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| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | Certificate of  engine/chassis destruction  Minnesota Clean Diesel Program  Doc Type: Grant Application |

## Instructions:This form should be submitted with the required documentation for reimbursement via email to Minnesota Pollution Control Agency (MPCA) Accounts Payable at [mpca.ap@state.mn.us](file:///C:\Users\emurphy\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\Content.Outlook\26G46FFS\mpca.ap@state.mn.us).

**Note:** Documentation must include JPEG images and/or video of the following, with corresponding file names:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| A. | 1) | Side profile of vehicle | 4) | Chassis rails cut in half | 6) | Engine block, after hole |
|  | 2) | Vehicle identification number (VIN) | 5) | Engine block prior to hole | 7) | Others, as needed |
|  | 3) | Engine label (if possible) |  |  |  |  |
| B. | For DERA Off-road projects, please provide receipt for any components being sold from the equipment being destroyed. This income does not affect the grant award amount. | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Grantee name: |  | | Contract number: |  |
| MPCA Project Manager | |  | | |

**Vehicle information**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Vehicle owner name: | | |  | | | | |
| Mailing address: | | |  | | | | | |
| City: | |  | | | State: |  | Zip code: |  |

Old vehicle/chassis information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Make: |  | Vehicle ID number: |  | |
| Model: |  | Odometer reading: |  | miles |
| Year: |  |  |  | |

Old engine information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Make: |  | Horsepower: |  | |
| Model: |  | ID or serial number: | |  |
| Year: |  |  | |  |

Dismantler information

***By typing/signing my name below,*** *I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.*

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date vehicle accepted by dismantler (mm/dd/yyyy): |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | *(This document has been electronically signed.)* |  | | | |  | | |
| Address: | |  | | | | | | | |
| City: |  | | | | State: |  | Zip code: | |  |

Certification

I certify that within 90 days of replacement, the old engine and chassis (where applicable) have been permanently disabled. Disabling the engine consists of cutting or punching a three inch by three inch (3" x 3") hole in the engine block. Disabling the chassis consists of cutting completely through the frame/frame rails on each side of the vehicle/equipment at a point located between the front and rear axles. If other, pre-approved scrappage methods were used, details and documentation are attached. Photos of the disabled engine/chassis are required to be attached to this *Certificate of vehicle/engine destruction.*

***By typing/signing my name below,*** *I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.*

**Grantee authorized representative**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature: |  | Date engine/chassis disabled (mm/dd/yyyy): | |  |
|  | *(This document has been electronically signed.)* | Date signed (mm/dd/yyyy): |  | |