

Carl Moyer Memorial Air Quality Standards Attainment Program (Carl Moyer Program) Marine Engine Replacement Application

General

The Bay Area Air Quality Management District (District) is accepting applications for the Carl Moyer Program. The purpose of the program is to provide funding to replace heavy-duty diesel engines with lower-polluting engines. Although the District is accepting applications throughout its jurisdiction, priority will be given to projects that reduce emissions in the following six highly impacted communities: (1) Concord, (2) Richmond/San Pablo, (3) Western Alameda County (4) San Jose, (5) Redwood City/East Palo Alto and (6) Eastern San Francisco.

This program will generally follow the guidelines of the California Air Resources Board's (ARB) Carl Moyer Program. For more information visit: www.arb.ca.gov/msprog/moyer/guidelines/current.htm. For more information about the District's policies and application process visit: www.baaqmd.gov/moyer.

Eligible Marine Projects

Eligible projects include marine engine (main or auxiliary) replacements, and retrofits. For qualifying projects, Carl Moyer Program grants will cover **up to 80%**¹ of the engine replacement costs (which includes eligible engine parts and installation). Please contact Stacy Shull if you are interested in applying for vessel replacement or remanufacturer kit overhaul.

What You Need To Do

You can apply for funding by completing and mailing two copies of the attached **application form and required attachments to:**

Bay Area Air Quality Management District
Attn: Stacy Shull
939 Ellis St.
San Francisco, CA 94109

Applications that are determined to be **complete** will be evaluated on a first come first served basis. All applicants will receive application completeness notifications within 5 business days via email, fax or mail. If you do not hear from the District within 5 business days of delivery, please contact the District immediately.

The submittal of this information does not guarantee approval for funding, but will be used to determine the potential emission reductions and District funding contribution associated with the proposed project. Any equipment purchased prior to the execution of an official grant agreement will not be eligible for funding.

If you have any questions regarding this program or the application process, please contact Stacy Shull by phone at **(415) 749-4955** or by e-mail at: sshull@baaqmd.gov

¹ Percentage of funding assumes marine Tier 2 repower project

Part 1: Applicant Information

Please type, visit www.baaqmd.gov/moyer for an electronic copy of this application to fill out on a computer, or **print clearly**.

1. Legal Name of Applicant /Vessel Owner:

2. Mailing Address: _____ The "Applicant"

Street Address/P.O. Box _____

City _____ County _____ State _____ Zip _____

Contact information

	Name	Email Address	Phone Number	Fax Number
3. Primary Project Contact				
4. Person Authorized to Sign Application and Execute Project Agreement				
5. Person Completed Application				

If a **Third Party** (e.g., engine dealer, distributor or consultant, etc.) assisted the Applicant to complete this application, such Third Party must complete this Section:

- 6.** What is your position? _____
- 7.** How much are you being paid to complete this application for the owner or to assist in the proposed project? \$ _____
- 8.** What is the source of funds being used to pay you? _____

Signed: _____ **Date:** _____

Name (Please Print): _____

9. How did the applicant hear about the Carl Moyer Program?

10. Did the applicant or anyone associated with this application (primary contact, employee of owner, third party) attend a Carl Moyer Program Application Workshop, a meeting or other event where information was presented about BAAQMD grant programs? YES NO

11. If yes, please provide the event name and approximate date of the event:

12. Number of engines we have applied for in this application

13. Applicant must read and initial each item below to indicate understanding and agreement:

I understand that this application is for evaluation purposes only and does not guarantee project funding.

Initial: _____

I understand and agree that the District will conduct an inspection of the equipment, vehicle(s) and/or vessel(s) that are the subject of this application prior to an award in order to verify eligibility and compliance with the Carl Moyer Program.

Initial: _____

I certify that the proposed project is not required by any local, State or federal rule or regulation; judicial order, or agreement, memorandum of understanding, contract, or other binding obligation that requires the project application to implement any portion of the project that would be funded by the District under the Carl Moyer Program.

Initial: _____

I certify that this application is for equipment/vehicle(s)/engine(s) that have not already been funded, nor are currently under consideration for funding by another air district, the California Air Resources Board (ARB) or by another public agency.

Initial: _____

I certify that to the best of my knowledge, the information contained in this application and in any documentation accompanying this application or submitted in furtherance of this application is true and accurate.

Initial: _____

I have attached documentation showing that my organization carries the appropriate insurance (i.e. Protection & Indemnity Insurance and Hull Insurance)

Initial: _____

I understand and agree that new equipment/vehicle(s)/engine(s) funded by this program can only be purchased or ordered once the contract is signed between the equipment owner and the District and a pre-project inspection has been conducted.

Initial: _____

I certify that I have the legal authority to apply for funding on behalf of the applicant entity and that I am authorized to sign this application on behalf of applicant.

Signed: _____ **Date:** _____
(Authorized Representative of Applicant Equipment Owner)

Name (Please Print): _____

Title: _____

Part 2: Vessel and Engine Information

Vessel Information

1. Vessel Type: <input type="checkbox"/> Commercial Fishing <input type="checkbox"/> Charter Fishing <input type="checkbox"/> Crew & Supply <input type="checkbox"/> Pilot <input type="checkbox"/> Work		<input type="checkbox"/> Ferry/ Excursion <input type="checkbox"/> Tow <input type="checkbox"/> Tug <input type="checkbox"/> Barge <input type="checkbox"/> Other	
2. Number of Propulsion Engines to be Repowered:			
3. Number of Auxiliary Engines to be Repowered (please make sure to provide engine info, not gen info):			
4. Vessel Name:			
5. Vessel Make:			
6. Vessel Model:			
7. Vessel Year:			
8. U.S. Coast Guard Documentation Number (IMO Lloyd's Number if oceangoing vessel, or CF# AND CA Department of Fish & Game license for fishing vessels manufactured out of the United States or less than five net tons displacement):			
9. Does the project vessel utilize a wet exhaust system: <input type="checkbox"/> YES <input type="checkbox"/> NO			
10. Total Amount requested from BAAQMD for engine replacement(s):			
11. Are all quotes from your engine dealer attached? <input type="checkbox"/> YES <input type="checkbox"/> NO			

Activity Information

12. Vessel Pier and Port:
13. Vessel Berth:
14. Percent Operation in California Waters:
15. Percent Operation in District Waters: Note: See http://www.baaqmd.gov/dst/jurisdiction.htm for a jurisdiction map.
16. Will the vessel have a functioning hour meter for the full project life? <input type="checkbox"/> YES <input type="checkbox"/> NO
17. Does the Vessel Remain in Port Only? <input type="checkbox"/> YES <input type="checkbox"/> NO

First Engine: (for auxiliaries provide engine info, not generator info EX: engine KW, make, model, etc.)

18. Engine function:	<input type="checkbox"/> Main Engine	<input type="checkbox"/> Auxiliary Engine
19. Engine Location	<input type="checkbox"/> Port or <input type="checkbox"/> Starboard	<input type="checkbox"/> Aft or <input type="checkbox"/> Fore

Existing Engine Information

Replacement Engine Information

20. Make:	24. Make:
21. Model:	25. Model:
22. Year:	26. Year:
23. Serial Number:	27. Serial Number:
24. Horsepower:	28. Horsepower / KW (please specify):
25. Number of Cylinders:	29. Number of Cylinders:
26. Displacement (liters/ cylinder):	30. Displacement (liters/ cylinder):
27. Fuel Type:	31. Fuel Type:
28. Current annual hours of operation for this engine:	32. New engine, annual hours of operation (Expected)
	33. New Engine EPA Engine Family Number:
34. Cost of new engine and parts:	
35. Cost of new engine installation: Please provide hours and rate EX: 200 hours @ \$20.00/hour	

Retrofit Option to First Engine

36. Are you installing a retrofit device (Diesel Particulate Trap (DPF), Selective Catalytic Reduction (SCR) or Diesel Oxidation Catalyst (DOC)) on this engine? <input type="checkbox"/> YES Fill out Questions 36-43 <input type="checkbox"/> NO Skip this section and move on to the Attachments Section
37. ARB-Verified Retrofit Device Make :
38. ARB-Verified Retrofit Device Model:
39. ARB-Verified Retrofit Device Executive Order Number:
40. Verification Level (Level 1, 2 or 3):
41. Cost of retrofit device & parts:
42. Cost of installation:
43. Cost of retrofit device maintenance for life of project (optional):

MORE ENGINES?
If you are requesting funding for additional engines, copy this page and proceed with engine 3, 4, 5, etc.

Second Engine: (for auxiliaries, provide engine info, not generator info EX: engine KW, make, model)

44. Engine function:	<input type="checkbox"/> Main Engine	<input type="checkbox"/> Auxiliary Engine
45. Engine Location	<input type="checkbox"/> Port	or <input type="checkbox"/> Starboard <input type="checkbox"/> Aft or <input type="checkbox"/> Fore

Existing Engine Information	Replacement Engine Information
46. Make:	55. Make:
47. Model:	56. Model:
48. Year:	57. Year:
49. Serial Number:	58. Serial Number:
50. Horsepower:	59. Horsepower / KW (please specify):
51. Number of Cylinders:	60. Number of Cylinders:
52. Displacement (liters/ cylinder):	61. Displacement (liters/ cylinder):
53. Fuel Type:	62. Fuel Type:
54. Current annual hours of operation for this engine	63. New engine hours of operation (Expected)
	64. New Engine EPA Engine Family Number:
65. Cost of new engine and parts:	
66. Cost of new engine installation: Please provide hours and rate EX: 200 hours @ \$20.00/hour	

Retrofit Option to Second Engine

67. Are you installing a retrofit device (Diesel Particulate Trap (DPF), Selective Catalytic Reduction (SCR) or Diesel Oxidation Catalyst (DOC))? <input type="checkbox"/> YES Fill out Questions 67-74 <input type="checkbox"/> NO Skip this section and move on to the Attachments Section
68. ARB-Verified Retrofit Device Make :
69. ARB-Verified Retrofit Device Model:
70. ARB-Verified Retrofit Device Executive Order Number:
71. Verification Level (Level 1, 2 or 3):
72. Cost of retrofit device & parts:
73. Cost of installation:
74. Cost of retrofit device maintenance for life of project (optional):

MORE ENGINES?
If you are requesting funding for additional engines, copy this page and proceed with engine 3, 4, 5, etc.

Part 3: Attachments to Provide With Application

Attachment A: Insurance Information

Please provide the following insurance documents showing coverage for:.

1. Protection and Indemnity
 - a. Corporations and Public Entities - a limit of not less than \$1,000,000 per occurrence.
 - b. Single Vessel Owners - a limit of not less than \$500,000 per occurrence.

2. Hull and Machinery
 - a. Covering the total value of the vessel(s) , including the value of the new engines

Attachment B: Harbor Craft Regulation Initial Report

Excursion, ferry, tug or tow boat project applications received after February 28, 2009 must include a copy of the most recent Initial Report required by Section (h)(1) of ARB's Harbor Craft Regulation. As of this date, a project participant's Annual Reports to air districts must also include a copy of the most recent Harbor Craft Regulation Initial Report (below is an example of the information required).

Initial Report Requirements can be found here (Page 42-45):

<http://www.arb.ca.gov/regact/2007/chc07/rev93118.pdf>

(g) Recordkeeping Requirements.

Beginning January 1, 2009, the owner or operator of a harbor craft must maintain the records specified in this subsection on the vessel or at the vessel's homeport for the life of each engine subject to this section. The owner or operator must provide such records for inspection to an agent or employee of ARB upon request for all harbor craft subject to this section. Records may be provided as a hard copy, electronic, or any alternative reporting strategy approved by the E.O. Records provided by the person under this provision must include, at a minimum, the following:

- (1) Owner or Operator Contact Information:
 - (A) Company name;
 - (B) Contact name, phone and fax number, address, e-mail address;
 - (C) Address where vessel is registered; and
 - (D) Reporting year.

- (2) Vessel information:
 - (A) Harbor craft name;
 - (B) Specify vessel use(s) (ferry, excursion vessel, tugboat, ocean-going tugboat, towboat, push boat, work boat, commercial fishing vessel, charter fishing vessel, crew and supply vessel, pilot vessel, or other if none of the preceding apply);
 - (C) Vessel homeport;
 - (D) Vessel build year;
 - (E) U.S. Coast Guard documentation number;
 - (F) California Fish and Game license number;
 - (G) International Maritime Organization (IMO) number;
 - (H) Call Sign number; and
 - (I) Maritime Mobile Service identity number.

- (3) Engine Information (for each diesel engine on the vessel):
 - (A) Current hour meter reading;
 - (B) Make of engine;
 - (C) Model of engine;
 - (D) Engine family (if applicable);
 - (E) Engine serial number;
 - (F) Year of manufacture of engine (if unable to determine, provide its approximate age);
 - (G) Rated brake horsepower;
 - (H) Total engine displacement; and
 - (I) Number of cylinders.

- (4) Operational Information:
 - (A) Describe the general use of engine (propulsion or auxiliary engine);
 - (B) Total annual hours of operation, based upon readings of the non-resettable hour meters for previous calendar year per engine (for engines without an hour meter before 2009, provide an estimate);
 - (C) Estimated annual fuel usage per engine; and
 - (D) Estimated percent operating time as a function of distance from shore at the distances below:
 - 1. 0-3 nautical miles; and
 - 2. >3-24 nautical miles; and
 - 3. >24 nautical miles from shore.

- (5) Control Equipment (if applicable):
 - (A) Type of diesel emission control strategy;
 - (B) Manufacturer of installed diesel emission control strategy;
 - (C) Model of installed diesel emission control strategy;
 - (D) Level of control – air pollutants controlled and percent reductions;
 - (E) Emission control serial number; and
 - (F) Date control equipment installed.

- (6) Maintenance records for each installed engine and diesel emission control strategy:
 - (A) Hour meter reading at last top end rebuild (i.e., less than full rebuild);
 - (B) Hour meter reading at last full engine rebuild; and
 - (C) Number of times full engine rebuild completed.

Attachment C: Annual Usage Information

Instructions: Use this form ONLY if you do not have personal maintenance records showing the annual usage in hours.

If you DO NOT have personal maintenance and usage documentation, Please make the necessary copies of this form to provide **two years of usage data for each engine**

Year of Usage:		Vessel name:										
Monthly Engine Usage Information												
List Engine location and function <i>ex: Port main or Starboard Auxiliary</i>	Jan Hours	Feb Hours	March Hours	April Hours	May Hours	June Hours	July Hours	Aug Hours	Sept Hours	Oct Hours	Nov Hours	Dec Hours

Attachment D: Application Checklist

Application Checklist

- Did you sign the application?
 - If completed by a Third Party, did the Third Party sign the application?
 - Did you make 2 copies of each application? Each project should have:
 - 2 copies of Part 1, and
 - 2 copies of Part 2, and
 - 2 copies of all attachments for each vessel submitted as part of the project.
 - Did you attach proof of applicable insurance to cover the following:
 - Protection & Indemnity Insurance
 - Hull Insurance to cover the **value of the vessel(s)**
 - Did you provide two years of annual usage (in hours) documentation?
 - Each application shall include documentation of annual average engine hours, as determined from the **average usage over the last two years**. The average annual usage can be estimated using data that represent a typical year of operation. If the equipment is new to the owner, a documented projection, using recent data and assumptions made, can be used to estimate future usage.
 - Itemized quote for the new equipment to include BOTH the:
 - Parts, tax, and shipping cost
- AND-----
- Labor to complete the project (installation) – **Labor must be broken down by hourly rate and expected hours to complete the project;**

Survey Questions

Was this application easy to follow? Yes No

If not, do you have any recommendations for making it easier to understand?
