



## GRANT PROGRAMS

# ANNUAL USE REPORTING REQUIREMENTS

As stated in your Grant Contract, grant recipients must submit an annual use report for the term of the project. The report shall provide data on operation, such as annual hours operated, maintenance, and any other pertinent information requested by the Monterey Bay Air Resources District (District). The annual report is used to verify your grant funded engine(s) and / or equipment is in good working order and within the required annual hours of operation.

Annual Use Report Forms are also available on the District website at <https://www.mbard.org/diesel-engine-replacement-grants>.

Failing to submit a complete annual use report will result in non-compliance and will require an on-site inspection.

Please contact Hanna Muegge at 831-718-8021 if you have questions.

**Please return the completed Report**  
**to [hmuegge@mbard.org](mailto:hmuegge@mbard.org)**  
**by**  
**March 5, 2021.**

**Monterey Bay Air Resources District**  
**24580 Silver Cloud Court**  
**Monterey, California 93940**

## GRANTEE INFORMATION

Project Number:
Primary Contact Name:
Grantee Business / Organization Name:
Mailing Address:
City, State, Zip code:
Primary Contact Phone #:
E-Mail:

## Marine Vessel Information

Vessel Name:
Vessel Make, Model, Year:
Harbor location and slip number:

**\*\* ATTACH PHOTOS OF THE HOUR METER READING WITH THIS REPORT \*\***

<b>Engine #1:</b>	<b>Engine Type</b>	<input type="checkbox"/> Propulsion <input type="checkbox"/> Auxiliary
Engine Serial Number:		
<b>Current Hour Meter Reading:</b>	<b>Date:</b>	

<b>Engine #2:</b>	<b>Engine Type</b>	<input type="checkbox"/> Propulsion <input type="checkbox"/> Auxiliary
Engine Serial Number:		
<b>Current Hour Meter Reading:</b>	<b>Date:</b>	

### Please provide the following best estimates

% Operated in CA State Waters:	
% Operated in Monterey, San Benito, Santa Cruz Counties:	

Please provide a detailed description of issues/factors that may have lowered your Annual Usage from what was originally estimated at the time of application (i.e., bad season, medical problems, equipment problems, etc.)

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**Agreement and Signature**

I certify that the equipment purchased with this grant is still owned by the grantee listed in the contract and is in good operating condition.

I have been and will continue to operate the equipment in the jurisdiction of the District in accordance with the contract for this project. I have reviewed and certify that the provided information is current and accurate.

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Signature

Print Name

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Date