Off-Road Equipment Replacement Program

Applicant Checklist

Applicant Information	Equipment Information
Company Name:	Make & Model:
Contact Name:	Model Year:
Phone #:	Serial #:
(optional: attach business card)	Fleet ID #:

✓	Applicant Requirements
☐	**Completed Application (Signed & Dated in Ink)**
☐	**Applicant Self-Certification Form for Existing Equipment Vocation & Business Size**
☐	**Certificate of Liability Insurance --- Minimum $1,000,000 Limit** **(Current Year)**
☐	**Proof of Equipment Operational Condition (1 Year).** Choose only ONE of the 3 Options listed below: ☐ Maintenance/service records ☐ Revenue and usage records with operational, standby and down hours for the equipment ☐ Routine inspections which document the operating condition of the existing equipment (OSHA or workplace required)
☐	**Proof of Existing Equipment Ownership, Operation and Residency in California (2 years)** ☐ Documentation identifying existing engine that includes Manufacturer, Model Year, Serial Number, HP ☐ Bill of Sale for the existing equipment **PLUS** at least **ONE** of the following items. (If Bill of Sale not provided then TWO of the following items must be provided.) ☐ Tax depreciation logs ☐ Property tax records ☐ Equipment insurance records ☐ Bank appraisals for equipment ☐ Maintenance / service records ☐ General ledgers ☐ Fuel records specific to the existing equipment
☐	**Proof of Existing Equipment Usage (2 Years).** Choose only ONE of the 3 Options listed below: ☐ OPTION 1: Hour meter reading log (logs must show readings collected at least once a year from a functional hour meter installed on the existing equipment) ☐ OPTION 2: Fuel records specific to the existing equipment (logs, purchase receipts, or ledger entries) ☐ OPTION 3: Provide at least **TWO** of the following items: ☐ Revenue and usage records with operational, standby and down hours for the equipment ☐ Employee time sheets linked to equipment use ☐ Preventive maintenance records tied to specific usage hours for the equipment ☐ Repair work orders specific to the equipment ☐ Six months tracking normal equipment usage with a functional , tamper-proof hour meter
☐	**Tier 3 Engine Repower Cost Estimate for Existing Engine** OR submit a Dealer statement indicating that a Tier 3 engine repower is NOT available for the existing equipment
☐	**Replacement Equipment Documents** ☐ Replacement Engine ARB Certification (Executive Order) ☐ Replacement Equipment Price Quote & Spec Sheet ☐ Replacement Engine & Drive Train Warranty Documents **Retrofit Documents, if applicable** ☐ New Retrofit ARB Certification (Executive Order) ☐ New Retrofit Price Quote & Specification Sheet ☐ New Retrofit Warranty Documents

CONTINUED ON NEXT PAGE…

Off-Road Equipment Replacement Program
Applicant Checklist

✓	Applicant Requirements – CONTINUED FROM PREVIOUS PAGE…
☐	**After Contract is Signed** Submit Replacement Equipment & Retrofit Purchase Order showing order date, price, estimated delivery date
☐	**After Replacement Equipment is Delivered:** Submit Proof of Applicant's Cost Share Payment --- copy of check / finance documents
☐	**UCC-1 Form** Submit Proof that UCC-1 Form(s) have been filed with the California Secretary of State, giving SMAQMD a security interest in the Replacement Equipment for the full contract amount of the grant funds paid to the Applicant
☐	**Insurance** ☐ Submit Certificate of Liability Insurance (minimum $1,000,000 Limit) naming SMAQMD as additional insured / loss payee. ☐ Insurance documents must indicate the replacement value insurance coverage for the Replacement Equipment along with the Replacement Equipment make, model, and serial number.
☐	**Destruction of Existing Equipment** Existing equipment must be sent to a SMAQMD-approved salvage yard for destruction within ONE week after Replacement Equipment is delivered. NO part of existing equipment can be re-used or kept by the Applicant.