

**Attachment 2**

**CARL MOYER PROGRAM  
FISCAL YEAR 2010/2011 (YEAR 13) APPLICATION**  
**Application must be postmarked by December 27, 2010**

**1. APPLICANT DISTRICT**

District Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City/Zip Code \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

**2. CARL MOYER PROGRAM FUNDING REQUEST**

Check one box and enter amount, if applicable. District requests:

- Minimum allocation of \$200,000.
- Minimum allocation and authorizes the funds be designated to the Rural District Assistance Program.
- Tentative allocation ("Total Allocation" amount from Attachment 1) or greater amount if desiring additional funds if available:  
\$ \_\_\_\_\_
- District declines the funds for Year 13.

**3. DISTRICT MATCHING FUNDS**

**A. Total district matching funds (current or future projects) \$ \_\_\_\_\_**

**(a) Already committed to projects: \$ \_\_\_\_\_**

Attach a CARL Year 13 Query Tool Report (obtained after entering projects with Year 13 match funding information into the Carl Moyer Program Clean Air Reporting Log). Select your District name, Select **MY 13** as funding Year Start and End, Select **All** as Funding Source. Select **All** as Source Category.

**(b) District funds for future match:**

(1) Motor Vehicle Registration Fee Funds: \$ \_\_\_\_\_

(2) Other Funds for future match projects (specify funding type and amount):

\_\_\_\_\_ \$ \_\_\_\_\_  
Description of Fund

\_\_\_\_\_ \$ \_\_\_\_\_  
Description of Fund

(3) Total district funds for future match: \$ \_\_\_\_\_

**(c) In-kind administration (≤ 15 % total): \$ \_\_\_\_\_**

## Attachment 2

### 4. POLICY AND PROCEDURES MANUAL

Check box.

- Up-to-date version of the Policies and Procedures manual, based on current Carl Moyer Program Guidelines is maintained at the district's office.

### 5. BOARD RESOLUTION

Check one box and complete the date if applicable.

- This application has been duly approved and authorized by the district governing board, as specified in the attached resolution.
- This application is scheduled to go before the district board on \_\_\_\_\_  
Date

### 6. DISTRICT APCO/EO APPROVED SIGNATURE

To the best of my knowledge and belief, the information in this application is true and correct.

---

Signature of Air Pollution Control Officer

Printed/Typed Name

Date