



On-Road Fleet Modernization PROGRAM ELIGIBILITY

For more information
please contact the APCD at
805-781-5912

1. Funding Amounts and Limitations:

- Grant-funded projects must be completed 2 or 3 years (depending on fleet size) in advance of emission-reduction requirements of the ARB Truck and Bus Regulation.
- The maximum funding amount is based on the certified NOx emission levels of the new engine according to the following table:

	NOx	Maximum Eligible Funding Amount	Equivalent Emissions Model Year
HEAVY HEAVY-DUTY OVER 33,000 LBS GVWR	0.20 g/bhp-hr	\$60,000	2010 - newer
	0.50 g/bhp-hr	\$50,000	2009 - newer
	1.20 g/bhp-hr	\$40,000	2007 - 2009
MEDIUM HEAVY-DUTY 19,501 – 33,000 LBS GVWR	0.20 g/bhp-hr	\$40,000	2010 - newer
	0.50 g/bhp-hr	\$30,000	2009 - newer
	1.20 g/bhp-hr	\$25,000	2007 - 2009

- Award amount shall not exceed 65% of the eligible project expenses, and is subject to the cost-effectiveness limit and a maximum of \$150,000 per applicant per calendar year, based on the date the application is received by the APCD.

2. Existing Vehicle Requirements:

- Old truck must have engine of model year 2002 or older.
- Old truck must be a heavy heavy-duty (HHD) or medium heavy-duty (MHD) vehicle registered in California for the previous 2 years, with Gross Vehicle Weight Rating of greater than 19,500 lbs.
- Old truck must be owned by a company with a physical address in SLO County, in operational condition and in regular use.
- Old truck must be destroyed at an approved salvage yard, unless APCD approves an alternative disposal method that ensures emission reductions.
- Old truck must be part of small fleet of 10 or fewer trucks under common ownership and control.

3. Replacement Vehicle Requirements:

- Must have a 2007 or newer model year engine certified to a FEL or STD level of 1.20 g/bhp-hr NOx and 0.01 g/bhp-hr PM, or cleaner.
- Must operate in a manner consistent with historic usage for the life of the Grant Agreement.
- Must have the same axle and body configuration, and weight rating as the old truck.
- Replacement engine hp may not be greater than 125% of original rated hp of the old engine.
- Used replacement truck must have less than 500,000 miles (HHD) or 250,000 miles (MHD).
- Replacement truck shall not operate as a drayage truck (access a port or intermodal rail yard or move unbroken shipments of containers or trailers to or originating from these locations) for the life of the Grant Agreement.
- Replacement trucks must be purchased from a pre-approved participating dealer. See current list at: www.slocleanair.org/programs/moyer.php.

For more information regarding On-Road Fleet Modernization grants contact Andy Mutziger:
805-781-5956 or amutziger@co.slo.ca.us.

This information is a summary. The full program requirements are available from the California Air Resources Board (ARB) at www.arb.ca.gov/msprog/moyer/guidelines/current.htm.





Clean Up & Cash In



On-Road Fleet Modernization APPLICATION CHECKLIST

Applicant Information	Dealer Information
Company name:	Dealership company:
Contact name:	Dealer rep:
Phone:	Phone:
Fax:	Fax:
E-mail:	E-mail:
<i>Option: Attach business card</i>	<i>Option: Attach business card</i>

✓	Application Requirements
<input type="checkbox"/>	Completed Application: Complete and submit this checklist and ALL application pages, sign and date in ink.
<input type="checkbox"/>	<p>Participating Dealer Quote & Supporting Documents for Replacement Truck: Replacement vehicles must be purchased from a pre-approved participating dealer.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Quote for the new truck, itemizing all standard equipment and options, including tax and shipping costs. <input type="checkbox"/> Manufacturer's specification sheet for replacement engine and truck, with drawing or image showing truck body style and dimensions. <input type="checkbox"/> Copy of ARB Emissions Executive Order for new engine. <input type="checkbox"/> Documentation of warranty with minimum coverage of one year or 100,000 miles, parts and labor, on engine and drive train. Warranty costs are not eligible for grant funding.
<input type="checkbox"/>	<p>Applicant's Business Structure: Provide one of the following, depending on the structure of your business:</p> <ul style="list-style-type: none"> • Articles of Incorporation and specific documentation identifying the officers for the corporation • Partnership agreement • Sole proprietors provide a signed W9 form and a copy of a photo ID. • Other business structure documentation not listed above.
<input type="checkbox"/>	<p>Signature Delegation Letter: If the owner, partner or corporate officer will not be signing the contract, then they must provide a letter naming and authorizing another individual to sign the grant contract and other documents on behalf of the business.</p>
<input type="checkbox"/>	<p>Authorized Representative Letter: If the owner, partner or corporate officer will not be picking up the new vehicle, then they must provide a letter naming and authorizing another individual to pick up the new vehicle and sign documents on behalf of the business. This may be done on the same letter as the Signature Delegation.</p>
<input type="checkbox"/>	<p>W-9 Form: Complete and submit IRS form W-9. APCD will issue form 1099 as required by law.</p>
<input type="checkbox"/>	<p>Vehicle Title: Copy of current Vehicle Title showing applicant's ownership, with no lienholders and no leases.</p>
<input type="checkbox"/>	<p>Vehicle Registration: Copy of DMV Vehicle Registration for last two years:</p> <p><input type="checkbox"/> Current & <input type="checkbox"/> Prior Year</p> <p>If registration does not fully cover past 24 months, call APCD to determine eligibility.</p>



<input type="checkbox"/>	Motor Carrier Permit: Copy of California Motor Carrier Permit for last two years. <input type="checkbox"/> Current & <input type="checkbox"/> Prior Year
<input type="checkbox"/>	Operational Condition Documentation: Copy of latest CHP Biennial Inspection of Terminals (BIT) (Form 343 or equivalent) and latest CHP 90 Day Inspection (Form 108), demonstrating that truck is in operational condition. Additionally, owner must sign an Acknowledgement of Vehicle Condition Form upon APCD's pre-inspection of the truck.
<input type="checkbox"/>	Documentation of Mileage in California: For the past 2 years, as specified on page 6 of this application <input type="checkbox"/> 1 st - Most recent 12 month period & <input type="checkbox"/> 2 nd - Preceding 12 month period
<input type="checkbox"/>	Proof of Vehicle Liability Insurance: Copy of insurance card for the last two years: <input type="checkbox"/> Current & <input type="checkbox"/> Prior Year
<input type="checkbox"/>	Certificates of Insurance: Provide current certificates of insurance with your application as evidence of coverage for General Liability and Worker's Compensation*. * If the Applicant is exempt from the requirement of maintaining workers compensation insurance, provide evidence of such exemption.
<input type="checkbox"/>	Applications completed by someone other than Applicant: If compensated for completing the application on the owner's/company's behalf, then attach details on the source of payment and the amount paid.

	Additional Application Requirements, if your project is awarded funding
<input type="checkbox"/>	Certificates of Insurance: Funded projects will be required to provide certificates of insurance endorsing the APCD as additionally insured for this project for General Liability, Vehicle Liability and Vehicle Comprehensive and Collision Insurance that covers the replacement cost of the new truck. When these policies, as well as your Worker's Compensation policy are renewed or changed, updated certificates must be submitted to the APCD until the Grant Agreement expires.
<input type="checkbox"/>	ARB Compliance Check: Before your project is awarded funding, all vehicles in your fleet must be checked against the ARB database for compliance with air quality rules and regulations.
<input type="checkbox"/>	Fleet Re-flash: Before your project is awarded funding, you must provide proof that all trucks in the fleet that are eligible to have low NOx software installed have been re-flashed prior to funding.
<input type="checkbox"/>	Financing Documentation: If the grantee obtains financing to assist in the purchase of replacement truck, full documentation of financing must be provided to the APCD at the truck replacement transaction. No more than the grantee's share of the cost of the truck may be financed.
<input type="checkbox"/>	APCD as Lien Holder: If your project is awarded funding, the APCD will be registered on the vehicle title as a lien holder (in second position behind your finance company, if applicable) for the life of the project. Some lenders may require a Memorandum of Understanding with the APCD to be co-lien holders. Please check with your lender to see what their requirements are.

Loan Assistance: Loan assistance may be available through the California Capital Access Program (CalCAP). Contact your lender for eligibility requirements and to see if they participate in CalCAP. Additional information on CalCAP loans is available from the ARB at: www.arb.ca.gov/ba/loan/on-road/on-road.htm or at 866-6-DIESEL, and from the California Pollution Control Financing Authority at: www.treasurer.ca.gov/cpcfca/calcap.asp For a list of participating lenders, see: www.treasurer.ca.gov/cpcfca/calcap/institutions.pdf



MOYER



On-Road Fleet Modernization APPLICATION FORM

Please print clearly or type all information on this application.

APPLICANT INFORMATION

Company name		Mailing address			
Contact person		City		State	
Title		Zip code		County	
Phone number		<i>Fill in physical address below if different from mailing address</i>			
Fax number		Physical address			
E-mail address		City		State	
Cell number		Zip code		County	
Authorized representative who will sign the Grant Agreement					
Name:		Title:			

Contact person who filled out this application (if different from above)

Name		Address			
Company		City		State	
Phone		Zip code			
Fax		E-mail			
Signature:		Date:			

TRUCK INFORMATION

Truck's Main Physical Location

GPS UTM coordinates <i>OR</i> Address, City, State, and Zip Code (No PO Boxes)	
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Existing Truck Information

Make:	Model:	Model year:	GVWR*:
Vehicle identification number:	Fleet identification number:	License plate:	Odometer reading:
Truck body type: <input type="checkbox"/> Tractor <input type="checkbox"/> Other (please describe):		Axle count: <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> Other _____	

*Please provide the manufacturer's Gross Vehicle Weight Rating, found on a tag on the door frame or in the cab. **This weight rating often differs from what is found on the registration.**

Existing Engine Information

Make:	Model:	Model year (must be 2002 or older):	Serial number:	HP:	Hour meter reading:
Fuel type:	Engine family number:				
Engine currently in daily operation? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, explanation is required):					

New or Replacement Truck Information

Make:	Model:	Model year:	GVWR*:
VIN (if available):	Fleet identification number:	License plate:	Odometer reading:
This vehicle is (check one): <input type="checkbox"/> New <input type="checkbox"/> Used		Axle count: <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> Other _____	

New Engine Information

Make:	Model:	Model yr:	Serial number (if available):	HP:	Hour meter reading:
Fuel type:	Engine family number:				

ACTIVITY INFORMATION

Vocation(s) Please describe this truck's uses:

<input type="checkbox"/> Haul truck	<input type="checkbox"/> Agricultural	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining
<input type="checkbox"/> Forestry	<input type="checkbox"/> Public / Municipal	<input type="checkbox"/> School bus	<input type="checkbox"/> Other _____
<p>Has this truck operated as a drayage truck (accessed a port or intermodal rail yard or moved unbroken shipments of containers or trailers to or originating from these locations) at any time in the last 2 years?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Note: the replacement truck will be prohibited from operating as a drayage truck for the duration of the project life.</p>			



Annual Average Usage Over Last 2 Years for This Truck

Average annual total miles:	<p>Please provide documentation for this truck's annual mileage for at least the past 24 months. More than 24 months' usage can be considered if the average over that period is more indicative of future usage.</p> <p>Examples:</p> <ul style="list-style-type: none"> • Driver's logs • IFTA Quarterly Tax Schedules • CHP 90-day inspections • Maintenance records • Job tickets <p>Documents must be specific to this vehicle and show vehicle identification, dates, odometer reading/mileage, and number of miles traveled in California. If using driver's log or job tickets, a summary (spreadsheet) is acceptable, with copies of oldest and newest records.</p>
Average annual miles in California:	
Average annual miles in SLO, Santa Barbara, Monterey, San Benito, Santa Cruz Counties:	
Truck's usage is best represented by:	

Hours Miles

FLEET INFORMATION

Number of vehicles in your fleet:

Complete the following information for all heavy-duty vehicles (over 14,000 lbs. GVWR) in the company's fleet. (List all trucks for which grant funding is **not** being requested.) A report from ARB Truck Regulation Upload, Compliance, and Reporting System ("TRUCRS"), detailing the following vehicle information for all trucks in the company's fleet, including the following statement: "I certify that this fleet list is accurate and complete", and signed by the owner, partner, corporate officer or designee, may be attached in lieu of completing this section, or you may attach additional sheets, as necessary.

1.	Co. veh. ID #:	VIN:	Truck make:	Model:	Model year:
	License #:	Engine make:	Eng. model yr.:	Fuel type:	HP:
2.	Co. veh. ID #:	VIN:	Truck make:	Model:	Model year:
	License #:	Engine make:	Eng. model yr.:	Fuel type:	HP:
3.	Co. veh. ID #:	VIN:	Truck make:	Model:	Model year:
	License #:	Engine make:	Eng. model yr.:	Fuel type:	HP:
4.	Co. veh. ID #:	VIN:	Truck make:	Model:	Model year:
	License #:	Engine make:	Eng. model yr.:	Fuel type:	HP:

PROJECT COST INFORMATION

Quoted cost for the new truck. Quote must itemize all standard equipment and options, including tax and shipping costs: \$ _____	Note: APCD will determine grant award amount and applicant cost share for the project from the quote and other documentation submitted with this application.
Does the applicant qualify for any public financial assistance or incentive that will directly reduce the cost of this project, including grants, tax credits or deductions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, enter the value of such assistance or incentive: \$ _____	



APPLICANT'S STATEMENT – To be signed by company representative with contract signing authority

- I understand that in order to receive incentive funds, I must enter into a Grant Agreement (contract) with the San Luis Obispo County Air Pollution Control District (APCD) and that there will be conditions placed upon receiving the grant award. I agree to refund the grant award, or a portion thereof as specified in the Grant Agreement, if it is found that at any time I do not meet those conditions and if directed to do so by the APCD or the California Air Resources Board (ARB).
- I shall not place orders, make purchases or begin any work associated with this project until notified by the APCD that all parties have signed the project's Grant Agreement and it is effective.
- I understand that the replacement truck and its certified emission system must operate in a manner consistent with historic usage of the old truck, with at least 75% of operation in California, for the life of the Grant Agreement.
- I certify that the new or replacement truck will be of the same body and axle configuration and be used for essentially the same work as the old truck under the vocation(s) specified in this application. I understand that the replacement truck will be prohibited from operating as a drayage truck and will not be allowed access to ports or intermodal rail yards, nor will it be allowed to move unbroken shipments of containers or trailers to or originating from these locations.
- I certify that the proposed project has not been funded and is not being considered for funding by any air district, the ARB, or any other public agency. Any applicant who is found to have applied for or received incentive funds from another entity or program for the same project without disclosing that information shall at a minimum be disqualified from all funding sources within the control of any air district or the ARB, and may be banned by the ARB from submitting any future applications to any State Grant Program solicitations. APCD and the ARB may also seek civil penalties or criminal sanctions for such non-disclosure. I understand that if I want to apply for alternative funding for this project, I must first withdraw my APCD application. A project may be funded cooperatively by multiple air districts if the project parameters are coordinated amongst the participating districts and the project meets all applicable grant program criteria.
- I certify that the applicant entity is in compliance and will remain in compliance with all applicable federal, state, and local laws, air quality rules and regulations, and that the applicant entity does not have any outstanding/unresolved/unpaid Notices of Violation (NOV) or citations for violations of any federal, state or local air quality regulation.
- I understand that all information provided with this application will be used by the APCD and/or ARB to evaluate the eligibility of this application to receive incentive funds. APCD/ARB will at its sole discretion determine which program funds, if any, will be used for this project. I understand that APCD/ARB staff reserves the right to request additional information of the applicant and can deny the application if such requested information is not provided. APCD will contact applicants who submit incomplete or illegible applications and work with them to complete the application. If the applicant does not respond within 30 days, the application shall be suspended; in such cases, that applicant can petition the APCD to re-initiate the application if they supply the previously identified missing information. The APCD may require the applicant to provide updated information.
- I understand that grant programs have limited funds and shall terminate upon depletion of program funding. The APCD shall honor projects that have been contracted, but are under no obligation to honor applications prior to contracting.
- I understand that the APCD will issue IRS form 1099 to grant recipients as required by law. It is the grant recipient's responsibility to determine their tax liability associated with their participation in the grant program.
- I certify that I have the legal authority to apply for incentive funding for the entity described in this application.
- I have reviewed the information contained in this application and all attachments and I certify under penalty of perjury that it is complete, accurate and correct.
- I agree to the above statements by signing below.

Printed name of company representative with contract signing authority:	Title:
Signature:	Date:

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