



## Off-Road Equipment Repower & Retrofit Application

### INSTRUCTIONS AND ELIGIBILITY CRITERIA

Please print clearly or type all information on the application and submit to the  
Placer County Air Pollution Control District:

By mail or in-person

110 Maple Street  
Auburn, CA 95603

OR

By email

incentives@placer.ca.gov

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](http://www.placerair.org) or at the California Air Resources Board (CARB)'s website at <http://www.arb.ca.gov/msprog/moyer/guidelines/current.htm>. Please note that additional information may be requested to process this application.

### GENERAL ELIGIBILITY CRITERIA

Projects must meet the criteria described in the most recent CMP Guidelines and Advisories. These criteria include, but are not limited to, the following:

- Projects must operate at least 75% of their total activity in Placer County.
- 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.
- Emission reduction technologies must be certified/verified by CARB and must comply with durability and warranty requirements. For the purposes of the CMP, a technology granted conditional certification/verification by CARB is considered certified/verified.

### OFF-ROAD EQUIPMENT ELIGIBILITY CRITERIA

- CARB 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.
- The only forklifts eligible for funding under this application are Class 7 diesel forklifts.
- Existing engines must be greater than 25 horsepower (19 kilowatts). If actual engine horsepower cannot be determined, hp can be estimated by the following:
  - Engine horsepower = Power Take-Off x 120%
- New engines/motor repower projects must be within 125% of the hp of the existing engine.
- 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.
- 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.

**Summary of Off-Road Equipment Funding Opportunities**

Engine Type	Subject to CARB 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 <sup>1</sup>	Limited opportunities. <sup>2</sup>
All other equipment (e.g., construction, mining, rental, airport ground support and other industries)	Off-Road Regulation <sup>3</sup>	Small fleets: Opportunities exist through 12/31/2025, after which the fleet must show 100% compliance with the regulation.  Large and medium fleets are no longer eligible to apply.
Portable diesel engines	Portable Diesel ATCM <sup>4</sup>	Limited opportunities exist ahead of the fleet average requirements.

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

<sup>1</sup> Regulation for Mobile Cargo Handling Equipment at Ports and Intermodal Rail Yards: <http://www.arb.ca.gov/ports/cargo/cargo.htm>

<sup>2</sup> “Limited opportunities” means a fleet’s compliance status with the ARB regulation must be determined. Contact District CMP staff or consult CARB staff at (866) 634-3735 or 8666DIESEL@arb.ca.gov in addition to these guidelines.

<sup>3</sup> Regulation for In-Use Off-Road Diesel-Fueled Fleets: <https://ww2.arb.ca.gov/our-work/programs/use-road-diesel-fueled-fleets-regulation>

<sup>4</sup> Regulation for Portable Engine ATCM: <https://ww2.arb.ca.gov/resources/documents/perp-regulation-and-portable-engine-atcm>

Clean Air Grant Program  
**OFF-ROAD EQUIPMENT REPOWER & RETROFIT APPLICATION**  
Placer County Air Pollution Control District

This application is to be used for incentive funds for off-road equipment repower and/or retrofit. Additional information may be requested during the review process if needed. The applicant acknowledges that award of cash incentive is not guaranteed, and is conditional upon approval by the District and meeting the minimum eligibility criteria.

**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 \_\_\_\_\_

Clean Air Grant Program  
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## A. Applicant Information

1. Applicant (Organization/Company/Individual Name): \_\_\_\_\_  
\_\_\_\_\_
2. Self-Insured?      Yes      No
3. Business Type: \_\_\_\_\_
4. Mailing Address/Street: \_\_\_\_\_
5. Mailing City/State/Zip Code: \_\_\_\_\_
6. Physical Address of Equipment (if different than mailing address): \_\_\_\_\_  
\_\_\_\_\_
7. Contact Name: \_\_\_\_\_
8. Phone: \_\_\_\_\_
9. Fax: \_\_\_\_\_
10. Email: \_\_\_\_\_
11. Person with contract signing authority (if different than above): \_\_\_\_\_  
\_\_\_\_\_
12. How did you hear about this program?
  - Family/Friends
  - Newspaper (Lincoln News Messenger, Roseville Press Tribune, Other: (\_\_\_\_\_))
  - Flyer
  - Website Announcement
  - Ag Alert Newsletter
  - Other: \_\_\_\_\_

## B. Funding Disclosure

1. Have any engines or vehicles listed in this application applied for or been awarded Carl Moyer Program funding, or any other incentive funding?  
 Yes  
 No
2. If "Yes," complete the following for each engine or vehicle:
  - 2.1. Name of Agency that was applied to: \_\_\_\_\_
  - 2.2. Date of Agency Solicitation: \_\_\_\_\_
  - 2.3. Funding Amount Requested: \_\_\_\_\_
  - 2.4. Funding Amount Awarded: \_\_\_\_\_
  - 2.5. Equipment Serial Number: \_\_\_\_\_
  - 2.6. Old Engine Serial Number: \_\_\_\_\_
  - 2.7. Status of Funding (pending, declined, awarded): \_\_\_\_\_
3. Please list any other financial incentive, including tax credits or deductions, grants, or other public financial assistance received for the vehicle/engine: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## C. Third Party Certification

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

1. Print Name of Third Party: \_\_\_\_\_
2. Title of Third Party: \_\_\_\_\_
3. Signature of Third Party: \_\_\_\_\_
4. Date: \_\_\_\_\_
5. Amount Paid to Third Party (if any): \_\_\_\_\_
6. Source of Funding to Third Party (if any): \_\_\_\_\_

## D. Compliance Disclosure Statement

1. 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.**

2. Authorized Signature: \_\_\_\_\_
3. Date: \_\_\_\_\_
4. Authorized Representative's Name (Print): \_\_\_\_\_
5. Authorized Representative's Title: \_\_\_\_\_
6. Legal Owner's Name: \_\_\_\_\_
7. Phone: \_\_\_\_\_
8. Email: \_\_\_\_\_

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

## E. Project Information

1. Project Name: \_\_\_\_\_
2. Funding Requested: \_\_\_\_\_
3. Total Project Cost: \_\_\_\_\_
4. Annual hours of operation (hrs/yr): \_\_\_\_\_
5. Percent of operation in California: \_\_\_\_\_
6. Percent of operation in Placer County: \_\_\_\_\_

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. 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

9.1. Census tract used for above determination: \_\_\_\_\_

*Note: An online mapping tool of identified disadvantaged communities and low-income communities is available at: <https://webmaps.arb.ca.gov/PriorityPopulations/>.*

### DOORS NON-EXEMPT FLEETS

10. DOORS ID: \_\_\_\_\_
11. DOORS EIN of the existing equipment: \_\_\_\_\_
12. Total horsepower of fleet as reported in DOORS: \_\_\_\_\_
13. Date fleet is compliant through (as identified in DOORS): \_\_\_\_\_

### DOORS-EXEMPT FLEETS

14. 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

## F. Existing Equipment Information

### *EQUIPMENT INFORMATION*

1. Equipment Type/Function: \_\_\_\_\_
2. Equipment Make: \_\_\_\_\_
3. Equipment Model: \_\_\_\_\_
4. Equipment Serial Number: \_\_\_\_\_
5. Model Year: \_\_\_\_\_

### *ENGINE INFORMATION*

6. Number of Engines on Equipment: \_\_\_\_\_
7. Engine Family (for controlled engines): \_\_\_\_\_
8. Engine Make: \_\_\_\_\_
9. Engine Model: \_\_\_\_\_
10. Engine Serial #: \_\_\_\_\_
11. Engine Model Year: \_\_\_\_\_
12. Manufacturer's Maximum Rated Brake Horsepower Rating: \_\_\_\_\_
13. Fuel Type: \_\_\_\_\_
14. District Engine Registration Number (if applicable): \_\_\_\_\_



## G. Replacement Engine Information

1. Engine Make: \_\_\_\_\_
2. Engine Model: \_\_\_\_\_
3. Engine Serial Number (if available): \_\_\_\_\_
4. Engine Model Year: \_\_\_\_\_
5. Engine horsepower (may not be more than a 25% increase from existing engine hp): \_\_\_\_\_  
\_\_\_\_\_
6. Fuel Type: \_\_\_\_\_
7. Engine Family: \_\_\_\_\_
8. Engine Tier: \_\_\_\_\_

## H. Engine Installer Information

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

## I. Retrofit Information (if applicable)

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