



**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 <input type="checkbox"/> Retrofit Device 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 No:	

**Vehicle and Engine Information**

**EXISTING VEHICLE**    **REPLACEMENT VEHICLE**    **RETROFIT DEVICE**

<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:		
<b>Retrofit Device Information (retrofit projects only):</b>			
Retrofit Make:	Retrofit Model:	Retrofit Serial Number:	



**For Pre-Dismantler 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 Dismantler 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 *North Coast Unified Air Quality Management District (NCUAQMD)*.

Signature:	Date:
Authorized Name:	
Air District / Dealership / Installer:	
Address:	
City, State, Zip:	
Phone No:	



### Required Photographs

Digital photos should be clear images with a minimum of 640x480 capture resolution. The 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> <ul style="list-style-type: none"> <li><input type="checkbox"/> Vehicle from left side</li> <li><input type="checkbox"/> Vehicle from right side</li> <li><input type="checkbox"/> Vehicle from front (license plate, if available)</li> <li><input type="checkbox"/> Vehicle from back</li> <li><input type="checkbox"/> Vehicle Identification Number (VIN)</li> <li><input type="checkbox"/> Gross Vehicle Weight Rating (GVWR)</li> <li><input type="checkbox"/> Odometer reading</li> <li><input type="checkbox"/> Engine tag (if available)* <ul style="list-style-type: none"> <li><input type="checkbox"/> Engine make</li> <li><input type="checkbox"/> Engine model</li> <li><input type="checkbox"/> Engine serial number (ESN)</li> <li><input type="checkbox"/> Engine family number</li> </ul> </li> <li><input type="checkbox"/> DOT / CHP Numbers</li> <li><input type="checkbox"/> Retrofit device (if installed)</li> <li><input type="checkbox"/> Retrofit device tag (if installed)</li> </ul>	<p><b>Post inspection of replacement vehicle</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Vehicle from left side or right side</li> <li><input type="checkbox"/> Vehicle Identification Number (VIN)</li> <li><input type="checkbox"/> Gross Vehicle Weight Rating (GVWR)</li> <li><input type="checkbox"/> Odometer Reading</li> <li><input type="checkbox"/> Engine tag <ul style="list-style-type: none"> <li><input type="checkbox"/> Engine make</li> <li><input type="checkbox"/> Engine model</li> <li><input type="checkbox"/> Engine serial number (ESN)</li> <li><input type="checkbox"/> Engine family number</li> </ul> </li> </ul>
<p><b>Pre-Dismantler inspection of existing vehicle</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Vehicle from left side or right side</li> <li><input type="checkbox"/> Vehicle Identification Number (VIN)</li> <li><input type="checkbox"/> Gross Vehicle Weight Rating (GVWR)</li> <li><input type="checkbox"/> Odometer Reading</li> <li><input type="checkbox"/> Engine serial number (ESN)</li> </ul>	<p><b>Dismantler inspection of existing vehicle</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Vehicle from front (license plate, if available)</li> <li><input type="checkbox"/> Vehicle Identification Number (VIN)</li> <li><input type="checkbox"/> Engine serial number (ESN)</li> <li><input type="checkbox"/> Cut in frame rails</li> <li><input type="checkbox"/> Hole in engine block (at least 3 inches wide)</li> </ul>
<p><b>Post inspection of retrofit device (retrofit projects only)</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Retrofit device</li> <li><input type="checkbox"/> Retrofit device tag <ul style="list-style-type: none"> <li><input type="checkbox"/> Retrofit make</li> <li><input type="checkbox"/> Retrofit model</li> <li><input type="checkbox"/> Retrofit serial number</li> </ul> </li> </ul>	

*\*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.*