TIMBER
Receipt of Replacement Voucher

Truck Improvement/Modernization Benefitting Emission Reductions

Voucher Number:	**Voucher Amount: $**
Replacement Vehicle	**Dealership**
Make:	Dealership Name:
Model:	Address:
Model Year:	City, State, Zip:
VIN:	Phone:

Voucher Recipient	**Air District**	**ARB**
Owner Name:	Air District:	Carl Moyer Program
Address:	Address:	Phone: (866) 6-DIESEL
City, State, ZIP:	City, State, Zip:	Email: 8666diesel@arb.ca.gov
Phone:	Phone:	
TRUCRS ID:		

As an applicant of the Carl Moyer TIMBER Program, I agree to the following:

- Register the replacement vehicle in California with the DMV.
- Maintain insurance as required by law.
- Own and operate this vehicle at least 75 percent of the time within California for the duration of the voucher term.
- NOT use TIMBER funded projects to generate a compliance extension or extra credit for determining compliance with any regulation.
- Return annual usage reports throughout the voucher term.
- Never modify the emission control system, the vehicle, or the engine. Be available for a follow up inspection by the Air District or ARB, if requested.
- Allow ARB to verify registration with the DMV.
- Notify all involved parties including the Air District and ARB of any change in ownership or registration status during the voucher term.
- Pay back all incentive funds if one or more of the terms of the TIMBER Program, including the terms of this voucher are not met.
- All terms and conditions of the Application remain in effect.
- ARB, as an intended third party beneficiary, reserves the right to enforce the terms of the TIMBER Program at any time during the voucher term to ensure emission reductions are obtained.

I certify under penalty of perjury, under the laws of the State of California that the information provided is accurate.

Signature of Participant: _____ Date: _____

Name of Participant: _____

Original to Air District, Copy to Participant