

**SAN DIEGO COUNTY AIR POLLUTION CONTROL DISTRICT
YEAR 11/12 CARL MOYER PROGRAM (Solicitation #2)**

**Form F-3 - LOCOMOTIVE PROJECT APPLICATION
Retrofit**

Please complete one form for each retrofit.

Company name/ Organization name/ Individual name:
Equipment Identifier (Company ID or Unit #):

I. ACTIVITY INFORMATION

<input type="checkbox"/> You must attach documentation showing the historical <i>fuel usage</i> for EACH existing engine over the last 24 consecutive months . Documentation may be in the form of maintenance records, fuel logs, or other paperwork that shows fuel usage	
Percent Operation within CA: _____%	Percent Operation within District: _____%
Is there any seasonality to the use of the equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:	

II. BASELINE LOCOMOTIVE INFORMATION

Railroad Class: <input type="checkbox"/> Class I <input type="checkbox"/> Class III	
Locomotive Type :	
<input type="checkbox"/> Line Haul <input type="checkbox"/> Traditional Switcher <input type="checkbox"/> Alternative Technology Switcher <input type="checkbox"/> Passenger	
Locomotive Make:	Locomotive Model:
Locomotive Horsepower:	Locomotive Serial Number:
Locomotive Year:	Fuel Type:
Baseline Engine Make:	Baseline Engine Model:
Baseline Engine Year:	Baseline Engine Serial Number:

III. RETROFIT INFORMATION¹

Retrofit Device Make:	Retrofit Device Model:
ARB Verification Level: <input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2 <input type="checkbox"/> Level 3+	
Verified Reduction Amounts: NO _x : _____% PM: _____% ROG: _____%	
Retrofit Device Family Name:	

¹ **Note:** You **MUST** attach a copy of the ARB Executive Order for the retrofit device and indicate on the Executive Order Attachment the engine family name for the engine on which the device will be installed.

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IV. AUTOMATIC ENGINE STOP-START (AESS) IDLE LIMITING DEVICE (ILD)²

Does the project locomotive already have a functioning Automatic Engine Start-Stop (AESS) Idle Limiting Device (ILD) installed?: <input type="checkbox"/> Yes <input type="checkbox"/> No	
AESS Make:	AESS Model:
AESS Model Year:	AESS ID Number:

² **Note:** All locomotive projects receiving more than \$50,000 per locomotive in Carl Moyer Program funds must include the purchase and installation of an ILD if the locomotive is not already equipped with such a device and installation is technically feasible.

V. FUNDING INFORMATION

Retrofit Device(s) Cost (incl. tax): \$	Retrofit Device(s) Installation Cost: \$
Cost of Retrofit Device(s) Maintenance for Life of Project: \$	
AESS Cost (incl. tax): \$	
Total Amount Requested for this Project³:	
<input type="checkbox"/> Maximum allowable 100% of eligible project costs	
<input type="checkbox"/> Other: \$ You may request less than the maximum allowable funding amount to improve the cost-effectiveness of your project	
Retrofit Device Vendor:	Retrofit Device Installer:
Anticipated Project Completion Date:	

³ **Note:** You **MUST** attach a written estimate (quote) from the retrofit vendor documenting the cost of the retrofit device and EMU (if applicable).

Attachment Reminder Checklist

Did you attach the following to complete your application?

- ✓ One completed copy of Form A-1 – General Project Information Application
- ✓ Documentation showing the historical ***fuel usage*** for **EACH** existing engine over the last **24 consecutive months**. Documentation may be in the form of maintenance records, logs, or other paperwork that shows fuel usage
- ✓ ARB Executive Order for each retrofit device (indicate on the Executive Order Attachment the engine family name for the engine on which the device will be installed)
- ✓ Written estimate (quote) from the retrofit vendor documenting the cost of each retrofit device and AESS (if applicable)
- ✓ A completed IRS Form W9 and California Form 590 must be submitted