



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:
 - Engine hp = Power Take-Off x 120%
- New engines/motor repower projects must be within 125% of the hp of the existing engine.
- The owner must be in compliance with federal, State, and local regulations. Use the table below to determine if the existing engine is eligible for funding.
- The only forklifts eligible for funding under this application are Class 7 diesel forklifts.

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 are no longer eligible to apply. 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

- 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

- “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.
- Regulation for Mobile Cargo Handling Equipment at Ports and Intermodal Rail Yards: <http://www.arb.ca.gov/ports/cargo/cargo.htm>
- Regulation for In-Use Off-Road Diesel-Fueled Fleets: <http://www.arb.ca.gov/msprog/ordiesel/ordiesel.htm>
- 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
- Proof of equipment ownership (Select one: bill of sale, tax logs, equipment insurance records, bank appraisal of equipment, maintenance/service records tied to equipment, general ledgers)
- 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 old (if applicable) and new engine/retrofit
- IRS Form W-9 (for the entity that will sign the grant contract and receive funds, if awarded)
- IRS Form 590
- DOORS fleet compliance certificate (if applicable)
- Other _____

Applicant (Organization/Company/Individual Name): _____

Self-Insured? Yes No

Business Type: _____

Mailing Address/Street: _____

City/State/Zip Code: _____

Contact Name: _____

Phone: _____ Fax: _____

Email: _____

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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Compliance Disclosure Statement

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

is in compliance with, will remain in compliance with, and 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
- Commercial Harbor Craft Regulation
- Drayage Truck Regulation (including dray-off trucks)
- In-Use Off-Road Diesel Vehicle Regulation
- Marine Shore Power Regulation
- Portable Diesel Airborne Toxic Control Measure
- Public Agency and Utility Rule
- Sleeper Berth Truck Idling Regulation
- Solid Waste Collection Vehicle Regulation
- Stationary Engine Airborne Toxic Control Measure
- Statewide Truck and Bus Regulation
- 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: _____ Email: _____

Fact sheets and additional information on the Regulations are available at <https://www.arb.ca.gov/permits/permits.htm> or by calling ARB's diesel hotline at 866-634-6DIESEL (866-634-3735). To obtain these documents in an alternative format or language, please call (866) 634-3735.

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Project Information

1. Project Name: _____
2. Funding Requested: _____
3. Total Project cost: _____
4. Percent of operation in California: _____
5. Annual hours of operation in Placer County: _____
6. Total annual hours of operation: _____
7. Project Type (select one):
 - Repower of existing equipment
 - Retrofit purchase
 - Repower and retrofit
8. Method of equipment purchase (please note, the grant is designed as a reimbursement):
 - Purchase in full
 - Use of short-term financing (PO account, Net 30 terms, etc.)
 - Use of long-term financing (the grant amount must immediately go towards principal)
9. DOORS ID*: _____
10. DOORS EIN of the existing equipment*: _____
11. Total horsepower of fleet as reported in DOORS _____
12. 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 as 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
13. 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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Project Information (cont.)

14. Is the equipment (*circle one: registered, domiciled, or operated a majority of the time*) (check all that apply):

- Within the boundaries of a disadvantaged community census tract, as defined by SB 535?
- Within the boundaries of a low-income community census tract, as defined by AB 1550?
- Outside of a disadvantaged community, but within ½-mile of a SB 535 disadvantaged community and within an AB 1550 low-income community census tract?
- Within the boundaries of a low-income household?
- N/A

Census tract used for above determination: _____

Note: An online mapping tool of identified disadvantaged communities and low-income communities, and a “look-up” tool list of “low-income” thresholds by county and household size are available at: <https://www.arb.ca.gov/cc-communityinvestments>.

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 Family (for controlled engines): _____
9. Engine Make: _____
10. Engine Model: _____
11. Engine Serial #: _____
12. Engine Model Year: _____
13. Manufacturer’s Maximum Rated Brake Hp Rating: _____
14. Fuel Type: _____
15. District Engine Registration Number (if applicable): _____

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Replacement Engine Information

1. Engine Make: _____
2. Engine Model: _____
3. Engine Serial Number (if available): _____
4. Engine Model Year: _____
5. Advertised Engine horsepower (must be within 125% of the existing engine hp): _____

6. Fuel Type: _____
7. Engine Family: _____
8. Engine Tier: _____

Engine Installer Information

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

Retrofit Information (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): _____
9. Cost of Retrofit Maintenance for Project Life (optional): _____