

Date	EIN:
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TRU RENTAL OR LEASE STATUS

I rent or lease this unit to others, check one box: <input type="checkbox"/> This is a lease unit (contract term, typically more than one year). <input type="checkbox"/> This is a rental unit (no contract term).

REPORTING IDENTITY INDICATION

Indicate who is reporting the TRU: <input type="checkbox"/> Owner (or an employee of the owner) <input type="checkbox"/> A third party reporting the TRU under a third party agreement between the owner or lessor and a consultant or lessee.
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TRU/ TRU GENERATOR SET UNIT INFORMATION

NOTE: Provide TRU/TRU Generator Set Unit information here. Do not provide engine information on this page. The engine information must be entered on the compliance information page (starting on page 3 of this form). *An asterisk indicates a required field

TRU/TRU Generator Set Unit Type*: <input type="checkbox"/> Truck TRU <input type="checkbox"/> Trailer TRU <input type="checkbox"/> Railcar TRU <input type="checkbox"/> TRU Generator Set <input type="checkbox"/> Domestic Refrigerated Shipping Container TRU	
TRU/TRU Generator Set Unit Manufacturer*:	TRU/TRU Generator Set Unit Model*:
TRU/TRU Generator Set Unit Model Year*:	TRU/TRU Generator Set Unit Serial Number*:
<input type="checkbox"/> Check if this unit is Zero-Emission (ZE)	Date TRU was purchased, rented, or leased*:
Indicate what state or province the TRU/TRU Generator Set is based in: <input type="checkbox"/> California <input type="checkbox"/> Outside California If Outside California, indicate which U.S. State, Mexican State, or Canadian Province:	

OTHER TRU/ TRU GENERATOR SET IDENTIFYING NUMBERS

If the TRU is mounted on a truck or trailer, you must enter the vehicle identification number (VIN), license number, and state or province of issuance. If the TRU is mounted on a railcar, you must enter the railcar reporting mark. If the TRU is mounted on a domestic refrigerated shipping container or is a TRU generator set, you must enter the BIC code.

Vehicle Identification Number (VIN):	Vehicle License Number:
Vehicle License State or province of issuance:	Railcar Reporting Mark:
BIC Code:	Company Equipment Number (if any):
Military Tactical Support Equipment: <input type="checkbox"/> Check if this is Military Tactical Support Equipment	

TRU STATUS INFORMATION

Check Only One: <input type="checkbox"/> Active (TRU/TRU set is operational) <input type="checkbox"/> Removed from Service (TRU/TRU generator set is scrapped or inactive for the foreseeable future) <input type="checkbox"/> Sold (complete information below, if you do not have this information, contact CARB).	
Date of Sale:	New Company Name:
New Company Address 1:	New Company Address 2:
Country (if not the U.S.):	State or Province (Canada):
City/Zip Code:	New Contact Title:
New Contact First Name:	New Contact Last Name:
New Contact Telephone:	New Contact Email Address:

TRU ENGINE INFORMATION

Power Rating: <input type="checkbox"/> Under 25 HP (under 19 kW) <input type="checkbox"/> Over 25 HP (over 19 kW)	
TRU Engine Manufacturer:	TRU Engine Model:
TRU Engine Model Year:	TRU Engine Serial Number:
TRU Engine Family:	

TRU ENGINE TYPE (all fields required)

TRU Engine Type: <input type="checkbox"/> Original Engine <input type="checkbox"/> Replacement Engine, New <input type="checkbox"/> Replacement Engine, Rebuilt
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If Replacement Engine, Rebuilt, complete the information below:

Replacement or Rebuilt Tier:	Year of Rebuild:
Date Replacement or Rebuilt Engine was Installed:	

COMPLIANCE OPTIONS

Choose one of three options: Retrofit, Alternative Technology, or None.

1. Retrofitted with Verified Diesel Emission Control Strategy (VDECS). Provide the following information from the emission control label:

VDECS Manufacturer Name:	
VDECS Family Name:	VDECS Manufacture Year:
VDECS Serial Number:	VDECS Installation Date:

Complete the information below on business or person who installed VDECS:

Installer Name:	Installer Mailing Address:
Installer City/State/ Zip:	Installer Telephone with area code:

2. Alternative Technology

<p>Choose one of the three following types of alternative technologies. If applicable, check the type and provide the date the technology was first employed. Additional record keeping requirements apply to all of these compliance options.</p> <p>A. <input type="checkbox"/> Electric Standby or Hybrid Electric</p> <p>B. <input type="checkbox"/> Cryogenic Temperature Control System</p> <p>C. <input type="checkbox"/> Alternative Fuel (check one fuel type):</p> <p style="padding-left: 20px;"><input type="checkbox"/> CNG (Compressed Natural Gas)</p> <p style="padding-left: 20px;"><input type="checkbox"/> LPG (Liquefied Petroleum Gas)</p> <p>D. <input type="checkbox"/> Fueled Exclusively with Pure Alternative Diesel Fuel</p> <p>E. <input type="checkbox"/> Powered by Fuel Cells</p> <p>F. <input type="checkbox"/> Other System Approved by the Executive Officer</p>
Electronic Tracking System Provider (required if using electric standby or hybrid electric):
Date alternative technology was implemented:

3. None of the Above. Checking this box indicates you have not installed VDECS or Alternative Technology. This may be because the engine's compliance data is still in the future.

REFRIGERANT INFORMATION

Indicate type of refrigerant.

- A. R-404A
- B. R-452A
- C. R-744
- D. Other, Indicate type:
- Check box if TRU has a TRU OEM supplied refrigerant label

ZERO-EMISSION TRUCK TRU INFORMATION

If the unit is a zero-emission truck TRU used to comply with section 2477.5(b), then indicate the technology type:

- A. Battery-Electric
- B. Cryogenic Temperature Controlled System
- C. Cold Plate System
- D. Powered by Fuel Cells
- E. Other, Indicate type: