



**VOUCHER INCENTIVE PROGRAM**  
**Inspection Form**

**Type of Inspection:**

<b>Existing Vehicle:</b> <input type="checkbox"/> Pre-Inspection <input type="checkbox"/> Pre-Dismantle <input type="checkbox"/> Dismantle
<b>Post-Inspection:</b> <input type="checkbox"/> Replacement Vehicle Post-Inspection
<b>Legible Pictures:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**Applicant Information**

<b>COMPANY NAME:</b>	<b>INSPECTION LOCATION:</b>
Owner Name:	
Address:	
City, State, Zip:	
Phone Number:	

**Vehicle and Engine Information**

Existing vehicle  Replacement Vehicle

<b>VEHICLE INFORMATION:</b>			
Vehicle Make:	Vehicle Model:	Vehicle Model Year:	
Vehicle Identification Number:	License Plate Number:	Date of Manufacture:	
Odometer Reading:	Hour meter Reading:	Vehicle operational? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DOT Number (if interstate):	CHP number:	Fleet ID:	
Cab Style: <input type="checkbox"/> Conventional <input type="checkbox"/> Cab-over		Original Manufacturer GVWR:	
<b>Engine Information:</b>			
Engine Make:	Engine Model:	Engine Model Year:	Date of Manufacture:
Serial Number:	Engine Family Number:	Horsepower:	
Engine operational? <input type="checkbox"/> Yes <input type="checkbox"/> No	Fuel used? <input type="checkbox"/> Diesel <input type="checkbox"/> Other:	Existing Vehicle Only: Filter Installed? <input type="checkbox"/> Yes <input type="checkbox"/> No	



**For Pre-Dismantle Inspection ONLY, Specify**

DISMANTLER:	CONTACT NAME:	PHONE:
DMV title delivered and signed by owner? <input type="checkbox"/> Yes <input type="checkbox"/> No		Engine operational? <input type="checkbox"/> Yes <input type="checkbox"/> No

**For Dismantle Inspection ONLY, Specify**

DISMANTLER:	CONTACT NAME:	PHONE:
Non-Repairable Vehicle Certificate Filed with DMV? <input type="checkbox"/> Yes <input type="checkbox"/> No		Frame Rails Cut? <input type="checkbox"/> Yes <input type="checkbox"/> No
		Engine Destroyed? <input type="checkbox"/> Yes <input type="checkbox"/> No

Comments:
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I certify under penalty of perjury that: 1) the information provided above is accurate, 2) the pictures are of the inspected vehicle, 3) the pictures clearly depict the inspected vehicle, and 4) that I understand that this inspection form is incorporated in the agreement with the San Diego Air Pollution Control District.

Signature:	Date:
Authorized Name:	
Air District / Dealership:	
Address:	
City, State, Zip:	
Phone Number:	



### 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)

<p><b>Pre-inspection of existing vehicle</b></p> <p><input type="checkbox"/> Vehicle from left side</p> <p><input type="checkbox"/> Vehicle from right side</p> <p><input type="checkbox"/> Vehicle from front (license plate, if available)</p> <p><input type="checkbox"/> Vehicle from back</p> <p><input type="checkbox"/> Vehicle Identification Number (VIN)</p> <p><input type="checkbox"/> Gross Vehicle Weight Rating (GVWR)</p> <p><input type="checkbox"/> Odometer reading</p> <p><input type="checkbox"/> Engine tag (if available)*</p> <p style="padding-left: 20px;"><input type="checkbox"/> Engine make</p> <p style="padding-left: 20px;"><input type="checkbox"/> Engine model</p> <p style="padding-left: 20px;"><input type="checkbox"/> Engine serial number (ESN)</p> <p style="padding-left: 20px;"><input type="checkbox"/> Engine family number</p> <p><input type="checkbox"/> DOT / CHP Numbers</p> <p><input type="checkbox"/> Retrofit device (if installed)</p> <p><input type="checkbox"/> Retrofit device tag (if installed)</p>	<p><b>Post inspection of replacement vehicle</b></p> <p><input type="checkbox"/> Vehicle from left side or right side</p> <p><input type="checkbox"/> Vehicle Identification Number (VIN)</p> <p><input type="checkbox"/> Gross Vehicle Weight Rating (GVWR)</p> <p><input type="checkbox"/> Odometer Reading</p> <p><input type="checkbox"/> Engine tag</p> <p style="padding-left: 20px;"><input type="checkbox"/> Engine make</p> <p style="padding-left: 20px;"><input type="checkbox"/> Engine model</p> <p style="padding-left: 20px;"><input type="checkbox"/> Engine serial number (ESN)</p> <p style="padding-left: 20px;"><input type="checkbox"/> Engine family number</p>
<p><b>Pre-Dismantle inspection of existing vehicle</b></p> <p><input type="checkbox"/> Vehicle from left side or right side</p> <p><input type="checkbox"/> Vehicle Identification Number (VIN)</p> <p><input type="checkbox"/> Gross Vehicle Weight Rating (GVWR)</p> <p><input type="checkbox"/> Odometer Reading</p> <p><input type="checkbox"/> Engine serial number (ESN)</p>	<p><b>Dismantle inspection of existing vehicle</b></p> <p><input type="checkbox"/> Vehicle from front (license plate, if available)</p> <p><input type="checkbox"/> Vehicle Identification Number (VIN)</p> <p><input type="checkbox"/> Engine serial number (ESN)</p> <p><input type="checkbox"/> Cut in frame rails</p> <p><input type="checkbox"/> Hole in engine block (at least three inches wide) and oil pan flange cut</p>

*\*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.*