

## Participant Form to Request an Equipment/Vehicle Substitution for an Active Grant Contract

Grant Contract Number: \_\_\_\_\_ Total Number of Equipment/Vehicle(s) on Contract: \_\_\_\_\_  
*Total Number of Equipment/Vehicle(s) Requested for Substitution: \_\_\_\_\_*

**Participant Information** [entity listed on the current grant contract identified on this form]

Company Name: \_\_\_\_\_ DBA Name, if applicable: \_\_\_\_\_  
 Business Type: \_\_\_\_\_  
*example: Sole Proprietor, Limited Partnership, Limited Liability Company, Corporation, Non-profit, Government Agency, Public School District, etc.*

Participant Contact: \_\_\_\_\_ Contact's Title: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_ Phone (mobile): \_\_\_\_\_  
 \_\_\_\_\_ Email: \_\_\_\_\_

**Description of Original Grant-funded Equipment/Vehicle** that Participant wants to Substitute with an equal-emission or lower-emission Equipment/Vehicle that performs the same work.

**Equipment/Vehicle Info**

Year/Make/Model: \_\_\_\_\_  
 Identification Number: \_\_\_\_\_

**Engine Info**

Year/Make/Model: \_\_\_\_\_  
 Emissions Family Number (Engine Family Number: \_\_\_\_\_  
 Serial Number: \_\_\_\_\_

**Select one, if applicable**

- Additional equipment/vehicles on this contract will also be substituted, but **not the entire grant contract**.\*
- All** additional equipment/vehicles on this contract will be substituted.\*

*\* attach an additional page that identifies all the equipment/vehicle & engine information for each grant-funded equipment/vehicle that is proposed for substitution.*

**Description of Potential Substitute Equipment/Vehicle** to complete the Grant Contract. Substitute Equipment/Vehicle must be equal-emission or lower-emission compared to the Original Grant-funded Equipment/Vehicle and perform the same work.

**Equipment/Vehicle Info**

Year/Make/Model: \_\_\_\_\_  
 Identification Number: \_\_\_\_\_

**Engine Info**

Year/Make/Model: \_\_\_\_\_  
 Emissions Family Number (Engine Family Number: \_\_\_\_\_  
 Serial Number: \_\_\_\_\_

**The following support documents must be submitted with this completed form:**

1. Explanation for substitution (example: vehicle destroyed)
2. Photos showing: Substitute Equipment/Vehicle, Equipment ID # or VIN, Engine Serial #, Engine Family #.
3. Copy of the fleet's Certificate of Compliance with CARB:
  - TRUCRS: On-road Truck & Bus Regulation, or
  - DOORS: In-use Off-road Diesel Regulation

**Print Name/Title of Authorized Signatory for Participant:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The completed form and the support documents identified on this form must be submitted as:

- Option 1: PDFs to [MyUsage@airquality.org](mailto:MyUsage@airquality.org), email subject line must state "Request to Modify Grant Contract # \_\_\_\_\_"
- Option 2: hardcopy to Sac Metro Air District, Attn: Grant Contracts, 777 12th Street, Sacramento, CA 95814-1908

Please allow 10-business days for Sac Metro Air District staff to contact both parties after the completed form and support documents have been received. Submitting this form and the necessary support documents does not constitute an approved contract modification to transfer the grant funded equipment/vehicle(s) on the original grant contract to a New Owner; the information provided by the existing Participant and potential New Owner will be used by Sac Metro Air District to evaluate the request.