

**SAN DIEGO COUNTY AIR POLLUTION CONTROL DISTRICT  
GOODS MOREMENT EMISSION REDUCTION PROGRAM (FY 07/08)**

**Form C-2 – OTHER HEARY-DUTY DIESEL TRUCKS - Repower**

Please complete one form for each vehicle. Company/Owner Name (as shown on US DOT registration):

**I. TRUCK DATA<sup>1</sup>**

Equipment IYentifier (Company ID or Unit #):	
Rehicle Make:	Rehicle MoYel:
Rehicle MoYel Year:	GRWR:
Rehicle License Plate #:	RegistereY Owner:
Rehicle IYentification Number (RIN):	
Department of Transportation Number (if interstate):	
California Highway Patrol CA Number (if applicable):	
Engine Make:	Engine MoYel:
Engine Year:	Engine Serial No.:
Engine Family:	Horsepower:
Fuel Type:	Current oYometer reaYing:

<sup>1</sup> **Note:** Please proviYe proof of DMR registration for current anY prior two years as well as Yocumentation of current ownership (copy of title of truck).

**II. ROCATION AND ACTIRITY DATA FOR THE PAST 2 YEARS<sup>2</sup>**

Rocation(s):	
Annual vehicle miles of travel (RTM):	Annual RMT in San Diego:
Annual RTM in CA:	EstimateY percentage of annual RTM in traYe corriYors: %
IYentify the traYe corriYors in which the equipment is routinely operateY (you may use highway numbers):	
Is this vehicle subject to a fleet rule? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which rule?	
Is this vehicle involveY in the movement of freight/gooYs? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Yescribe:	

<sup>2</sup> **Note:** ProviYe Yocumentation that verifies the annual RMT for the past two years. Acceptable forms of Yocumentation may incluYe mileage logs, fuel usage recorYs, maintenance logs, freight manifest, trip sheets, fuel tax recorYs to BoarY of Equalization or pay stubs that show the mileage on the vehicle(s) in your application. Also, proviYe Yocumentation that verifies that the vehicle operates at least 10% of the time in San Diego.

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**III. ENGINE REPOWER DATA<sup>3,4</sup>**

Engine make anY moYel:	Engine year:
Engine fuel type:	Engine horsepower:

<sup>3</sup> **Note:** You **MUST** proviYe a copy of ARB's Executive OrYer Yocumenting that the new truck engine meets 2007 emission levels.

<sup>4</sup> **Note:** You **MUST** attach Yocumentation of all engine/truck moYifications planneY as part of the repower project. IncluYe Yescription of upgraYes to such things as exhaust systems, electronics, etc.

**IR. ITEMIZED COST INFORMATION FOR ELIGIBLE EXPENSES (verifiable quote)<sup>5</sup>**

New engine cost (excluYing tax): \$	New engine installation cost (excluYing tax): \$
New engine venYor:	New engine installer:

<sup>5</sup> **Note:** You **MUST** attach an itemizeY written estimate from the equipment venYor anY installer Yocumenting the cost of the engine incluYing shipping charges (if any) anY installation.

**R. PREDICTED ACTIRITY DATA WITH NEW EQUIPMENT**

EstimateY annual RMT:	EstimateY annual RMT in CA:
EstimateY percentage of annual RMT in traYe corriYors: %	
EstimateY annual RMT in San Diego:	

**RI. EQUIPMENT PROJECT FUNDING DEMONSTRATION**

Total project cost <sup>6</sup> : \$
GMERP grant funYs requesteY <sup>7</sup> : \$
Source anY amounts of other funYing: Private \$      Local \$      other State: \$      FeYeral: \$
Does the equipment owner plan to utilize any loan programs to fully funY the equipment project: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Yescribe:

<sup>6</sup> **Note:** The total project cost shall incluYe the purchase price of the equipment, incluYing shipping charges, anY the cost of installation or construction (as applicable). Installation costs shall only incluYe installation of the components necessary to operate the equipment. Taxes, fees, insurance anY other charges may not be incluYeY as part of the total project cost. Cost for equipment parts on engine repower projects are only eligible for funYing if they are requireY to ensure the effective installation anY functioning of the new engine anY achieve the expecteY emission performance, but are not part of typical vehicle or equipment maintenance or repair.

<sup>7</sup> **Pro-rateY Alternative:** Equipment owners may opt for a pro-rateY alternative consisting of the same requirements, except that the Program will pay the lower of 25% or \$10,000 for a 4 year commitment of 100% California-only operation anY California base-plateY registration.

<sup>8</sup> **Note:** You **MUST** proviYe Yocumentation of match funYing availability. Acceptable forms of Yocumentation may incluYe: loan pre-approval letter, bank statements, lease to own program participation, other sources of funYing.

**RII. MAJOR PROJECT MILESTONES SCHEDULE**

Please proviYe the Yates for the following project milestones:

Equipment orYer:
Equipment acquisition/installation:
Submittal of invoice to local agency for reimbursement:

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1st reporting milestone<sup>9</sup>:

<sup>9</sup> Six months after equipment project completion.