

Funded in part by:
Financé en partie par :



Annual Outcomes Reporting Form for Approved Retrofits during Fiscal Year _____

Applicant Name: _____ Period Covered: _____

Please complete this Annual Outcomes Reporting Form for each of three subsequent time periods: (1) April 1, ____ to March 31, ____; (2) April 1, ____ to March 31, ____; and (3) April 1, ____ to March 31, _____. Email completed forms annually by **April 15 after each completed time period** to: Efficient Trucking Program <etp@efficienttrucking.ca>. **Please copy and complete this page as necessary.**

Unit Type	Vehicle Information				Total Past Year Travel (km)	Travel or Proportion by Location			Total Past Year Fuel (Litres)	Total Past Year Idling (hours)
	GVW	Model	Make	Vehicle Identification # or Trailer Serial #		In MB	Rest of Canada	Outside Canada		

