STATE OF CALIFORNIA-OFFICE OF ADMINISTRATI  NOTICE PUBLICATION/F  STD. 400 (REV. 01-2013)  OAL FILE NUMBERS Z_2013-0827-	REGULATIONS SU REGULATORY AG 2014 -	CTION NUMBER		
RECEIVED FOR FILING PUBLICATION DATE  OFFICE OF MOMENISTRATIVE LA				Deling Briven  LESSA BOWEN  SPONETARY OF STATE
Office of Admini NOTICE AGENCY WITH RULEMAKING AUTHORITY AIR RESOURCES BOARD	strative Law	REGULATIONS	AGENCY FILE NUMBER (If any)	
A. PUBLICATION OF NOTICE  1. SUBJECT OF NOTICE  Zero Emission Vehicle Regular  3. NOTICE TYPE  Notice re Proposed  Regulatory Action  OAL USE  ACTION ON PROPOSED	4. AGENCY C	TITLE(S) 17 ONTACT PERSON	FIRST SECTION AFFECT 1962.1 TELEPHONE NUMBER 916-322-6533	September 6, 2013  FAX NUMBER (Optional) 916-322-3928
ONLY Approved as Submitted  B. SUBMISSION OF REGULA  1a. SUBJECT OF REGULATION(S)  Zero Emission Vehi	cle Regulation			IS RELATED OAL REGULATORY ACTION NUMBER(S)
2. SPECIFY CALIFORNIA CODE OF REGULATIONS:  SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)  TITLE(S) 13	AMEND 1962.1 and 1962.2 and the Incorporated Test Procedures  REPEAL			
3. TYPE OF FILING    X   Regular Rulemaking (Gov. Code §11346)   Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)   Emergency (Gov. Code, §11346.1(b))	below certifies that this a provisions of Gov. Code	ved or withdrawn	Emergency Readopt Code, §11346.1(h))  File & Print  Other (Specify)	(Gov. Changes Without Regulatory Effect (Cal. Code Regs., title 1, \$100) Print Only
4. ALL BEGINNING AND ENDING DATES OF AVAIL  April 3, 2014 — Apr  5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 1  Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))  6. CHECK IF THESE REGULATIONS REQUIDED TO THE STORY OF THE STORY OTHER STORY OF THE STORY	ABILITY OF MODIFIED REGULATIO  i 18 2014 a 1343.4, 11346.1(d); Cal. Code Regs  K Effective on filing Secretary of Stat  RE NOTICE TO, OR REVIEW, 0	NS AND/OR MATERIAL ADDED TO TO THE PROPERTY OF	— May 23, 201 Without Effective other (Specify)	ER AGENCY OR ENTITY State Fire Marshal
8. I certify that the attacher of the regulation(s) identification is true and correct, and to or a designee of the head SIGNATURE OF AGENCY HEAD OR DESIGNATURE OF AGENCY HEAD OR DESIGNATURE OF AGENCY HEAD OR DESIGNATURE	d copy of the regulati tified on this form, th hat I am the head of t I of the agency, and a	(916) 322–65 on(s) is a true and cor at the information sp the agency taking this mauthorized to make	rect copy ecified on this form s action, e this certification.	
TYPED NAME AND TITLE OF SIGNATORY  RICHARD W. Corey,				Office of Administrative Law