



# San Joaquin Valley

## AIR POLLUTION CONTROL DISTRICT

### PROPOSITION 1B: GOODS MOVEMENT EMISSION REDUCTION PROGRAM COMPONENT

### **Truck Replacement Payment Procedures**

This document is designed to provide participants in the Proposition 1B: Goods Movement Emission Reduction Program Truck Replacement Option with the required instructions and guidance for the successful completion of a Claim for Payment Packet for their project. The applicant has sixty (60) days following the expiration of the agreement completion phase to turn in a Claim for Payment Packet. Claim for Payment Packets must be received during this timeframe to be eligible for reimbursement. Within **sixty (60) working days** of receipt of a properly supported and verified Claim for Payment, and successful post-inspection of the replacement vehicle, the SJVAPCD will issue payment to the participant.

San Joaquin Valley Air Pollution Control District (SJVAPCD) staff is available to answer questions and to provide assistance to participants regarding these procedures. It is advisable that you read the entire Payment Procedures document and executed agreement in order to fully understand the grant requirements. All questions regarding payment procedures should be directed to:

Jennifer Schmall or  
Carrie Todd

E-mail: [jennifer.schmall@valleyair.org](mailto:jennifer.schmall@valleyair.org) or  
[carrie.todd@valleyair.org](mailto:carrie.todd@valleyair.org)

San Joaquin Valley Air Pollution Control District  
Strategies and Incentives Department  
1990 East Gettysburg Avenue  
Fresno, CA 93726-0244

Telephone: (559) 230-5800  
Fax: (559) 230-6112

## REIMBURSEMENT

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The participant shall be **reimbursed** (as per agreement), after receipt and verification of a properly supported Claim for Payment Packet. Reimbursement takes place after the new reduced-emission truck is purchased, and the old truck is taken to a SJVAPCD approved dismantler. The following steps must be taken in order to qualify for reimbursement:

### ❖ Claim for Payment Packet (Reimbursement Only)

In order to be reimbursed, participants must submit a complete Claim for Payment Packet. Within **sixty (60) working days** of receipt of a properly supported and verified Claim for Payment, and successful post-inspection of the replacement vehicle, the SJVAPCD will issue payment to the participant. Payment is for reimbursement to the participant for the purchase of the specified replacement vehicle(s) and funding shall only be allowed toward purchase of the specific vehicle(s) described in participant's agreement with the SJVAPCD.

A complete Claim for Payment must include a Claim for Payment Form, copy of an itemized invoice, an Old Truck Status Form (section 1 and 2), and a current certificate of insurance for the new truck. **Only** the SJVAPCD Proposition 1B Program Claim for Payment Form is accepted. A Claim for Payment Form is included in this document for your use. As a matter of policy, the SJVAPCD does not provide advance payments to participants or third parties.

All Claim for Payment Forms and Old Truck Status Forms must be **dated** and **signed** by the **contract signing authority** (Section 1) and the SJVAPCD **approved dismantling facility** (Section 2) or they will be returned to the participant. The contract signing authority is the same individual who signed the project contract. **Only originally signed Claim for Payment Forms and Old Truck Status Forms will be accepted.** Along with the submission of the Claim for Payment Form, the participant must provide an itemized invoice indicating that the participant is the owner/recipient of the new reduced-emission truck. The Old Truck Status Form must be signed and submitted, indicating which dismantling facility was used for the destruction of the truck and the operational condition of the truck prior to destruction. The participant must also submit necessary supporting documentation. The insurance section of the agreement requires that the participant provide the SJVAPCD with a current certificate of insurance for the new truck in types and amounts approved by the SJVAPCD prior to any payment of funds.

Approximately one year after incentive funds have been issued, the participant may receive an Internal Revenue Service (IRS) Form 1099. For information about the tax implications related to the received incentive funds, please consult your tax advisor, as the SJVAPCD does not provide tax advice.

### ❖ Site Visits

All participants will undergo a site visit by SJVAPCD staff prior to any reimbursement. The purpose of the site visit is to verify the new reduced-emission truck has been placed into service in accordance with the terms of the agreement. Furthermore, SJVAPCD staff will take photographs and/or videos of project(s). The submission of a complete Claim for Payment Packet triggers the site visit, which must be completed before incentive funds can be released. The SJVAPCD retains the right to hold **additional** site visits at any time during the Project Life.

## OLD TRUCK DISPOSAL PROCEDURES & REQUIREMENTS

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The purpose of this document is to outline the procedures and requirements for disposing the old truck and its engine replaced through the SJVAPCD Proposition 1B: Goods Movement Emission Reduction Program.

### ❖ Procedures and Requirements

The following outlines the necessary steps and requirements for the disposal of the old truck and its engine:

1. The applicant has ten (10) days from the receipt of the new reduced-emission vehicle to transfer the old truck to a licensed dismantling facility. The dismantling facility has fifty (50) days from receipt of the old truck to properly destroy the truck and its engine.
2. The destruction of the old truck and its engine must be performed at a licensed dismantling facility that has entered into agreement with the SJVAPCD as an approved dismantler in the Proposition 1B: Goods Movement Emission Reduction Program. A comprehensive list of approved dismantlers is located on the SJVAPCD's website at [www.valleyair.org](http://www.valleyair.org), or applicants may contact staff in the Strategies and Incentives (SI) Department at (559) 230-5800 to obtain a list of dismantlers.
3. Prior to destruction, the old truck will be verified to be in operable working condition as documented in the truck pre-inspection. When the old truck is transferred to the dismantling facility, designated personnel at the facility will verify the operational condition of the truck. If the truck is deemed non-operational, it cannot be dismantled or destroyed and the SJVAPCD must be notified of the non-operational condition, in which SJVAPCD staff will review the situation and assess the eligibility of the truck.
  - Upon transfer of the old truck, the applicant must have the dismantling facility fill out Section 2 of the Old Truck Status Form which indicates the date the old truck was transferred. **The applicant must submit the original signed copy of this form with the claim for payment packet.**
4. The old truck and its engine shall be physically destroyed by the dismantler in such a manner to eliminate the possibility of future use.
  - The old truck must have its frame rails dismantled, cut, and/or demolished.
  - The old truck's engine block must be punctured at least four (4) to six (6) inch diameter hole to include a portion of the oil pan rail (sealing surface).
  - The old truck and its engine must have a complete, visible, and legible serial number or the SJVAPCD project number that was applied at the time of pre-inspection by a SJVAPCD inspector. If the serial number or the project number cannot be located, the truck and/or its engine cannot be scrapped or destroyed until notification is made to SJVAPCD staff for assessment.
5. Once the old truck and its engine are properly destroyed, personnel at the dismantling facility must notify SJVAPCD staff by mailing, emailing, or faxing a completed Notice of Destruction Form to staff to schedule a post-inspection site visit. A SJVAPCD inspector will verify the destruction of the truck and its engine, and the identification number of each with digital pictures during the site visit.

## STEP-BY-STEP CLAIM FOR PAYMENT GUIDANCE

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This section outlines the information required for each field of the Claim for Payment Form. Once the fields listed below have been completely filled out, the contract signing authority must **sign and date** the Form. This will complete the Claim for Payment Form. Please individually list, each new reduced-emission truck that you have purchased while under agreement on the Claim for Payment Form for which you are seeking reimbursement. For additional spaces, please make a copy of the Claim for Payment Form or obtain an additional copy of the Form from [www.valleyair.org](http://www.valleyair.org). **Only originally signed Forms are accepted**; therefore, subsequent copies of Claim for Payment Forms must also have original signatures from the contract signing authority. If you need additional assistance, please contact the SI Department and a SI staff member will assist you.

### ❖ Project Number

The number the SJVAPCD assigned to your project; this information can be found in your agreement.

### ❖ Payee/Grantee

The organization, company, or proprietor's legal name that entered into agreement with the SJVAPCD. This information was entered into Section 1 of the Application and must be **identical** to the information on the Form W-9.

### ❖ Address, City, State, and Zip

The mailing address used by the organization, including the city, state, and zip code. Reimbursement checks from the SJVAPCD will be mailed to the address provided here.

### ❖ Check Box

Check the classification of the organization that is listed under payee.

### ❖ Federal Tax I.D. # or Social Security #

The Taxpayer Identification Number (TIN), entered in Section 1 of the Application, in the form of an employer identification number, or a social security number. **The organization's name and TIN or SSN will be used to report incentive funding to the IRS.** The SJVAPCD cannot give tax advice; please contact a tax professional or the IRS to determine the tax consequences associated with receiving incentive funding.

### ❖ Telephone #

The main phone number, including area code, for the primary contact.

### ❖ Fax #

The fax number, including area code, for the primary contact.

**TWO-PARTY CHECK INFORMATION**

Please provide the vendor/dealer information if you would like the reimbursement check to also be made payable to the vendor/dealer. Please note, the reimbursement check will only be mailed to the payee/grantee mailing address. **A reimbursement check will not be mailed to the vendor/dealer.** Participating in the two-party check option may expedite the claims process.

❖ **Vendor/Dealer**

The name of the vendor/dealer where the new truck was purchased.

❖ **Address, City, State, and Zip**

The mailing address used by the vendor/dealer; including city, state, and zip code.

**NEW TRUCK INFORMATION**

Please skip every other line when filling out this table.

❖ **Date**

Document the date on the invoice from the purchase of the new truck.

❖ **Vehicle Identification Number**

Provide the Vehicle Identification Number (VIN) of the new truck.

❖ **New Vehicle Make and Model**

Provide the make and model of the new truck.

❖ **Amount Paid**

Document the total amount paid for the new truck as it appears on the invoice. If there is more than one invoice for the cost of the new truck, document the sum of all the invoices in the field.

## CLAIM FOR PAYMENT PACKET CHECKLIST

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**All forms submitted must have original signatures.** When submitting a request for payment, submit a **complete** Claim for Payment Packet. An incomplete Claim for Payment Packet will lengthen the processing time and delay reimbursement of funding. Please include the following items in the packet:

- Completed and **signed** SJVAPCD Proposition 1B Program - **Claim for Payment Form**. The same individual who signed the contract with the SJVAPCD must also sign the Claim for Payment Form.
- Dated and itemized vendor/dealer **Invoice(s)** for the cost of the new reduced-emission truck. The invoice must clearly identify, at a minimum, the following:
  - The applicant/organization name and address.
  - The new truck vendor/dealer name and address.
  - The make, model, VIN, and Gross Vehicle Weight Rating (GVWR) of the new truck.
  - The make, model, model year, horsepower rating, and US EPA-Certified Engine Family Name of the engine in the new truck.
  - Date of delivery (if different from invoice date)
  - Detailed breakdown of all invoiced costs; including the new truck, additional options, sales tax (with percentage rate indicated), and license fees. Please list all additional options in a line item format.
- Completed and **signed Old Truck Status Form**, both pages.
- Copy of **Certificate of Insurance** for the new truck. The Certificate of Insurance must indicate a current policy period and the VIN of the new truck.

**Please retain a full copy of the completed Claim for Payment Packet for your own records.**



# San Joaquin Valley Air Pollution Control District

## Proposition 1B Program - Claim for Payment

### Vehicle Replacement

Project Number:

Payee/Grantee : \_\_\_\_\_

Address : \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please check one of the following :	<input type="checkbox"/> Corporation
	<input type="checkbox"/> Partnership
	<input type="checkbox"/> Sole Proprietor
	<input type="checkbox"/> Government

Federal Tax I.D. # : \_\_\_\_\_

Social Security # : \_\_\_\_\_

Telephone # : \_\_\_\_\_

Fax # : \_\_\_\_\_

**For a two party check please complete the following information**

Vendor/Dealer : \_\_\_\_\_

Address : \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date	Vehicle Identification Number <small>(List each vehicle separately)</small>	New Vehicle Model	Amount Paid	Grant Amount
<b>Total Claim</b>				

\_\_\_\_\_  
Signature of Signing Authority                      Date

### For District Use Only

<u>For District Use Only</u>	
SJVUAPCD Approval _____	Date _____
<u>Administrative Services Use Only</u>	
Audited By _____	Date _____
Reviewed By _____	Date _____

Division	CY = 1	Account	Sub	Amount
Abbr.	#	Number	Acct.	
	91			
<b>Total</b>				

Vendor Number : \_\_\_\_\_

## OLD TRUCK STATUS FORM

Please submit this form with your Claim for Payment Packet. Supporting documentation related to the disposal of the old truck must be provided by the participant. The contract signing authority for the project must complete and sign Section 1 of the Form, and an authorized personnel from the SJVAPCD approved dismantling facility must complete and sign Section 2. **Both sections of the Form must be signed in blue ink, and only original signed Forms will be accepted. Please fill out a separate Form for each truck.** For additional Forms, please photocopy the Old Truck Status Form, or obtain an additional copy of the Form from [www.valleyair.org](http://www.valleyair.org). All subsequent copies of the Old Truck Status Form must also be signed and dated. If you need additional assistance, please contact the SI Department and a SI staff member will assist you.

### SECTION 1

Project Number:
Company Name:
Old Truck Vehicle Identification Number (VIN):
Engine Serial Number (ESN):

Participant attests that the replaced old truck and its engine, identified by the VIN and ESN above, have been permanently removed from operation. The old truck was transferred to the licensed and SJVAPCD approved dismantling facility listed below for destruction.

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

Contract Signing Authority Name (Print):	Title:
Contract Signing Authority Signature:	Date:

### SECTION 2

Dismantler attests that, upon receipt of the old truck, the operational condition of the truck listed is as follows: The old truck identified by the aforementioned VIN, and the accompanying engine identified by the aforementioned ESN, was received by the dismantling facility in:

- Vehicle is in **operable working condition**; authorized personnel have visually verified normal start-up of the engine and ensure that the old truck can perform its normal duties.
- Vehicle is **NOT in operable working condition** (explain below; do not destroy the old truck until SJVAPCD staff has given written approval to proceed with its destruction).

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

Dismantler Facility Name:	
Authorized Contact Name (Print):	Title:
Authorized Contact Signature:	Date:

## NOTICE OF DESTRUCTION FORM

***TO BE SUBMITTED BY DISMANTLER ONLY***

**THE DISMANTLING FACILITY MUST KEEP THIS FORM UNTIL THE DESTRUCTION OF THE OLD TRUCK.**

The SJVAPCD approved dismantling facility has fifty (50) days from the date of receipt, to destroy the old truck according to the terms and conditions of its agreement with the SJVAPCD. **After the destruction of the old truck, personnel from the dismantling facility must complete this Notice of Destruction Form and email, mail, or fax the Form to the following:**

Attention: Lupe Reyes

E-mail: [lupe.reyes@valleyair.org](mailto:lupe.reyes@valleyair.org)

San Joaquin Valley Air Pollution Control District  
 Strategies and Incentives Department  
 1990 East Gettysburg Avenue  
 Fresno, CA 93726-0244

Fax: (559) 230-6112

Once the Notice of Destruction Form is received by SJVAPCD staff, a post-monitoring site visit will be scheduled by an SJVAPCD inspector to visually verify the destruction. The SJVAPCD inspector will take digital photographs of the destroyed truck and its engine, and verify the truck's VIN and the engine's ESN.

<b>DISMANTLED TRUCK INFORMATION</b>		
Date of Truck Destruction:		
Project Number:		
Old Truck Vehicle Identification Number (VIN):		
Engine Serial Number (ESN):		
<b>DISMANTLER INFORMATION</b>		
Facility Name:		
Address (including street number and name, state, and zip code):		
Contact Name:		
Phone Number: (     )	Fax Number: (     )	Email: