

SAN JOAQUIN VALLEY AIR POLLUTION CONTROL DISTRICT

APPLICATION

HEAVY-DUTY ENGINE PROGRAM
OFF-ROAD VEHICLE COMPONENT

ENGINE REPOWER

Please return all completed applications to:
SJVAPCD Emission Reduction Incentive Program
1990 East Gettysburg Avenue Fresno, CA 93726-0244

SECTION 1 - APPLICANT INFORMATION (PLEASE PRINT OR TYPE)

ORGANIZATION INFORMATION		
1. Organization, Company, or Proprietor's Name (as it appears on Form W-9):		
2. Business Type (check appropriate box): <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Government <input type="checkbox"/> Other:		
3. Tax ID: Taxpayer ID Number (TIN) _____ OR Social Security Number (SSN) _____		
4. Address:		
5. City:	6. State:	7. Zip Code:
8. Mailing Address (if different from above):		
9. City:	10. State:	11. Zip Code:
12. Total Off-Road Fleet Horsepower for fleets subject to the Off-Road Regulation (check appropriate box): <input type="checkbox"/> 0-2,500 HP (Small) <input type="checkbox"/> 2,501-5,000 HP (Medium) <input type="checkbox"/> Over 5,000 HP (Large) <input type="checkbox"/> N/A, there are no vehicles in the fleet subject to CARB's In-Use Off-Road Diesel Vehicles Regulation		
13. Have you applied to any other grant programs for any vehicles in this project? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please contact ERIP Staff at (559) 230-5800 before completing this application.		
PRIMARY CONTACT INFORMATION		
14. First and Last Name:		15. Title:
16. Phone Number:		17. Fax Number:
18. Alternate Contact Number:		19. Email:
CONTRACT SIGNING AUTHORITY INFORMATION		
20. First and Last Name:		21. Title:

SECTION 2 – ACTIVITY INFORMATION (PLEASE PRINT OR TYPE)

1. Vehicle Address:		
2. City:	3. Zip Code:	4. Fleet ID #:
5. County of Operation (check all that apply): <input type="checkbox"/> Fresno <input type="checkbox"/> Kern (Valley Portion) <input type="checkbox"/> Kings <input type="checkbox"/> Madera <input type="checkbox"/> Merced <input type="checkbox"/> San Joaquin <input type="checkbox"/> Stanislaus <input type="checkbox"/> Tulare <input type="checkbox"/> Other, specify:		
6. Vehicle Type: <input type="checkbox"/> Agricultural <input type="checkbox"/> Construction <input type="checkbox"/> Dredging <input type="checkbox"/> Industrial <input type="checkbox"/> Logging <input type="checkbox"/> Other, specify:		
7. Vehicle Usage: (examples: scraper, dozer, back hoe, baler, combine, excavator, paver, roller, etc.)		
8. Annual Operation (in hours):		
9. Is the vehicle operated seasonally? <input type="checkbox"/> No <input type="checkbox"/> Yes, explain:	10. % Use in SJVAPCD:	11. % Use in CA:
12. Number of Vehicles in Fleet:		
13. Is this vehicle operational? <input type="checkbox"/> Yes <input type="checkbox"/> No, this vehicle is ineligible for funding		
14. When would this vehicle be available for operational inspection? Time(s): <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon Day(s): <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri		

SECTION 3 – EQUIPMENT INFORMATION (PLEASE PRINT OR TYPE)

CURRENT VEHICLE	
1. Vehicle Make:	2. Vehicle Model:
3. Vehicle Model Year:	4. Vehicle Identification Number (VIN):
5. Engine Make:	6. Engine Model:
7. Engine Model Year:	8. Horsepower Rating:
9. Engine Serial Number:	
10. US EPA Engine Family Name (if available):	
11. Engine Tier: <input type="checkbox"/> Uncontrolled, Tier 0 <input type="checkbox"/> Tier 1 <input type="checkbox"/> Tier 2	
12. Engine Type: <input type="checkbox"/> Compression-Ignition <input type="checkbox"/> Large Spark-Ignition (If engine is LSI, it is ineligible for funding)	

SECTION 3 CONTINUED – EQUIPMENT INFORMATION (PLEASE PRINT OR TYPE)

NEW ENGINE		
13. Engine Make:		
14. Engine Model:	15. Model Year:	
16. Horsepower Rating:		
17. Engine Type: <input type="checkbox"/> Compression-Ignition <input type="checkbox"/> Large Spark-Ignition		
18. Fuel Type: <input type="checkbox"/> Diesel <input type="checkbox"/> Other, list fuel type:		
19. US EPA Engine Family Name (if available):		
20. Engine Tier: <input type="checkbox"/> Tier 2 <input type="checkbox"/> Tier 3 <input type="checkbox"/> Interim Tier 4 <input type="checkbox"/> Tier 4 Final		
21. Total Cost of New Engine Including Installation (should match quote):		

SECTION 4 – DEALER/INSTALLER INFORMATION (PLEASE PRINT OR TYPE)

DEALER		
1. Engine Dealer Name:		
2. Address:		
3. City:	4. State:	5. Zip Code:
6. Contact Name:		
7. Phone Number:	8. Fax Number:	9. Email:
INSTALLER		
10. Engine Installer Name (if different from above):		
11. Address:		
12. City:	13. State:	14. Zip Code:
15. Contact Name:		
16. Phone Number:	17. Fax Number:	18. Email:

FOR INTERNAL USE ONLY

Project Life:	Functioning Hour Meter? <input type="checkbox"/> No <input type="checkbox"/> Yes
Serial Number of New Engine:	

THIRD PARTY INFORMATION

This section **must be completed** if any part of the application was filled out on your behalf, by a third party. Please sign and date.

1. Contact Name:	2. Title:
3. Business Name:	4. Phone Number:
5. Cost of Services (not eligible for funding reimbursement):	6. Source of Funds to Pay for Third Party Services:

I hereby certify that all information provided in this application and any attachments are true and correct to the best of my knowledge, and that SJVAPCD funds may not be utilized to compensate me for my services.

Third Party Signature

Date

CERTIFICATIONS

I have read the Eligibility Criteria and Application Guidelines and agree to adhere to its requirements and **all** the following terms and conditions by initialing each of the following sections:

Initial _____ The emission reductions obtained through this program are **not** required by any federal, state, or local regulation, memorandum of agreement/understanding (MOA/MOU) with a regulatory agency, settlement agreement, mitigation requirement, or other legal mandate.

Initial _____ Projects funded by SJVAPCD will **not** be used as marketable emission reduction credits, to offset any emission reduction obligation, or for credit under any federal or state emission averaging, banking and trading program.

Initial _____ Proposed project(s) has not received funding or is under agreement with any other air district, CARB, or any other public agency. Any current financial incentive that directly reduces the project cost; including tax credits or deductions, grants, or other public financial assistance for the same engine or equipment; must be disclosed to the District. The consequences of submitting multiple applications for the same engine or equipment, and non-disclosure of any current financial incentive include: disqualification of the engine/equipment from participation in the project, disqualification of the applicant from submitting any future applications for any funding, and/or discipline up to and including civil or criminal penalties.

Initial _____ The vehicle will be domiciled within the boundaries of the SJVAPCD.

Initial _____ At least seventy-five percent (75%) of the vehicle's annual hours of operation will be within California and fifty percent (50%) within SJVAPCD boundaries.

Initial _____ Comply with the reporting requirements and keep appropriate records through the full term of the agreement, as determined by the SJVAPCD and CARB.

Initial _____ I certify that I am currently in compliance with all federal, State, and local air quality rules and regulations and I am not aware of any outstanding or pending enforcement actions.

The maximum percent of repower costs eligible for funding are:

- a. Tier 2 Repower – 85 percent.
- b. Tier 3, Interim Tier 4, and Tier 4 Final Repower – 85 percent.

Initial _____ Maximum eligible incentive amounts are calculated up to the cost-effectiveness limit, and may not necessarily reflect the maximum percent of costs eligible for funding based on the total quoted price of the project. Additionally, eligible incentive amounts may be reduced after the claim for payment has been finalized, depending on all eligible items invoiced.

Initial _____ I hereby certify that all information provided in this application and any attachments are true and correct to the best of my knowledge.

Initial _____ I agree not to purchase or install the new engine prior to agreement execution.

Contract Signing Authority Signature

Date

FLEET INFORMATION CERTIFICATION FORM

SJVAPCD staff must review your current fleet information to ensure equipment funded in your project are surplus to the California Air Resource Board (CARB) current In-Use Off-Road Diesel Vehicles Regulation (Off-Road Regulation). This Form must be signed in **blue ink** by the contract signing authority as designated in the application and submitted with a copy of the Compliance Plan. **Only an original signed Form will be accepted.**

For fleets subject to the Off-Road Regulation:

Participant certifies that all fleet information submitted in the accompanying Compliance Plan is true and accurate, and currently reflects the participant's off-road fleet. Participant has submitted a Compliance Plan, using CARB's online fleet average calculator for SJVAPCD staff to review.

Participant's fleet is designated as the following fleet size, according to the applicability of equipment in the fleet as defined in the Off-Road Regulation (check one):

- Large Fleet** – Fleet with more than 5,000 horsepower or State or Federal Government fleet.
- Medium Fleet** – Fleet with 2,501-5,000 horsepower.
- Small Fleet** – Fleet with 2,500 horsepower or less, or municipal fleet in low population county.

For agricultural fleets exempt from the Off-Road Regulation:

- Participant certifies all the equipment submitted in the application operate **100%** of the time in agricultural activities as defined in the Off-Road Regulation.

Contract Signing Authority (Print Name)

Contract Signing Authority Signature

Date

Internal Use Only:
Project Number:

APPLICATION PACKET CHECKLIST

When submitting a project for consideration, submit a **complete** application packet. An incomplete application packet will lengthen the application processing time and delay possible incentive funding. A complete application packet includes the following items:

- Completed **Application**, all eight (8) pages. All fields are required unless otherwise indicated. Any field that is left blank may result in an incomplete application, delaying the application process until the missing information is obtained or submitted.
- Completed **Certifications** section, page five (5), initialed and signed
- First page of IRS Request for Taxpayer Identification Number and Certification Form W-9 (**Form W-9**).
 - ❖ The information entered into Section 1 of the application must be **identical** to the information on the Form W-9, as this information will be used to generate all binding documents and be used to report incentive funding to the IRS.
 - ❖ A copy of the IRS Form W-9 can be downloaded at www.irs.gov or by calling 1-800-829-3676.
 - ❖ If your business is a Limited Liability Company (LLC), please follow the instructions found on the Form W-9.
- Copy of the entire applicable **CARB Executive Order (EO)**, including applicable attachments, for the new reduced-emission engine.
- You may request an EO from your engine dealer, or obtain an EO online on CARB's website for off-road engines at, <http://www.arb.ca.gov/msprog/offroad/cert/cert.php>.
- Dated and itemized dealer **quote** for the new reduced-emission engine. The quote must, at a minimum, include the following:
 - ❖ The applicant/organization name and address. (Must match the information in Section 1 of this application)
 - ❖ The engine dealer name and address.
 - ❖ The CARB certified engine make, model, horsepower and EPA-Certified Engine Family Name.
 - ❖ A complete and detailed breakdown of all material costs: new engine, core charge, hardware, installation labor (including the total estimated labor hours and labor rate per hour for the project), and the sales tax with the percentage rate indicated. Please list all additional equipment and materials separately in a line item format.
- If a third party filled out any part of the application on your behalf, the **Third Party Information** section must be completely filled out and signed.
- If applicable, an **Engine Manufacturer Letter**, stating the reason(s) and verifying that a particular piece of equipment cannot accommodate an engine meeting current standards without major modifications, safety risks, or exorbitant cost.
 - ❖ The letter must include information on the equipment being repowered, the engine being replaced, the reason why an engine meeting the currently applicable standard cannot be used (including supporting documentation), and the proposed Tier 2/Tier3 replacement engine.

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- For fleet owners subject to the current statewide In-Use Off-Road Diesel Vehicles Regulation, you must submit a copy of your **Compliance Plan** to meet the Regulation. Detailed information regarding the Regulation can be found at CARB's website, <http://www.arb.ca.gov/msprog/ordiesel/ordiesel.htm>. Please visit CARB's website to determine the applicability of any of your vehicles.
 - ❖ If there are no vehicles in your fleet subject to the Regulation, you do not need to provide the District a Compliance Plan.
 - ❖ Fleet owners subject to the Regulation must use the online fleet average calculator at <http://arb.ca.gov/msprog/ordiesel/documents/documents.htm> to determine their fleets' compliance status and submit the information to the District as their Compliance Plan to the Regulation.
 - Completed and signed **Fleet Information Certification Form**, page six (6), certifying fleet information submitted is accurate and correct.
 - For applicants who are municipalities, a copy of the **Board Resolution** which approves participation in the District's incentive program must be submitted.

Please retain a full copy of the completed application for your own records.

For additional assistance, please contact staff in the Emission Reduction Incentive Program at (559) 230-5800.