APPENDIX I - VOUCHER INCENTIVE PROGRAM INSPECTION FORM TYPE OF INSPECTION

| Existing Vehicle: | | | | | |
|-------------------------------------|-----------------------|-------------------|----------------------|--|--|
| Pre-Inspection Pre | e-Dismantle | ☐ Dismantle | | | |
| Post-Inspection: | | | | | |
| Replacement Vehicle Post-Inspection | | | | | |
| Legible Pictures: | | | | | |
| ☐ Yes ☐ No |) | | | | |
| APPLICANT INFORMATION | | | | | |
| Company Name: | | | | | |
| Owner Name: | | | | | |
| Address: | | City, State, Zip: | | | |
| Telephone Number: | | | | | |
| Inspection Location: | | | | | |
| VEHICLE INFORMATION | | | | | |
| Existing or Replacement Vehi | cle? | | | | |
| Existing Replaceme | ent | | | | |
| Vehicle Make: | Vehicle Model: | | Vehicle Model Year: | | |
| Vehicle Identification Number: | License Plate Number: | | Date of Manufacture: | | |
| Odometer Reading: | Hour Meter R | eading: | Vehicle Operational? | | |
| | | | ☐ Yes ☐ No | | |
| DOT Number (if interstate): | CHP number: | | Fleet ID: | | |
| Cab Style: C | | Original Manufac | turer GVWR: | | |
| ☐ Conventional ☐ Cab-over | | | | | |

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| Replacement Vehicle Only: Is vehicle used? | | | | | | |
|--|---------------------------------------|-------------|----------------------|--|--|--|
| ☐ Yes ☐ No | | | | | | |
| VEHICLE INFORMATION | | | | | | |
| Engine or Electric Mo | tor or Powertrain Infor | mation? | | | | |
| Engine | Electric motor | Powertra | in | | | |
| Make: | Model: | Model Year: | Date of Manufacture: | | | |
| Serial Number: | Engine or Vehicle Family Number/Name: | | Horsepower: | | | |
| Engine or Vehicle ope | erational? | | | | | |
| ☐ Yes ☐ No | | | | | | |
| Fuel used? | | | | | | |
| Existing: | | | | | | |
| ☐ Diesel ☐ Other: | | | | | | |
| Replacement: | | | | | | |
| ☐ Electric ☐ Other: | | | | | | |
| Existing Vehicle Only: Filter Installed? | | | | | | |
| ☐ Yes ☐ No | | | | | | |
| FOR PRE-DISMANTLE INSPECTION ONLY, SPECIFY | | | | | | |
| Dismantler: | Contact name | e: | Telephone: | | | |
| DMV title delivered and signed by owner? | | | | | | |
| ☐ Yes ☐ No | | | | | | |
| Engine operational? | | | | | | |
| ☐ Yes ☐ No | | | | | | |

FOR DISMANTLE INSPECTION ONLY, SPECIFY

| Dismantler: | | Contact name: | Telephone: |
|---|--|--|--|
| Non-Repairable Ve | hicle Certificate l | Filed with DMV? | |
| Yes [| No | | |
| Frame Rails Cut? | | | |
| ☐ Yes | □No | | |
| Engine Destroyed? |) | | |
| Yes | No | | |
| Comments: | | | |
| Comments. | | | |
| | | | |
| | | | |
| examined and am fa Incentive Program a and complete. Base those individuals wit statements, I further statements, data and to the pictures, phot vehicle. I am aware t statements, data and understand, accept with the Air District. | amiliar with the read that the information on my complete the primary respondent certify under performation are tos, descriptions, that there are sight of the control of t | equirements of and oblimation, data and stater cion of a reasonable re- nsibility for obtaining s nalty of perjury under to true, accurate, and co characterizations and nificant penalties for kr | he laws of California, that I have ligations under the Voucher ments provided are accurate, true view of records and my inquiry of aid information, data and the laws of California that said implete, including but not limited depictions of the inspected nowingly submitting false of criminal sanctions. I also fully accorporated into the Agreement |
| Signature: | | | Date: |
| Authorized Name: | | - | |
| Air District / Dealer | ship: | | |
| Address: | | City, State, 2 | Zip: |
| Telephone Numbe | r: | I | |

REQUIRED PHOTOGRAPHS

Digital photos should be clear images with a minimum of 640x480 capture resolution. The air pollution control or air quality management district (air district) will specify the digital media required to save the pictures on.

(Check the boxes/circles of pictures taken)

| PRE-INSPECTION OF EXISTING VEHICLE | POST INSPECTION OF REPLACEMENT |
|--|---|
| | VEHICLE |
| U Vehicle from left side | Vehicle from left side or right side |
| ☐ Vehicle from right side | ☐ Vehicle Identification Number |
| Uehicle from front (license plate, if | (VIN) |
| available) | Gross Vehicle Weight Rating |
| ☐ Vehicle from back | (GVWR) |
| ☐ Vehicle Identification Number (VIN) | Odometer Reading |
| Gross Vehicle Weight Rating | Zero-emission vehicle tag |
| (GVWR) | Electric motor or powertrain make |
| Odometer reading | Electric motor or powertrain model |
| Engine tag (if available)* | Electric motor or powertrain serial |
| o Engine make | number |
| o Engine model | Electric motor or powertrain family |
| Engine serial number (ESN) | number/name |
| Engine family number/name | |
| DOT / CHP Numbers | |
| Retrofit device (if installed) | |
| Retrofit device tag (if installed) | |
| PRE-DISMANTLE INSPECTION OF EXISTING VEHICLE | DISMANTLE INSPECTION OF EXISTING VEHICLE |
| Vehicle from left side or right side | Vehicle from front (license plate, if |
| Vehicle Identification Number (VIN) | available) |
| Gross Vehicle Weight Rating | Vehicle Identification Number |
| (GVWR) | (VIN) |
| Odometer Reading | l <u> </u> |
| Engine serial number (ESN) | Engine serial number (ESN) Cut in frame rails |
| | Hole in engine block (at least three |
| | inches wide) |
| | Inches wide) |

^{*}If engine tag is missing, additional manufacturers documentation verifying engine make, model and family number associated with the photographed ESN stamped on the engine block must be submitted.