



Carl Moyer and SOON Application

Form C-1

Off-Road Equipment Replacement

Equipment Information (page 1 of 2)

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 each piece of equipment.

Existing Equipment Information

Are you applying under Carl Moyer Program OR the Surplus Off-Road NOx Program?

Has this equipment received Carl Moyer Program funds in the past? ☐ Yes ☐ No

For Large Fleets Only - have you received Carl Moyer funding after January 1, 2017? ☐ Yes ☐ No

What is the primary function of this equipment?

Is the vehicle location address the same as the applicant address? If not, please complete below. ☐ 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)

Is 2 to 1 Replacement Applied? ☐ Yes ☐ No

Number of Main Engines Number of Auxiliary Engines

Is this equipment used in Agricultural operations? ☐ Yes ☐ No

What percentage of equipment operations are in Agriculture?



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New Equipment and Vendor Information

Unit Number	<input type="text"/>	Equipment Category	<input type="text"/>
Equipment Type	<input type="text"/>		
If other equipment type, please describe <input type="text"/>			
Equipment Make	<input type="text"/>	Equipment Model	<input type="text"/>
Equipment Model Year	<input type="text"/>		
Vendor	<input type="text"/>	Vendor Contact Name	<input type="text"/>
Vendor Phone Number	<input type="text"/>	Vendor Address	<input type="text"/>
Vendor City	<input type="text"/>	State	<input type="text"/>
Vendor Zip	<input type="text"/>		

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.

Number of engines for this New Equipment Unit:

Main (Front) Engine(s)	<input type="text"/>	Auxiliary (Rear) Engine(s)	<input type="text"/>
New Replacement Unit Cost \$	<input type="text"/>	Tax \$	<input type="text"/>
Total Cost for this Replacement \$	<input type="text"/>	Applicant Co-Funding Amount (If Any) \$	<input type="text"/>
Applicant Grant Request (If Any) \$	<input type="text"/>		



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Project Details

Is equipment currently subject to CARB's Off-Road Regulation?

☐ Yes ☐ 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 Regulation must submit their DOORS fleet compliance snapshot and fleet vehicle list.

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

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

Total Funding Requested (for this Replacement ONLY)

Identify other funding sources to be used for this project

Total Project Cost (From Quote: MUST EQUAL QUOTE)

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?

☐ Yes ☐ No

Percent Operation in California

Percent Operation in District

Note: See <http://www.aqmd.gov/home/about/jurisdiction> for a jurisdiction map.

Proposed Project Life (this is the number of years that the equipment must operate as specified in your SCAQMD contract)



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Engine Information

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 ☐ Main ☐ 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

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



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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	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



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Attachments

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 days of application submittal)
- Equipment Usage Documentation (for past 24 – months including, but not limited to, maintenance records, hour meter readings)
- Photo showing the baseline engine (old) engine model year, engine serial #, HP, engine family # (if available)
- Equipment Ownership (Bill of Sale)
- 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
- Business Status Cert
- W-9 Form
- Direct Deposit Form
- Certification of Debarment, Suspension and Other Responsibility Matters