

For project criteria please refer to the locomotive chapter in the Carl Moyer Program Guidelines.

If you have any questions regarding this program or the application process, please contact Mei Wang by phone at (909) 396-3257

If you have more than one	equipment for your project, pl	ease make conjes of this f	orm and	Lusa ona fo	rm for each
equipment.	equipment for your project, pr	ease make copies or tills i	oriii ariu	i use one io	Till for each
Existing Locomotive Info	ormation				
Has this locomotive received		O Yes	O No		
Equipment Location Add	ress				
Is the equipment location add	lress the same as the applicant ac	ddress?		O Yes	O No
Street address/ PO Box					
Street Address Line 2		City			
County		State			
Zip		Vehicle Type			
If other, please describe:					
Locomotive type					
If other locomotive type, plea	se describe				
Locomotive Make		Locomotive Model			
Locomotive Model Year		Locomotive Serial Number			
Unit number or other identifier					
Does the locomotive already	have a functioning idle limiting de	vice (ILD) installed?		O Yes	O No



operate as specified in your SCAQMD contract):

Carl Moyer and SOON Application Form E-5

Locomotive Engine Remanufacture Kit or Repower/Refurbishment Project Details

Railroad Class	
All cost estimates must be based on quotes that have been obtained within 90 d. Announcement. Attach all quotes to the application.	ays prior to the closing date of the Program
Total Funding Requested from SCAQMD	
Identify other funding sources to be used for this project	
Total Project Cost (From Quote: MUST EQUAL QUOTE)	
Applicant Co-Funding Amount	
Operation Information	
Percent Operation in California	
Percent Operation in District	
Proposed Project Life (this is the number of years that the equipment must	



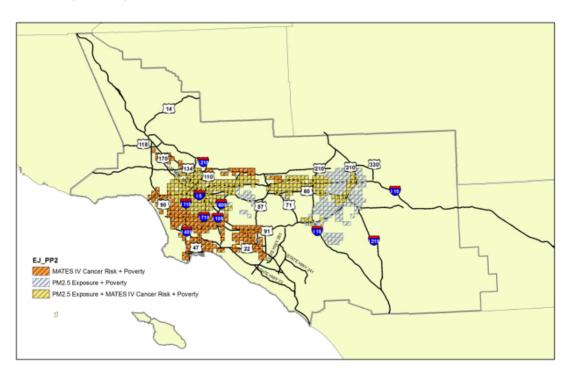
Carl Moyer and SOON Application Form E-5

Locomotive Engine Remanufacture Kit or Repower/Refurbishment Disproportionate Impact

At least 50 percent of the SCAQMD's CMP funds must be spent in areas that are most disproportionally impacted by air pollution. SCAQMD uses the following method to meet these requirements:

- 1. All projects must qualify for the Carl Moyer Program by meeting the cost-effectiveness limits established in the Program Announcement.
- All projects will be evaluated according to the following criteria to qualify for funding as a disproportionately impacted area:
 - a. Poverty Level: Detailed socioeconomic information is not included in the 2010 Census. Such data is collected yearly from a small percentage of the population on a rotating basis by the American Community Survey (ACS). All projects in areas where at least 10 percent of the population falls below the Federal poverty level based on the 2008-2012 ACS data are eligible to be included in this category, and
 - b. PM2.5 Exposure: All projects in areas with the highest 15 percent of PM2.5 concentration measured within a 2 km grid will be eligible to be ranked in this category. The highest 15 percent of PM2.5 concentration is 11.10 micrograms per cubic meter and above, on an annual average, or
 - c. Air Toxics Exposure: All projects in areas with a cancer risk of 865 in a million and above (based on MATES III estimates) will be eligible to be ranked in this category.

The maximum score is comprised of 40 percent for poverty level and 30 percent each for PM and toxic exposures. Special circumstances exist in some areas, such as the Ports of Long Beach and Los Angeles. Since there are no residents within the ports, poverty ranking could not be established. In this case, the poverty ranking from the adjacent on-shore areas was extended to the port since these populated areas are directly impacted by port activities.





If you have more than one engine for your project, please make copies of this form and use one form for each engine.

Existing/Baseline Engine	Information		
Engine Fuel Type			
Engine Make		Engine Model	
Engine Model Year		Engine Serial Number	
Engine Type	O Main O Auxiliary	Engine Horsepower	
Existing Engine (Baseline) Emissions Tier			
Baseline Engine Family		US EPA Certificate of Conformity No	
CARB Executive Order No			
US EPA Certificate of Conformi	ity MUST BE ATTACHED – SEE AT	TACHMENTS SECTION	
CARB Executive Order MUST B	E ATTACHED – SEE ATTACHMENT	rs section	
Remanufacture Kit			
Engine Fuel Type			
Engine Make		Engine Model	
Engine Model Year			
Engine Serial Number		Engine Horsepower	
EPA Engine Family Name		U.S. EPA Certified Locomotive Emission Level	
Engine Cost		Installation Cost	
	sed on quotes that have been obt nnouncement. Attach all quotes to	- ·	
Idle Limiting Device (ILD) Details		
Will a new eligible ILD be insta	alled as part of this project?		O Yes O No
ILD Type (AESS, FOH, APU, etc.)			
Make		Model	
Model Year		ID Number	
Capital Cost		Installation Cost	
All cost estimates must be base Announcement. Attach all quot	ed on quotes that have been obt tes to the application.	ained within 90 days prior to the	closing date of the Program
Electronic Monitoring Uni	t (EMU) Details		
Will a new eligible EMU be inst	alled as part of this project?		O Yes O No
EMU Make		EMU Model	
EMU Model Year		EMU ID Number	
EMU Cost			



If you have more than one engine for your project, please make copies of this form and use one form for each engine.

Project application must include documentation of existing equipment usage for the previous 24 months prior to the application date

Please attach documentation to support the reported gallons per year

Annual Fuel Us	sage			
	2017	2016	2015	Estimated Annual Future Usage
Fuel Use (gallons/year)				



The following attachments may be submitted for this proposal:

- Insurance Documentation
- Emissions certification documentation
- Quotes
- Equipment Usage Documentation (for past 24 months)
- Other misc. attachments
- Engine Executive Order(s) and Retrofit Device Executive Order(s)
- Fuel Documentation
- Business Information Request Form
- Campaign Contribution Disclosure
- W-9 Form
- Business Status Cert
- Direct Deposit Form