

Placer County APCD Off-Road Equipment Repower & Retrofit Application

INSTRUCTIONS AND ELIGIBILITY CRITERIA

Please print clearly or type all information on the application (pages 3-8) and submit to:

***Placer County Air Pollution Control District
110 Maple St.
Auburn, CA 95603***

Fill out one (1) application for each engine and piece of equipment. The 2017 Carl Moyer Program (CMP) Guidelines are available on the District's website at www.placerair.org or at California Air Resources Board (ARB)'s website at <http://www.arb.ca.gov/msprog/moyer/guidelines/current.htm>. Please note that additional information may be requested from the applicant in order to process this application.

General Eligibility Criteria

To be eligible for funding, projects must meet the criteria described in the 2017 CMP Guidelines and all current CMP Advisories. These criteria include, but are not limited to, the following:

- Emission reductions obtained through CMP projects must not be required by any federal, State or local regulation, memorandum of agreement/understanding with a regulatory agency, settlement agreement, mitigation requirement or other legal mandate.
- Projects must meet a cost-effectiveness established by the District and calculated in accordance with the cost-effectiveness methodology in the 2017 CMP Guidelines. All State funds plus any other funds under a district's budget authority or fiduciary control contributed toward a project must be included in the cost-effectiveness calculation.
- No emission reductions generated by the CMP shall be used as marketable Emission Reduction Credits, or to offset any emission reduction obligation of any person or entity.
- No project funded by the CMP shall be used for credit under any federal or State emission averaging banking and trading program.
- Projects must operate at least 75% of their total activity in Placer County.
- Emission reduction technologies must be certified/verified by ARB and must comply with durability and warranty requirements. For the purposes of the CMP, a technology granted conditional certification/verification by ARB is considered certified/verified.

Off-Road Equipment Eligibility Criteria

- ARB has adopted the regulation *In-Use Off-Road Diesel-Fueled Fleets* (Off-Road Regulation), which affects off-road Compression Ignition (CI) equipment. Portable engines are regulated under the Portable Airborne Toxic Control Measure (ATCM). There are limited funding opportunities for equipment subject to these rules.
- For portable/stationary agriculture projects, only tier 3 engines are eligible to be repowered.
- Existing engines must be greater than 25 horsepower (hp) (19 kilowatts). If actual engine hp cannot be determined, hp can be estimated by the following:
 - $\text{Engine hp} = \text{Power Take-Off} \times 120\%$
- New engines/motor repower projects must be within 150% of the hp of the existing engine.
- The owner must be in compliance with federal, State, and local regulations.
- The only forklifts eligible for funding under this application are Class 7 diesel forklifts.

- For fleets subject to the Off-Road Regulation, applicants must submit the Diesel Off-Road Reporting System (DOORS) Identification Number (ID), DOORS fleet compliance certificate, and Engine Identification Number (EIN) of the equipment in the application. See 2017 CMP Guidelines Chapter 5(E).

Summary of Off-Road Equipment Funding Opportunities

Engine Type	Subject to ARB Fleet Rule?	CMP Funding Opportunities
Mobile agricultural equipment	No	Engine repowers and retrofits.
Cargo handling equipment at ports/intermodal rail yards	Cargo Handling Equipment Regulation ²	Limited opportunities. ¹
All other equipment (e.g. construction, mining, rental, airport ground support and other industries)	Off-Road Regulation ³	Small fleets: Opportunities exist through 12/31/2025, after which the fleet must show 100% compliance with the regulation. Medium fleets: Opportunities exist through 12/31/2019, after which the fleet must show 100% compliance with the regulation. Large fleets: Are eligible for funding once after 1/1/17, after which only zero-emission projects are eligible.
Portable diesel engines	Portable Diesel ATCM ⁴	Limited opportunities exist ahead of the fleet average requirements. ¹

1. Limited opportunities means a fleet's compliance status with the ARB regulation must be determined. Contact District CMP staff or consult fleet rule CMP Implementation Charts at: <http://www.arb.ca.gov/msprog/moyer/guidelines/supplemental-docs.htm> in addition to these guidelines.
2. Regulation for Mobile Cargo Handling Equipment at Ports and Intermodal Rail Yards: <http://www.arb.ca.gov/ports/cargo/cargo.htm>
3. Regulation for In-Use Off-Road Diesel-Fueled Fleets: <http://www.arb.ca.gov/msprog/ordiesel/ordiesel.htm>
4. Regulation for Portable Engine ATCM: <http://www.arb.ca.gov/diesel/peatcm/peatm.htm>

Additional criteria may be found in the 2017 CMP Guidelines Chapter 5: Off-Road CI Equipment

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REQUIRED ATTACHMENTS TO APPLICATION

Check each applicable box below to indicate inclusion.

- Completed application
- 24 months of complete historical usage (in hours)
- Proof of Liability Insurance
- Co-funding Information (if applicable)
- Itemized quote for new engine/retrofit
- Executive order for new engine/retrofit
- Other _____

Applicant (Organization/Company/Individual Name): _____

Business Type: _____

Mailing Address/Street: _____

City/State/Zip Code: _____

Contact Name: _____

Phone: _____ Fax: _____

E-Mail: _____

Person with contract signing authority (if different than above): _____

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Funding Disclosure

Have any engines or vehicles listed in this application applied for or have been awarded Carl Moyer Program funding, or any other incentive funding?

- Yes
- No

If "Yes," complete the following for each engine or vehicle:

Agency applied to: _____

Date and number of Agency Solicitation: _____

Funding Amount Requested or Awarded: _____

Equipment Identification: _____

Old Engine Serial Number: _____

Status of Funding: _____

Please list any other financial incentive, including tax credits or deductions, grants, or other public financial assistance for the vehicle/engine:

Third Party Certification

I have completed the application, in whole or in part, on behalf of the applicant.

Print Name of Third Party: _____ Title: _____

Signature of Third Party: _____ Date: _____

Amount Paid to Third Party: _____

Source of Funding to Third Party: _____

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Disclosure Statement

As an applicant/participant of the Carl Moyer Program, I declare that _____
(Company Name)

1. Is in compliance with, and
2. Will remain in compliance with, and
3. Does not have any outstanding/unresolved/unpaid Notices of Noncompliance (NON) or citations for violations of

Any federal, State, and local air quality regulations including, but not limited to, the following:

Cargo Handling Equipment Regulation	Public Agency and Utility Rule
Commercial Harbor Craft Regulation	Sleeper Berth Truck Idling Regulation
Drayage Truck Regulation (including dray-off trucks)	Solid Waste Collection Vehicle Regulation
In-Use Off-Road Diesel Vehicle Regulation	Stationary Engine Airborne Toxic Control Measures
Marine Shore Power Regulation	Statewide Truck and Bus Regulation
Portable Diesel Airborne Toxic Control Measure	Transit Fleet Rule

By signing below and submitting this application, I understand and acknowledge grant requirements and I hereby certify under penalty of perjury that the information in the application and attachments is accurate and true.

Authorized Signature: _____ Date: _____

Authorized Representative's Name (Print): _____

Authorized Representative's Title: _____

Legal Owner's Name: _____

Company Name: _____

Mailing Address: _____

City/State/Zip: _____

Physical Address of Equipment (if different than mailing address): _____

Phone: _____ E-Mail: _____

Fact sheets and additional information on the Regulations are available at <http://www.arb.ca.gov/permits.htm> or by calling ARB's diesel hotline at 866-6DIESEL (866-634-3735).

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Project Information

1. Project Name: _____
2. Total Project cost: _____
3. Funding Amount Requested: _____
4. Percentage of operation in California: _____
5. Percent of operation in Placer County: _____
6. Project Type (select one):
 - Repower of existing equipment
 - Retrofit purchase
 - Repower and retrofit
7. DOORS ID*: _____ DOORS EIN of the existing equipment*: _____
8. Total hp of fleet as reported in DOORS*: _____
9. Date fleet is compliant through (as identified in DOORS)*: _____

*Applicants are not required to submit DOORS and compliance information on exempt equipment or fleets.

Check the following if they apply to your fleet or equipment:

- Fleet is exempt from the Off-road regulation
 - Existing equipment in this application is exempt from the Off-road regulation
10. If your off-road fleet is a large fleet, have you applied for and received Moyer Program funds for your fleet since January 1, 2017? yes no

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Existing Equipment Information

1. Equipment Type/Function: _____
2. Equipment Make: _____ 3. Equipment Model: _____
4. Equipment Serial Number: _____ 5. Model Year: _____
6. Number of Engines on Equipment: _____
7. Equipment Location: _____
8. Engine Manufacturer: _____ 9. Engine Model: _____
10. Engine Serial #: _____ 11. Engine Model Year: _____
12. Manufacturer's Maximum Rated Brake hp Rating: _____
13. Fuel Type: _____
14. Hours of Operation (Hours/Year): _____
15. U.S. Environmental Protection Agency (EPA) or ARB Standardized Engine Family Name and Tier: _____
16. District Engine Registration Number (if applicable): _____

Replacement Engine Information

1. Engine Manufacturer: _____ 2. Engine Model: _____
3. Engine Serial #: _____ 4. Engine Model Year: _____
5. Manufacturer's Maximum Rated Brake Hp Rating: _____
6. Fuel Type: _____
7. EPA or ARB Standardized Engine Family Name and Tier:

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Information about the Engine Installer

1. Engine Installer: _____
2. Street Address: _____
3. City/State/Zip: _____
4. Contact Name: _____
5. Phone: _____ 6. Fax: _____

Information about the Engine Retrofit (if applicable)

1. ARB-verified Retrofit Device Manufacturer: _____
2. Retrofit Device Make/Model: _____
3. Retrofit Device ARB Executive Order Number: _____
4. Retrofit Device Serial # (if available): _____
5. ARB-Verified PM Reduction (%): _____
6. ARB-Verified NOx Reduction (%): _____
7. Cost of Retrofit: _____ 8. Cost of Installation (optional): _____
8. Cost of Retrofit Maintenance for Project Life (optional): _____

Additional Information for Reference

Maximum Project Life*		
Type	Project Life	
Repower only (no retrofit)	7 years	
Farm Equipment (all projects)	10 years	
Replacement and repower to zero-emission	10 years	
Retrofit only	5 years	
Replacement	Excavators Skid steer loaders Rough terrain forklifts	3 years
	All other non-farm (existing diesel only)	5 years
	All other non-farm (existing LSI only)	3 years

* These terms are a maximum and are equal to the operational term under the grant contract and may be shortened due to reasons such as regulatory compliance requirements.

Maximum Eligible Funding Amounts**	
Project	Maximum Percentage Eligible
Diesel Repower	85%
LSI Repower	85%
Repower to zero-emission	85%
Mobile Equipment Replacement	80%
Portable Equipment Replacement (excludes stationary)	80%
Retrofit	100%

** Funding amounts are based on either a project's cost effectiveness or percent of maximum funding, whichever is less. Limited funds may also impact maximum funding amounts.