



NEW MOBILE EQUIPMENT INFORMATION

*Complete 1 Form per piece of New Mobile Equipment to be purchased
(Ag Tractors, Wheel Loaders, HD Trucks, Electric ATV, etc...)*

NEW EQUIPMENT

Equipment Make:	Equipment Model:	Equipment Model Year:
Engine Make:	Engine Model:	Engine Model Year:
Horsepower:	US EPA Family Name:	
<i>For off-road only:</i>		
Engine Tier: <input type="checkbox"/> Tier 3 (Flex) <input type="checkbox"/> Tier 4 Alt Nox <input type="checkbox"/> Interim Tier 4 <input type="checkbox"/> Tier 4 Final		
Fuel Type: <input type="checkbox"/> Diesel <input type="checkbox"/> CNG <input type="checkbox"/> Hybrid Electric <input type="checkbox"/> Zero Emission Electric <input type="checkbox"/> Other (please specify):		Total Cost of New Equipment:

NEW EQUIPMENT DEALER INFORMATION

Dealership Name:		Contact Name:
Address:		
City	State:	Zip Code:
Email:		Phone Number: