

TUOLUMNE COUNTY AIR POLLUTION CONTROL DISTRICT CARL MOYER PROGRAM ANNUAL REPORT

Please submit your annual report no later than 30 days after the anniversary date of placing your engine(s) or retrofit control device(s) into service. Provide a separate form for each engine/retrofit control device.

| Date: | | | |
|--|---------------------|--|--|
| Participant Name: | | | |
| Primary Contact Name: | | | |
| Street/Mailing Address: | | | |
| City: | State: | Zip Code: | |
| Phone Number: | Fax | Fax Number: | |
| Email: | | | |
| Engine/Vehicle Address: | | | |
| Model Year: | Engine Serial Nur | mber: | |
| Vehicles Miles Traveled (VMT) Du | uring the Last Yea | ar: | |
| Hours of Operation: | Percent of | VMT in California: | |
| Amount of Fuel Consumed During | the Last Year: | | |
| Identify any Maintenance Performe | ed on the Engine (| (use the back or a separate form) | |
| Identify any Conditions that Significant | icantly Affected tl | he Usage (use the back or a separate form) | |
| | | | |

Please return this form to: Carl Moyer Program Annual Reporting

Tuolumne County Air Pollution Control District

2 South Green Street Sonora, CA 95370