

CARL MOYER AIR STANDARDS ATTAINMENT PROGRAM

OFF-ROAD COMPRESSION-IGNITION

PROJECT APPLICATION

OFF-ROAD COMPRESSION-IGNITION APPLICATION

Please print clearly or type all information on this application and on all attachments. Fill out one application for each engine or piece of equipment. All information necessary for completing this application is available in 2008 Carl Moyer Program Guidelines. This document can be viewed 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.

Eligibility Criteria

To be eligible for funding, projects must meet the criteria described in the 2008 Carl Moyer Program Guidelines and all current Carl Moyer Program Advisories. These criteria include but are not limited to the following:

- Emission reductions obtained through Carl Moyer Program 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 of \$16,000 per weighed ton of NOx, ROG, and PM10 reduced calculated in accordance with the cost-effectiveness methodology in Appendix C of the 2008 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.
- Projects must have a minimum project life of three years, except for engines subject to the Stationary Diesel In-Use Agricultural Engine Airborne Toxic Control Measure, which must have a minimum project life of one year.
- Maximum project life:
 - Repower Only (no retrofit) 7 years
 - Repower + retrofit 5 years
 - Retrofit 5 years
- No emission reductions generated by the Carl Moyer Program 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 Carl Moyer Program shall be used for credit under any federal or state emission averaging banking and trading program.
- Funded projects must have at least 75 percent of their total activity for the project life in California.

- Emission reduction technologies must be certified/verified by the ARB for sale in California and must comply with durability and warranty requirements. For the purposes of the Carl Moyer Program, a technology granted a conditional certification/verification by ARB is considered certified/verified.

ARB has adopted two fleet rules affecting off-road CI equipment: the In-Use Off-Road Diesel Vehicle Regulation (Off-Road Regulation) and Cargo Handling Equipment at Ports and Intermodal Rail Yards Regulation (CHE Regulation). There are limited funding opportunities for equipment subject to these rules. The first step in evaluating Moyer eligibility is determining whether equipment is subject to one of the ARB fleet rules:

Summary of Off-Road CI Engine Funding Opportunities

Equipment Type	Subject to ARB Fleet Rule?	Moyer Funding Opportunities*
Mobile agricultural equipment	No	Engine repowers and retrofits.
Cargo handling equipment at ports/ intermodal rail yards	CHE Regulation	Limited opportunities.
All other equipment (e.g. construction, mining, rental, airport ground support and other industries)	Off-Road Regulation	Small fleets: Tier 1 and cleaner repowers; retrofits through 2/29/12 – limited opportunities for retrofits after this date. Medium fleets: Tier 2 or cleaner repowers and retrofits through 2/28/10. Limited opportunities after this date. Large fleets: Limited opportunities for Tier 2 or cleaner repowers and retrofits.

**Limited opportunities* means a fleet's compliance status with the ARB regulation must be determined. Contact district Moyer Program staff or consult fleet rule Moyer implementation charts at <http://www.arb.ca.gov/msprog/moyer/guidelines/supplemental-docs.htm> in addition to these guidelines.

Project Types: Taking the above table into consideration, the following categories are eligible projects:

- **Engine Repowers.**
- **ARB-Verified Retrofits.**
- **Equipment Replacement.** Purchases of new or used CI equipment replacing an uncontrolled, fully functional CI piece of equipment may be eligible. For these projects, refer to the equipment replacement application.

Additional criteria may be found in the 2008 Carl Moyer Program Guidelines, Chapter 2 and Chapter 5, Section IV.

A. APPLICANT INFORMATION

1. Company name/ Organization name/ Individual name:		
2. Business type:		
3. Contact name and title:		
4. Business mailing address and contact information:		
Street:		
City:	State:	Zip code:
Phone: ()	Fax: ()	
E-mail:		
5. Person with contract signing authority (<i>if different from above</i>):		
6. How many vehicles/engines/retrofits are being applied for?		
7. Total funding amount requested in this application:		

B. FUNDING DISCLOSURE

1. Have any engines or vehicles listed in this application applied for or have been awarded Carl Moyer Program funding or other grants? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. If "yes", complete the following for each engine:
a. Agency applied to:
b. Date/Number of Agency Solicitation:
c. Funding Amount Requested:
d. Equipment Identification:
d. Baseline Engine Serial Number:
e. Status of Application:

ARB-verified retrofits are required on all off-road engine repowers as described in the Carl Moyer Program Guidelines. ARB has provided limited flexibility for applicants to opt-out of the default retrofit requirement on these projects. Applicants must complete the following if retrofits are not included as part of this application:

_____ **By initializing this paragraph, the applicant acknowledges that due to existing or future regulations they may be required to install retrofits on Carl Moyer Program funded equipment at their own cost. Please mark the appropriate box below if you would like to receive information regarding these regulations.**

- Yes**
- No**

I hereby certify that all information provided in this application and any attachments are true and correct.

Printed Name of Responsible Party:	Title:
Signature of Responsible Party:	Date:

Third Party Certification

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

Printed Name of Third Party:	Title:
Signature of Third Party:	Date:
Amount Being Paid for Application Completion in Whole or Part:	Source of funding to Third party:

For each engine, please complete sections C, D, E, F, or G (as appropriate). Please include project cost documentation including vendor quotes and other substantiating data to support cost estimates provided in this application.

C. PROJECT ACTIVITY INFORMATION

1. Project name:		
2. Project address (<i>if different than business address</i>):		
Street:		
City:	State:	Zip Code:
3. Annual Hours of Operation:		
4. Percent Operation in California:		
5. List counties in California in which the vehicle operates and percent of operation in each:		
6. Project Life:		
<input type="checkbox"/> Maximum <input type="checkbox"/> Other: _____ years		
7. Will the new engine have a functioning hour meter for the life of the project?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		

D. EXISTING (BASELINE) EQUIPMENT INFORMATION

Must be filled out for each piece of equipment requesting funding

1. Equipment Type/Function:		
2. Equipment Make:		
3. Equipment Model:		
4. Equipment Model Year:		
5. Equipment Serial Number:		
6. Equipment Identification Number (<i>unique number designated by applicant</i>)		
7. Number of Main Engines on this Equipment:		
8. Equipment Location:		
Street:		
City:	State:	Zip:
9. Engine Family: (<i>for controlled engines only</i>)		
10. Engine Tier (<i>for controlled engines only</i>)		
11. Engine Make:		
12. Engine Model:		
13. Engine Model Year:		
14. Engine Horsepower:		
15. Engine Serial Number:		
16. Engine Fuel Type:		

E. REPOWER PROJECTS (NEW ENGINE)

1. Number of Main Engines to be Repowered:		
2. New Engine Family:		
3. New Engine Make:		
4. New Engine Model:		
5. New Engine Model Year:		

6. New Engine Serial Number: <i>(if available)</i>	
7. New Engine Horsepower:	
8. New Engine Tier:	
9a. Engine Cost:	9b. Engine Installation Cost <i>(optional)</i> :

F. RETROFIT PROJECTS

1. ARB-verified Retrofit Device Manufacturer:	
2. Retrofit Device Make:	
3. Retrofit Device Model:	
4. Retrofit Device ARB Executive Order Number:	
5. Retrofit Device Serial Number <i>(if available)</i> :	
6. ARB – Verified PM Reduction (%):	
7. ARB – Verified NOx Reduction (%):	
8a. Cost of Retrofit:	b. Cost of Retrofit Installation <i>(optional)</i> :
9. Cost of Retrofit Maintenance for Project Life <i>(optional)</i> :	
10. Has retrofit been verified for the engine?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

H. FUNDING AMOUNT REQUEST

1. Total Amount Requested for this Piece of Equipment: <input type="checkbox"/> Maximum allowable <input type="checkbox"/> Other: \$ _____
