STATE OF CALIFORNIA CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY CALIFORNIA AIR RESOURCES BOARD

## TRUCRS FORM 224-AIRPORT SHUTTLE BUS VEHICLE INFORMATION FORM

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| TRUCRS ID:  | Compan     | Company Name:                            |  |
|---|------------|--|--|
| *MARK YOUR INTENT BELOW   |            |  |  |
| Check the box below to indicate intent behind submitting this form.   |            |  |  |
| ☐ Add a vehicle ☐ Update a previously reported vehicle  |            | Jpdate a previously reported vehicle     |  |
| Remove previously reported vehicle (must provide date of sale and odometer reading)  Date Sold* (mm/dd/yyyy):  Odometer Reading at time of sale*: |            |  |  |
| *FUEL TYPE (CHECK ONE)  |            |  |  |
| ☐ Diesel/Diesel Hybrid ☐ Alt Fuel (LPG/CNG/LNG) ☐ Battery Electric ☐ Fuel Cell  |            |  |  |
| *VEHICLE CLASS (GVWR)   |            |  |  |
| ☐ Class 2b (8,501 -10,000 lbs) ☐ Class 4 (1   | 4,001 – 16 | 6,000 lbs) Class 7 (26,001 – 33,000 lbs) |  |
| ☐ Class 3 (10,001 – 14,000 lbs) ☐ Class 5 (16,001 – 19,500 lbs) ☐ Class 8 (Over 33,000 lbs)   |            |  |  |
| Class 6 (19,501 – 26,000 lbs)  *VEHICLE INFORMATION   |            |  |  |
| VIN*: Your Own ID:  |            |  |  |
|   |            | -  |  |
| License Plate Number*:  |            | Date Purchased* (mm/dd/yyyy):            |  |
| Registration Type* (Check one):   |            | State of Registration*:                  |  |
| ☐ Annual       ☐ Monthly       ☐ SE       ☐ IRP         Vehicle Model Year*:       Vehicle Model:   |            | Vehicle Manufacturer*:                   |  |
|   |            |  |  |
| *If vehicle was obtained with public funding, provide contract dates below:  Contract Begin Date:  Contract End Date:                             |            |  |  |
|   |            |  |  |
| DIESEL/ALT FUEL ENGINE (ONLY)   |            |  |  |
| Engine Model Year*: Engine Family   | y Name*:   | Engine Manufacturer*:                    |  |
| ZERO EMISSION VEHICLE (ZEV ONLY)  |            |  |  |
| Vehicle Family Name*:   |            |  |  |
| SIGNATURE   |            |  |  |
| I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.                              |            |  |  |
| Print Name of Responsible Official*:  |            | Telephone Number*:                       |  |
| Signature of Responsible Official*:   |            | Date* (mm/dd/yyyy):                      |  |

<sup>\*</sup>Required fields. Incomplete forms will be rejected.

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## INFORMATION FOR COMPLETING AND SUBMITTING THIS FORM

If you are reporting online, DO NOT submit hard copy forms.

You will not have a TRUCRS ID if this is your first time reporting vehicles in the system. An ID will be assigned after all required information is entered into TRUCRS. If the fleet has previously reported, please indicate your TRUCRS ID in the space provided at the top of the form.

California Air Resources Board (CARB) staff will input all information submitted on paper forms into the online reporting system on the fleets' behalf. Once all information is correctly entered into the online reporting system, compliant fleets will immediately be able to print a Certificate of Compliance and be able to manage the fleet information directly online. The User Guide, with instructions on how to navigate the TRUCRS reporting system, can be accessed through the login page. The TRUCRS reporting site can be accessed on the CARB website at: https://ssl.arb.ca.gov/trucrs\_reporting/login.php.

For every vehicle subject to the Airport Shuttle regulation, a TRUCRS Form 224 "Airport Shuttle Information Form" must be completed. Include your TRUCRS ID in the space provided and indicate the reason the form is being submitted - adding, updating, or removing a vehicle.

**NOTE:** If you do not complete all required fields and sign the form(s), your application will be considered incomplete and sent back.

For assistance completing the reporting forms you may contact CARB's hotline by calling (866) 634-3735. You may submit electronic versions (scanned or pictures) of the paper form(s) via email to <a href="mailto:trucrs@arb.ca.gov">trucrs@arb.ca.gov</a>.