

Date: ___ / ___ / ___.

Please return this form to Sharon Lemieux at slemieu@arb.ca.gov by fax at (626) 459-4480

FLEET INFORMATION FORM

Form is also available on-line at <http://www.arb.ca.gov/msprog/publicfleets/publicfleets.htm>

Agency Name: _____ Parent Company Name: _____ Carrier ID#: _____

Company Address: _____ City: _____

State: _____ Zip: _____

Contact Name: _____ Contact Title: _____

Tel: (____) _____ Fax: (____) _____ Email: _____

1. Are you a:

Private Fleet Government Fleet Government-Contracted Fleet

2. How would you describe your business or activity sector?

Trucking-Motor Carrier Trucking-Owner/Operator Agriculture

Commercial Construction Industrial

3. How many locations do you operate from? _____

4. In which California counties do you operate? _____

5. What is your on-road heavy-duty (8,500 lbs. GVWR and above) fleet size for all locations combined? _____

6. What is your off-road heavy-duty (50 HP and above) fleet size for all locations combined? _____

7. How do you typically acquire your equipment?

Purchase new Purchase used Lease Rent

8. Fill out the following table for each of your fleet locations

Terminal ID #	Address	City	State	Zip Code

9. Where do you refuel your equipment? Please check all that apply.

Fleet-owned Station Job-site Fueling Service (Wet-hosing) Retail/Truck Stop Other, Fill in: _____

10. Do you currently have access to Ultra Low Sulfur Diesel fuel (< 15ppm sulfur)?

Yes No

For ARB Use Only: Survey #: _____ Date Received: _____ Entered by: _____ Date Entered: _____

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11. What percentage of your vehicles/equipment operates solely in California and what percentage also operates outside of California?

Only within California: _____ % Also outside of California: _____ %

12. What would you consider as an incentive to retrofit your vehicles/equipment with low-emission devices before they are required? Please check all that apply.

Green image Government Grants Tax Incentives, Explain: _____ Other, Fill In: _____

Please fill out the table in accompanying file "ARB heavy-duty vehicle survey form.xls" with an entry for each vehicle/equipment in your fleet. See the next page for table header explanations. Please make copies as necessary.