



SMOKING VEHICLE RESPONSE FORM

Owner/Company Name: _____

License Plate Number: _____ State: _____

1. Are you the registered owner of this vehicle? Yes No

2. If you answered "No," check the appropriate box:

Incorrect license plate number? Sold vehicle? Date sold: ____/____/____

3. Parts Repaired/Replaced? Yes No Engine Adjustment? Yes No

4. Date Vehicle Repaired: ____/____/____

Cost of Repair: Parts \$ _____ Labor \$ _____

Please attach all receipts for parts purchased and repairs performed on vehicle.

5. Repairs Made By: Owner Mechanic/Shop No Repairs Made

6. Check the appropriate box:

My engine has been repaired and does not emit excessive smoke.

My engine is not repaired for the following reason:

Signature

Date

The energy challenge facing California is real. Every Californian needs to take immediate action to reduce energy consumption. For a list of simple ways you can reduce demand and cut your energy costs, see our Website: <http://www.arb.ca.gov>.