

Colusa County Air Pollution Control District (District)



Zero-Emission Agricultural UTV Application

- Funding Agricultural Replacement Measures for Emission Reductions (FARMER)**
 - Zero-Emission Agricultural Utility Vehicle (UTV)

To apply for incentive grant funds for MULTIPLE equipment:

- Fill out section **D** for each additional engine.
- The District will accept applications for 1-1, 2-1, and 3-1 projects.

A. Applicant Information

Organization, Company or Proprietor's Name (as it appears on Form W-9):		
Equipment Address:		
City:	State:	Zip Code:
Mailing Address (if different from above):		
City:	State:	Zip Code:
First and Last Name:	Contact Title:	Phone Number:
Fax Number:	Email Address:	Alternate Phone Number:
Person with Signing Authority:		Signing Authority Title:

B. Funding Disclosure

Have any engines or equipment 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		
If "Yes", complete the following for each engine or vehicle:		
Agency applied to:	Date applied:	Funding Amount:
Current (Old) Engine Serial Number:	Status of application: <input type="checkbox"/> approved <input type="checkbox"/> denied	

C. Project Activity Information

Project Name:
Equipment Type:
Estimated Annual Hours of Operation:
List air district(s) in California in which the equipment operated and percent of operation in each:
Have you owned and operated the equipment in California for the previous two (2) years? <input type="checkbox"/> Yes <input type="checkbox"/> No, this equipment is ineligible for funding.
Is this equipment Operational? <input type="checkbox"/> Yes <input type="checkbox"/> No, this equipment is ineligible for funding.
Will the engine have a functioning hour meter? <input type="checkbox"/> Yes <input type="checkbox"/> No, ineligible for funding

D. Current (Old) ATV / UTV Information

Make:	Model:	Model Year:
Vehicle ID Number:	Fleet ID (optional)	Annual Hours of Operation:
Engine Make:	Engine Model:	Engine Model Year:
Engine Serial Number:	Engine Horsepower:	Fuel Type: <input type="checkbox"/> Diesel <input type="checkbox"/> Gasoline
Engine Tier (Gasoline) <input type="checkbox"/> Uncontrolled <input type="checkbox"/> Controlled	Engine Tier (Diesel) <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	

E. Replacement (New) UTV Information

UTV Make:	UTV Model:	
UTV Model Year:	Fuel Type: <input type="checkbox"/> Zero-Emission (all electric) <input type="checkbox"/> All Others: Not Eligible	
Horsepower Rating (HP or KW):	Total Cost:	Tax Rate:

- Up to 80% of the eligible cost of new equipment.
- Eligible costs may include base vehicle, roof, windshield, or doors as well as an extended warranty.
- Eligible costs do not include attachments such as winches, storage bins, plows, cab heaters, or additional batteries.

F. Dealership Information

Dealership Name:		
Address:		
City:	State:	Zip Code:
Contact Name:	Phone Number:	Email:

G. Third Party Information

This section **must be completed** if any part of the application was filled out on your behalf by a third party. Please sign and date.

Contact Name:	Title:
Business Name:	Phone Number:
Cost of Services (<i>not eligible for funding</i>):	Source of Funds to Pay for Third Party Services:

I hereby certify that all information provided in this application and any attachments are true and correct to the best of my knowledge, and the District funds may not be utilized to compensate me for my services.

Third Party Signature

Date

Certifications

By initialing each of the following sections below, I certify to the statements and agree to adhere to the terms and conditions described:

Initial _____ I certify under penalty of perjury that I will not accept a grant from any other local, state or federal agency, including any funding from the Natural Resources Conservation Service (NRCS), for the equipment on this application.

Initial _____ The new replacement equipment will be operated at least seventy-five percent (75%) of the equipment annual hours of operation within Colusa County boundaries.

Initial _____ I will comply with the reporting requirements and keep appropriate records through the full term of the agreement of the project, as determined by the District and ARB.

Initial _____ The District will pay **up to 80%** of the eligible incentive amount. The District has the authority to reduce the percentage at its discretion. Additionally, the incentive amount may be reduced after the claim for payment has been finalized, depending on all eligible items invoiced.

Initial _____ I agree not to purchase the new equipment prior to agreement execution.

I hereby certify that all information provided in this application and any attachments are true and correct to the best of my knowledge.

Applicant Signature

Date

Application Packet Checklist

A complete application packet includes the following items:

Completed Application, which include the following:

- Completed Third Party Information section (*if applicable*)
- Completed Certifications section, initialed and signed

Dated and itemized dealer **quote** for the new reduced-emission engine and eligible equipment. The quote must, at a minimum, include the following:

- The applicant/organization name and address.
- The engine dealer name and address
- The engine make, model, model year, horsepower, and engine family name.

Please return all completed applications to:

Casey Ryan

Colusa County Air Pollution Control District

100 Sunrise Blvd., Suite F Colusa, Ca 95932

Phone: (530) 458-0583 ● Fax: (530) 458-3789

Email: cryan@countyofcolusa.com