

Eligibility Evaluation Criteria for Used Agricultural Equipment

Status				Safety Equipment
A	B	C	S	
				Seat Belts
				Rollover Protection
				Warning/Flashing Lights
				Decals in Place (e.g., SMV)
				Other Audible Sounds
				Horn
				Brake Pedal Interlock
				PTO Shield in Place
				Reflectors
				Mirrors (if applicable)
				Other Equipment (if applicable)

Status				Engine
A	B	C	S	
				Engine Oil/Filter
				Clean DPF, Check for Exhaust Smoke
				Unusual Noise
				Turbo Charger (if applicable)
				Intake System
				Muffler/Exhaust System
				High & Low Idle Speed
				Fuel Pumps & Fuel Lines/Clamps
				Run Unit on Dyno for 2 Hours
				Fuel Shut Off System
				Fuel Throttle Linkage
				Fuel Tank
				Fuel Cap
				Belts/Tensioner
				Cold Starting Aids/Block Heater
				Check Fault Codes/History & Repair
				Other Components (if applicable)

Status				Electrical
A	B	C	S	
				Neutral Starting Switch
				Connections
				Battery Fluid
				Battery Hold Down
				Battery Voltage
				Battery Area Clear/Clean
				Starter
				Alternator
				Wipers
				Heat/AC Fan (if applicable)
				Turn Signals
				Lights
				Differential Lock
				Instrumentation/Warning Lights
				MFD Switch (if applicable)
				Other Components (if applicable)

Status				Steering System
A	B	C	S	
				Hoses
				Cylinder/Valves
				Tie Rods/Knuckles
				Operational
				Front Wheel Toe In
				Tilt & Telescope
				Other Components (if applicable)

Status				Power Train
A	B	C	S	
				Planetary Oil
				Differential Oil
				Check for All Gears
				Wheel Spacing (By Request)
				Wheel Lugs
				Tires/Pressure
				Hydrostatic Transmission
				Other Components (if applicable)

Status				Brake System
A	B	C	S	
				Manual & Power
				Linkage/Control
				Lines/Hoses
				Parking Brake/Lock
				Other Components (if applicable)

Status				Cooling System
A	B	C	S	
				Radiator Core
				Hoses/Clamps/Radiator Cap
				Water Pump
				Fan Assembly
				Coolant/_____°
				Coolant Recovery
				Other Components (if applicable)

Status	Definition
A	Good condition
B	Operational with signs of wear
C	Critical – must repair
S	Passed inspection – service provided

Status				Hydraulic
A	B	C	S	
				Oil Level
				Lines/Hoses
				Control/Linkage
				Oil Cooler
				Cylinders/Valves
				Reservoir
				Operational
				Proper Detent
				Quick Couplers
				Other Components (if applicable)

Status				Leaks
A	B	C	S	
				Oil
				Coolant
				Fuel

Status				Hitch/PTO Area
A	B	C	S	
				Inspect Hitch Members
				Upper Link Operational
				Proper Height
				Engage/Disengage

Status				Additional Maintenance
A	B	C	S	
				Lube Grease
				Engine Air Filters
				Engine Fuel Filters
				Hydraulic Filters
				Wheel Bearings
				Engine Valve Lash Adjustment
				Fuel Injectors
				Coolant/Filters
				Cab Filters
				Clean A/C Condenser
				A/C Check
				Other Components (if applicable)

Status				Miscellaneous
A	B	C	S	
				Welds/Frames
				Exterior Condition
				Seat Operates/Condition
				Fire Extinguisher (if equipped)

Status				Fluid Analysis
A	B	C	S	
				Engine
				Hydrostatic/Transmission
				MFD Front Differential
				MFD Outboard Planetaries
				Coolant

Status	Definition
A	Good condition
B	Operational with signs of wear
C	Critical – must repair
S	Passed inspection – service provided

ORIGINAL EQUIPMENT MANUFACTURER/DEALER CERTIFICATIONS FORM

By signing this Certifications form, I certify that I have read and understand the Eligibility Criteria and Application Guidelines document and agree to adhere to its requirements. Additionally, by signing this Certifications form, I certify to the statements and agree to adhere to the terms and conditions described below:

1. I verify the replacement equipment conforms to Tier 3 emissions standards or cleaner with an hour meter reading of between 501-10,000 hours.
2. I have evaluated and ensured that all emission control components are in working condition and have not been tampered with.
3. I certify that the Eligibility Evaluation Criteria form has been completed and the equipment has no "critical", or C Status areas.
4. I understand that any components found to be in critical condition, repairs must be made before the equipment is deemed eligible for funding.
5. I agree not to sell, allow the applicant to make payment towards, and/or take possession of the certified pre-owned replacement equipment prior to them receiving an executed contract from the SJVAPCD.
6. I attest that the replacement equipment matches the equipment identification number and engine serial number provided in Section 5 of the application.
7. I hereby release the SJVAPCD of any and all liability that could foreseeably arise as a result of this agreement or its use of the replacement equipment.

Dealer (print name)

Dealer Signature

Date



Small Farmer Certified Pre-Owned Ag Equipment Pilot Program Grant Monitoring Inspection

As part of the Small Farmer Certified Pre-Owned Ag Equipment Pilot Program, an Original Equipment Manufacturer (OEM) dealer will be required to conduct an inspection of the pre-selected pre-owned replacement equipment for the below referenced application. All photographs must be clear, and all vehicle identification numbers (VIN) and engine serial numbers must be legible. Photos can be submitted on a flash drive with the application by mail, or emailed to grants@valleyair.org. All photos emailed to the District's email must have the applicant's name and equipment VIN in the subject line.

Organization or Proprietor's Name: _____

Primary Contact: _____

Equipment Make & Model: _____

Required Photographs/Documents of the Pre-Owned Replacement Equipment

Clear photographs of ALL the following must be taken of the equipment

<input type="checkbox"/> Equipment – Full Left-side view	<input type="checkbox"/> Engine – Left side
<input type="checkbox"/> Equipment – Full Right-side view	<input type="checkbox"/> Engine – Right side
<input type="checkbox"/> Equipment – Front & Rear View	<input type="checkbox"/> Engine Serial Number – Data Tag/Stamped on block
<input type="checkbox"/> Equipment VIN – Data Tag	<input type="checkbox"/> Emission Label – Engine Model and EPA Family Name
<input type="checkbox"/> Photo of Valley Air District Sticker	<input type="checkbox"/> Hour Meter Reading: _____ hours

Comments/Pertinent Information:

I represent that the information and photographs presented herein are an accurate and true representation of the equipment associated with the above-referenced application, and further acknowledge and agree that the District is relying upon my representation in its approval of my participation in the grant program.

OEM Dealership Name:	Dealer Name (Print):
Date of Inspection:	Dealer Signature: