

Carl Moyer and SOON Application Form C-2 **Off-Road Equipment Repower Equipment Information**

If you have any questions regarding this program or the application process, please contact Walter Shen by phone at (909) 396-2487 or by email at: wshen@aqmd.gov

Large Off-Road Fleets have limited eligibility for Carl Moyer Program funding, but may apply for SOON Program funding using this application. For more information, please visit www.aqmd.gov/SOON.

Please complete ONE (1) form for	or each piece of equipment.				
Existing Equipment Infor	mation				
Are you applying under Carl Moy	er Program OR the Surplus Of	ff-Road NOx Program?			
Has this equipment received Car	I Moyer Program funds in the p	past?	O Yes	O No	
For Large Fleets Only - have you	received Carl Moyer funding a	after January 1, 2017?	O Yes	O No	
What is the primary function of this equipment?					
Is the vehicle location address the	same as the applicant addres	ss? If not, please complete below.	O Yes	○ No	
Street Address (if no address, provide intersection)		City			
County		State			
Zip		Vehicle Type			
If other, please describe:					
Equipment Category					
Equipment Type]			
If other equipment type, please	describe				
Equipment Make		Equipment Model			
Equipment Model Year		Equipment Serial Number or VIN			
Unit Number or EIN# (for non- Ag Operations)]			
Number of Main Engines		Number of Auxiliary Engines			
Is this equipment			O Yes	O No	

used in Agricultural operations?



Carl Moyer and SOON Application Form C-2 Off-Road Equipment Repower Project Details

Is equipment currently subject to CARB's Off-Road Regulation?	O Yes O No
What is the total horsepower of all vehicles in the fleet?	
Enter DOORS Fleet Number	
All Off-Road equipment applicants subject to CARB's In-Use Off-Road Diesel Vehicle	e Regulation must submit their DOORS fleet

You may contact the DOORS hotline at (877) 593-6677 for assistance.

SOON applications must also submit the fleet average calculation. Please visit <u>https://arb.ca.gov/msprog/ordiesel/fac.htm</u> for more information.

Total Funding Requested (including Retrofit cost, if applicable)

Identify other funding sources to be used for this project

compliance snapshot and fleet vehicle list.

Total Project Cost (From Quote: MUST EQUAL QUOTE - incl. Retrofit if applicable)

Applicant Co-Funding Amount

Operation Information

Is existing equipment in operable condition?	○ Yes ○ No
How many years has the applicant owned the existing equipment?	
Does this vehicle have a functioning, non-resettable hour meter?	O Yes O No
Percent Operation in California	
Percent Operation in District	
Proposed Project Life (this is the number of years that the equipment	
must operate as specified in your SCAQMD contract)	



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

Baseline Engine Type	O Main O Auxiliary		
Baseline Engine Fuel Type			
Baseline Engine Make		Baseline Engine Model	
Baseline Engine Model Year		Baseline Engine Serial Number	
Baseline Engine Horsepower		Baseline Engine Family Number	
Old Engine (Baseline) Emissions Tier			
Method proposed for rendering t	he baseline engine(s) inoperable		
New Engine Information			
New Engine Fuel Type			
New Engine Make		New Engine Model	
New Engine Model Year		New Engine Serial Number	
New Engine Horsepower		New Engine Family Number	
New Engine (Reduced) Emissions Tier			
Is the New Engine a Family Emis	sions Limit (FEL) engine?		O Yes O No
New Engine Cost Informati		Cont of	

New Engine Unit Cost	Cost of Installation/Labor	
Cost of New Engine Tax	Total Cost of Repower	
Applicant Co-Funding Amount (if any)	Grant Request Amount for this Repower	

All cost estimates must be based on quotes that have been obtained within 90 days prior to the closing date of the Program Announcement. Attach all quotes to the application.

New Engine Vendor Information

Vendor	Vendor Contact Name	
Vendor Phone Number	Vendor Address	
Vendor City	Vendor State	
Vendor Zip		



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Engine Retrofit Information

Will a retrofit device be added to t	his engine as part of this project?		🖲 Yes 🔍 No
Retrofit Device Make		Retrofit Device Model	
% PM Reduction		% NOX Reduction	
% ROG Reduction		Retrofit Device ARB Executive Order Number	
Project Life			
Retrofit Cost Information			
Retrofit Device System Cost		Retrofit Device Installation Cost	
Total Cost of Retrofit		Amount requested for this retrofit	\$



Carl Moyer and SOON Application Form C-2 Off-Road Equipment Repower Engine Activity Information

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.

Baseline Engine - Annual operation details for the past 24-months

Jan - Date of Application Submittal 2020

Jan - Dec 2019

Mar - Dec 2018

Estimated Annual Future Usage

Hours



Carl Moyer and SOON Application Form C-2 Off-Road Equipment Repower Attachment

The following attachments must be submitted for this application:

- Insurance Documentation
- Engine Executive Order(s) and Retrofit Device Executive Order(s)
- Quotes (must be within 90 day of application submittal)
- Equipment Usage Documentation (for past 24 months including, but not limited to, maintenance records, hour meter readings)
- Photo showing the baseline (old) engine model year, engine serial #, horsepower, engine family # (if available)
- SOON Fleet Average Calculation (please go to https://arb.ca.gov/msprog/ordiesel/fac.htm)
 only for applicants applying for SOON funding (only if applying under SOON Program)
- DOORS Fleet Compliance Snapshot including vehicle list
- Business Information Request Form
- Campaign Contribution Disclosure
- W-9 Form
- Direct Deposit Form
- Business Status Certification
- Certification of Debarment, Suspension and Other Responsibility Matters