NOT Living at the same address or with you (Name/City/State/Phone #/Relationship)		
What name will equipment will be titled in?	State titling?	State Registering?

CORPORATE INFORMATION (IF APPLICABLE)

Corporate Name:	Corporate Officers:
Corporate Address:	Year Incorporated: State of Incorporation:
Type of Legal Entity: <input type="checkbox"/> C-Corporation <input type="checkbox"/> S-Corporation <input type="checkbox"/> Limited Liability Co	Federal Tax ID#

TRUCKING EXPERIENCE ****Please list a minimum of 3 years driving history****

Number of Years Driving Experience:	How long as an Owner Operator: _____ currently? _____ in the past?
Gross Monthly Revenue (\$):	Revenue/Mile+Fuel Surcharge (\$): Miles/Month:
Current: Employer/Lease Company/Own Authority (MC#):	Phone Number: Contact: How many Years? _____ Months _____
Previous: : Employer/Lease Company/Own Authority (MC#):	Phone Number: Contact: How many Years? _____ Months _____
Previous: : Employer/Lease Company/Own Authority (MC#):	Phone Number: Contact: How many Years? _____ Months _____

TRUCK USAGE

Truck to haul for:	<input type="checkbox"/> Local Haul <input type="checkbox"/> Regional Haul <input type="checkbox"/> Long Distance Haul	Phone Number: Contact:
Driver Name:	Address:	Social Security #: Date of Birth:

TRUCKS & TRAILERS CURRENTLY OWNED/FINANCED/LEASED

Equipment owned/leased at this time:	_____ # of Trucks owned/leased	_____ # of Trailers owned/leased
Year/Make/Model:	Financed by/Phone #/Acct #:	
Year/Make/Model:	Financed by/Phone #/Acct #:	
Year/Make/Model:	Financed by/Phone #/Acct #:	
Year/Make/Model:	Financed by/Phone #/Acct #:	
Year/Make/Model:	Financed by/Phone #/Acct #:	

TRUCK & TRAILER CREDIT REFERENCES – PAID OFF ACCOUNTS

Lender:	Phone #:	Acct #:	Payoff Date:
Lender:	Phone #:	Acct #:	Payoff Date:

BANK REFERENCE – CHECKING & SAVING ACCOUNTS

Bank Name:	City/State:	Phone #:
Checking Account #:	Average Balance (\$):	Contact:
Bank Name:	City/State:	Phone #:
Saving Account #:	Average Balance (\$):	Contact:

LEGAL ACTIONS

Have you had a **Bankruptcy** or **Repossession** within the past 10 years? Yes No IF YES, **please** explain on a separate piece of paper.

INSURANCE

Would You Like For OOIDA to provide you with a Truck Insurance Quote: Yes No

Current Insurance Agent’s Name: _____ Phone #: _____

TRANSACTION INFORMATION -- Fill in any space/square that applies. All transactions w/ approved credit.

Dealer or Selling Party:	Purchase: <input type="checkbox"/> Auxiliary Power Unit <input type="checkbox"/> Truck <input type="checkbox"/> Trailer
Telephone No: _____ Contact Name: _____	Is this a: <input type="checkbox"/> Replacement Unit <input type="checkbox"/> Additional Unit
Selling Price: \$ _____	<input type="checkbox"/> Refinance/Buyout on Current Unit
Cash Down: \$ _____	Trade-in: Year/Make/Model: _____
Amount to Finance: \$ _____	Term (months): <input type="checkbox"/> 12 <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60

The undersigned certifies the above information is correct and by signing below, consents to the obtaining from any credit reporting agency or credit grantor such information as Owner Operator Services, Inc. or its agents may require at any time in connection with credit hereby applied for and consents to the disclosure at any time of any information concerning the undersigned to any credit reporting agency or credit grantor with whom the undersigned has a financial relationship. If you’re application for a loan or lease is denied you have the right to a statement of specific reasons for such denial within 30 days after you send a written request to: OOIDA Truck Finance Office, P.O. Box 1000, Grain valley, MO 64029.

***I hereby authorize my banks, trades, and personal credit bureaus to release credit information to OOSI and/or its assignees.**

SIGNATURE OF APPLICANT: _____ **DATE:** _____

SIGNATURE OF CO-APPLICANT: _____ **DATE:** _____



OOIDA AUXILIARY POWER UNIT & TRUCK SPECIFICATION FORM

Do you want to refinance your current truck and add the cost of the APU to it? Yes No

Is the truck Titled in your name? Yes No

How long to you plan on keeping this truck? _____

What Brand of APU do you want to purchase? _____

APPLICANT & SELLER INFORMATION

Applicant's name:		
Finance Companies Name:	Phone Number:	Contact Name:

POWER UNIT

<input type="checkbox"/> New <input type="checkbox"/> Used	Year of Truck:	<input type="checkbox"/> Straight truck <input type="checkbox"/> Dump <input type="checkbox"/> Tractor <input type="checkbox"/> Hot Shot	<input type="checkbox"/> Cab over engine(COE) <input type="checkbox"/> HD Pick-up <input type="checkbox"/> Conventional
Color of Truck:	Manufacturer: <input type="checkbox"/> Peterbilt <input type="checkbox"/> Freightliner <input type="checkbox"/> Volvo <input type="checkbox"/> International <input type="checkbox"/> Kenworth <input type="checkbox"/> Mack <input type="checkbox"/> WhiteGMC <input type="checkbox"/> Western Star <input type="checkbox"/> Sterling <input type="checkbox"/> _____		
Model of truck:	VIN#:	<input type="checkbox"/> Medium duty <input type="checkbox"/> Heavy duty	
Engine manufacturer:	<input type="checkbox"/> Caterpillar <input type="checkbox"/> Cummins <input type="checkbox"/> Detroit Diesel <input type="checkbox"/> Mercedes <input type="checkbox"/> Volvo <input type="checkbox"/> _____		
Engine model number:	Engine horsepower:	Engine brake: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Transmission manufacturer:	<input type="checkbox"/> Allison <input type="checkbox"/> Dana/Spicer <input type="checkbox"/> Eaton/Fuller <input type="checkbox"/> Merritor/Rockwell <input type="checkbox"/> _____		
Transmission model number:	Transmission type: <input type="checkbox"/> Automatic <input type="checkbox"/> Manual		
Number of forward gears:	<input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 13 <input type="checkbox"/> 15 <input type="checkbox"/> 18 Overdrive transmission: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Sleeper length (inches):	Sleeper height/roof: <input type="checkbox"/> Flat top <input type="checkbox"/> Mid roof <input type="checkbox"/> Raised roof/Condo/Penthouse <input type="checkbox"/> Workstation		
Sleeper style:	<input type="checkbox"/> Integral type (cab & sleeper are one unit) <input type="checkbox"/> Double Bunk <input type="checkbox"/> Box type <input type="checkbox"/> Custom <input type="checkbox"/> After market		
Rear axle: <input type="checkbox"/> Single rear <input type="checkbox"/> Tandem rear <input type="checkbox"/> Tag	Rear suspension: <input type="checkbox"/> Spring suspension <input type="checkbox"/> Air Ride suspension		
Aerodynamics: <input type="checkbox"/> Cab extenders <input type="checkbox"/> Roof fairing <input type="checkbox"/> Full Chassis Fairings <input type="checkbox"/> Side fairings	<input type="checkbox"/> Premium Level Interior		
Fifth wheel: <input type="checkbox"/> Stationary <input type="checkbox"/> Manual slide <input type="checkbox"/> Air slide	Aluminum Wheels: <input type="checkbox"/> Zero <input type="checkbox"/> Two <input type="checkbox"/> Four <input type="checkbox"/> Six <input type="checkbox"/> Ten		
<input type="checkbox"/> Stainless Air Cleaners	<input type="checkbox"/> Chrome Dual Exhaust	Air suspension cab: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Fuel tanks: <input type="checkbox"/> Single tank <input type="checkbox"/> Dual tanks <input type="checkbox"/> Steel <input type="checkbox"/> Aluminum Total (gallons) _____	<input type="checkbox"/> APU Brand _____		
Stainless Steel: <input type="checkbox"/> Sun Visor <input type="checkbox"/> ¼ fenders	<input type="checkbox"/> New Bumper	<input type="checkbox"/> New Tires	<input type="checkbox"/> New Clutch <input type="checkbox"/> New Batteries
Warranty:	Vehicle mileage (REQUIRED ON USED UNITS):		
Additional specifications:			



OWNER-OPERATOR INDEPENDENT DRIVERS ASSOCIATION

TRUCK AND TRAILER FINANCE PROGRAM

1 NW OOIDA Drive, Grain Valley, MO 64029 Phone# 1-800-444-5791 Fax# 1/816-867-2153

PERSONAL AND BUSINESS FINANCIAL STATEMENT

Name _____ Spouse _____

Address _____

Business or Occupation _____

ASSETS		AMOUNT	LIABILITIES		AMOUNT
CASH ON HAND		\$	CREDIT CARDS		\$
CASH IN BANK-CHECKING					
CASH IN BANK-SAVINGS					
ACCOUNTS RECEIVABLE					
STOCK, BONDS & OTHER INVESTMENTS			ACCOUNTS PAYABLE		
RETIREMENT ACCOUNTS			LOANS ON LIFE INSURANCE		
			OWING ON REAL ESTATE	HOMESTEAD	
REAL ESTATE	HOMESTEAD			OTHER	
	OTHER			OTHER	
	OTHER		VEHICLE LOANS		
AUTOS	YR:	MAKE:		TRUCK/TRAILER LOANS	
	YR:	MAKE:			
	YR:	MAKE:		OTHER OUTSTANDING LOANS	
PERSONAL PROPERTY-HOUSEHOLD					
OTHER ASSETS					
TRUCKS/TRAILERS					
			TOTAL LIABILITIES		\$
			NET WORTH		\$
TOTAL ASSETS		\$	=TOTAL LIABILITIES & NET WORTH		\$

The undersigned represents and warrants that the information provided here is true and complete.

DATE SIGNED _____ SIGN HERE X _____