

## Category I – Consolidation of Existing Executive Orders

A manufacturer can request the California Air Resources Board (CARB) to consolidate its previously issued exemption Executive Orders (EO) into a newly issued exemption Executive Order. A new exemption Executive Order will be issued when all of the following criteria are met:

- 1. Device name is the same on all exemption Executive Orders to be consolidated.
- 2. Applicable OEM is the same on all exemption Executive Orders, except when combined under the same test group or engine family, to be consolidated.
- 3. Device description is the same on all exemption Executive Orders to be consolidated.
- 4. All information provided associated with the exemption application as approved by the Executive Officer is still applicable to the device(s) to be consolidated.

If the submitted application is outside the scope of this application form, the application will be redirected by the Executive Officer to an appropriate category. A written response will be sent to the manufacturer detailing why the submitted application does not qualify for this requested category and if additional information is needed to continue the evaluation process.

## **APPLICANT INFORMATION**

Name of Device Manufacturer with design control:						
Device Name:						
Device Name.						
Name of Authorized Device Mar	ufacturer Contac	t:				
Mailing Address:						
City:	State:		Zip Code:			
Oity.	Oldio.		2.6 0000.			
Telephone Number:		Email Address:				
Name of Authorized Representa	tive (if different fr	om above):				
Mailing Address:						
City:	State:		Zip Code:			
City.	State.		Zip Code.			
Telephone Number:		Email Address:				

Order(s)

# Category I – Consolidation Checklist

|--|

1.	The	e applicat	tion seeks	s consoli	dation of	existing	Executive Ord	ders.				
	Ye	s [ ] No	Ш									
2.	. Device name is the same on all exemption Executive Orders to be consolidated.  Yes [ ] No [ ]											
3.	. Applicable OEM is the same on all exemption Executive Orders, except when combined under the same test group or engine family, to be consolidated.  Yes [ ] No [ ]											
4.	Device description is the same on all exemption Executive Orders to be consolidated.  Yes [ ] No [ ]											
5.	<ol> <li>All information provided associated with the exemption application as approved by the Executive Officer is still applicable to the device(s) to be consolidated.</li> <li>Yes [ ] No [ ]</li> </ol>											
6.	6. There has been no change to the fit, function, and/or design of the device, part, or modification? Yes [ ] No [ ]											
		VEHICLE	E/ENGINE	COVE	RAGE, A	S TO BE	E LISTED ON	NEW ISSUED	EO			
					(Attach a	applicabl	e file)					
	Provide a list of applicable vehicle(s) or engine(s) in the format specified below using Excel.											
Devi Nan		*Existing EO#	Part Number	Vehicle Make	Vehicle Model	Model Year(s)	Engine Displacement	Test Group information if listed on original Exemption Executive Order(s)	Evaporative Family information if listed on original Exemption Executive			

<sup>\*</sup> Will not be listed on new EO.

## **REQUESTED INFORMATION**

10 6	the care care steview of this submitted application, please provide the following.							
	xemption Executive Order number(s) applicable to this consolidation request. List em below:							
	ocumentation demonstrating that the consolidation will retain the same device esign, fit, and function as those which are currently exempted.							
	<ol> <li>Facsimile of the product information label. Labeling requirements can be found here under Section VIII (Insert hyperlink to exemption procedures).</li> </ol>							
	REQUEST FOR SAMPLE							
return is	CARB may require one or more devices for evaluation. Device(s) will be returned only if a return is requested at the time the device(s) is submitted. Do you agree to provide the device(s) free of costs?   Yes  No							
	SIGNATURE							
my know regulated engine w control c	In the information provided is true, accurate, and complete, and that to the best of vieldge installation of the device on a covered vehicle or engine will not cause differently demissions to increase beyond the certification standards to which the vehicle or was certified, including any noxious or toxic matter, and will not cause emission omponents and OBD to function differently than as designed by the vehicle or nanufacturer.							
☐ I understand that I shall not: 1. Use the Executive Order as an endorsement or approval by CARB, 2. Market the device(s) using any identification other than that shown on the Executive Order, 3. Apply the Executive Order to parts sold prior to the date shown on the Executive Order, 4. Market the device(s) for an application other than those listed on the Executive Order, 5. Offer for sale, or advertise any component of an applicable kit as an individual device, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, offer for sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior to or concurrent with transfer to an ultimate purchaser.								
by CARE Executive Executive Executive individual offer for s	3, 2. Market the device(s) using any identification other than that shown on the e Order, 3. Apply the Executive Order to parts sold prior to the date shown on the e Order, 4. Market the device(s) for an application other than those listed on the e Order, 5. Offer for sale, or advertise any component of an applicable kit as an Idevice, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior							
by CARE Executive Executive Executive individua offer for secon	3, 2. Market the device(s) using any identification other than that shown on the e Order, 3. Apply the Executive Order to parts sold prior to the date shown on the e Order, 4. Market the device(s) for an application other than those listed on the e Order, 5. Offer for sale, or advertise any component of an applicable kit as an Idevice, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior							

## INSTRUCTIONS FOR SUBMITTING THIS FORM

Please submit to: (insert email address). A received receipt email will be automatically sent to the sender's email account.

For questions regarding this form, please contact (insert email address)

A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.

## **PRIVACY STATEMENT**

Under the California Public Records Act (Gov. Code, § 6250 et seq.), your submissions, including associated contact information (e.g., your address, phone, email, etc.) become public records and may be released to the public upon request. Personal information will be protected from disclosure as required by law, including under the Information Practices Act (Cal. Civ. Code, § 1798, et seq.). Information that is claimed to be confidential should be submitted as provided in CARB's regulations for submitting confidential data, California Code of Regulations, title 17, section 91011.



## Category I – Model-Year Additions on Carryover Vehicle(s) or Engine(s)

A manufacturer can request the California Air Resources Board (CARB) to update its previously issued exemption Executive Order (EO) with additional model-years. The Executive Officer shall grant the request upon determining that the findings leading to the initial exemption Executive Order approval are valid for the added model years. A new exemption Executive Order will be issued without the need of additional testing. New part numbers can be assigned to the model-year additions only.

If the submitted application is outside the scope of this application form, the application will be redirected by the Executive Officer to an appropriate category. A written response will be sent to the manufacturer detailing why the submitted application does not qualify for this requested category and if additional information is needed to continue the evaluation process.

## **APPLICANT INFORMATION**

Name of Device Manufacturer with design control:							
Device Name:							
Name of Authorized Device Man	Name of Authorized Device Manufacturer Contact:						
Mailing Address:							
City:	State:		Zip Code:				
Telephone Number:		Email Address:					
Name of Authorized Representa	tive (if different fr	om above):					
Mailing Address:							
City:	State:		Zip Code:				
Telephone Number:		Email Address:					

Order(s)

# Category I – Model-Year Additions Checklist

	1.	The	e applicati	on seeks	s Model-Y	ear Additi	ons¹ on Carryo	over Vehicle(s)	or Engine(s).
								Y	es [ ] No [ ]
The requested vehicle <b>models</b> are covered under an existing EO. Yes [_] Note i. Existing EO Number(s):							es [ ] No [ ]		
	3. The part/device has the same design, fit, and function.  Yes [ ] No [ ]								
	If all the above answers in items 1-3 are Yes, proceed with submitting the application. If any answer is No, this is not a Category I application and you must select the appropriate Category from Categories II through IX.								
fi	¹Æ irst.	Addit	ional part	numbers	s are also	allowed,	but application	must meet othe	er requirements
_		V	EHICLE/	ENGINE	COVERA	AGE, AS 1	TO BE LISTED	ON NEW ISSU	JED EO
					(A	Attach app	licable file)		
		rovid xcel		f applicab	ole vehicle	e(s) or eng	gine(s) in the fo	ormat specified l	oelow using
	Dev Nan		Part Number	Vehicle Make	Vehicle Model	Model Year(s)	Engine Displacement	Engine Test Group information on new additions and only if listed on original Exemption Executive Order(s)	Evaporative Family information on new additions and only if listed on original Exemption Executive

Highlight or identify new model-year additions.

If applicable, provide a list of <u>excluded models/configurations</u> that are within the scope of requested new vehicle or engine coverage.

## **REQUESTED INFORMATION**

To expedite CARB's review of this submitted application, please provide the following:

- Documentation demonstrating that the added model-year(s) will retain the same device design (excluding exterior appearances such as color), fit, and function as those which are currently exempted.
- 2. Justification for the carryover request. Provide engineering analysis and/or documentation addressing model-year additions as they pertain to:
  - a. Applicable emission standards and certification levels.
  - b. Prior worst case vehicle(s) or engine(s) tested.
  - c. Other information used in prior exemption Executive Order(s) that may support this request.
  - d. If the emissions control system has changed, how will the emissions be negatively impacted for the requested additional model years.
- 3. Facsimile of the product information label. Labeling requirements can be found here under Section VIII (Insert hyperlink to exemption procedures).

## REQUEST FOR SAMPLE

CARB may require one or more devices for evaluation. Device(s) will be returned only if a return is requested at the time the device(s) is submitted. Do you agree to provide the device(s) free of costs?   Yes   No
SIGNATURE
☐ I affirm the information provided is true, accurate, and complete, and that to the best of my knowledge installation of the device on a covered vehicle or engine will not cause regulated emissions to increase beyond the certification standards to which the vehicle or engine was certified, including any noxious or toxic matter, and will not cause emission control components and OBD to function differently than as designed by the vehicle or engine manufacturer.
□ I understand that I shall not: 1. Use the Executive Order as an endorsement or approval by CARB, 2. Market the device(s) using any identification other than that shown on the Executive Order, 3. Apply the Executive Order to parts sold prior to the date shown on the Executive Order, 4. Market the device(s) for an application other than those listed on the Executive Order, 5. Offer for sale, or advertise any component of an applicable kit as an individual device, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, offer for sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior to or concurrent with transfer to an ultimate purchaser.

Signature (authorized device manufacturer contact):	Date of Signature:

## INSTRUCTIONS FOR SUBMITTING THIS FORM

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For questions regarding this form, please contact (insert email address)

A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.

### PRIVACY STATEMENT

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## Category I – Part Number(s) or Name Change(s)

A manufacturer can request the California Air Resources Board (CARB) to update its previously issued exemption Executive Order (EO) to either add part numbers or make a name change. A new exemption Executive Order will be issued upon determination that the manufacturer's requested part number additions or name change has met the basis of the existing exemption Executive Order. A new exemption Executive Order will be issued on the basis of similarity without the need for additional testing.

If the submitted application is outside the scope of this application form, the application will be redirected by the Executive Officer to an appropriate category. A written response will be sent to the manufacturer detailing why the submitted application does not qualify for this requested category and if additional information is needed to continue the evaluation process.

## **APPLICANT INFORMATION**

74.1 2107411 1111 014111711071							
Name of Device Manufacturer with design control:							
Device Name:							
Name of Authorized Device Man	ufacturer Contac	t					
Mailing Address:							
City:	State:		Zip Code:				
Telephone Number:		Email Address:					
Name of Authorized Representa	tive (if different fr	om above):					
Mailing Address:							
City:	State:		Zip Code:				
Telephone Number:		Email Address:					

Category I Part Number(s) or Name Change(s) Checklist

Please confirm that you are requesting the following:

	r age 2 or 3						
1.	The application seeks additional Part Number(s) or Name Change(s).Yes [ ] No [ ]						
2.	The requested coverage is already on an existing EO and is identical except for device						
	name or part number. Yes [ ] No [ ]						
3.	There has been no change to the fit, function, and/or design of the device, part, or						
	modification, excluding cosmetic changes? Yes [ ] No [ ]						
RE	UESTED VEHICLE/ENGINE COVERAGE, AS TO BE LISTED ON NEW ISSUED EO						
	(Attach applicable file)						
	Provide a list of applicable vehicle(s) or engine(s) in the format specified below using Excel. Fill in applicable columns.						
	Test Group Evaporative						

*Existing Device Name	New Device Name	*Existing Part Number	New Part Number	Vehicle Make	Vehicle Model	Model Year(s)	Engine Displacement	Test Group information if only listed on original Exemption Executive Order(s)	Evaporative Family information if only listed on original Exemption Executive Order(s)
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<sup>\*</sup> Will not be listed on new EO.

## REQUESTED INFORMATION

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	CAPCUILC		I C V I C VV		Jubilittoa	application,	picasc	provide trie	TOTIO WILLIA

<ol> <li>Exemption Executive Order number applicable to this reques</li> </ol>
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- a. \_\_\_\_\_
- 2. Documentation demonstrating that the added part numbers or name change will retain the same device design (excluding exterior appearances such as color), fit, and function as those which are currently exempted.
- 3. Facsimile of the product information label with the new part number or product name. Labeling requirements can be found here under Section VIII (Insert hyperlink to exemption procedures).

## **REQUEST FOR SAMPLE**

CARB may require one or more devices for evaluation. Device(s) will be returned only if a return is requested at the time the device(s) is submitted. Do you agree to provide the device(s) free of costs?   No
SIGNATURE
☐ I affirm the information provided is true, accurate, and complete, and that to the best of my knowledge installation of the device on a covered vehicle or engine will not cause regulated emissions to increase beyond the certification standards to which the vehicle or engine was certified, including any noxious or toxic matter, and will not cause emission control components and OBD to function differently than as designed by the vehicle or engine manufacturer.
I understand that I shall not: 1. Use the Executive Order as an endorsement or approval by CARB, 2. Market the device(s) using any identification other than that shown on the Executive Order, 3. Apply the Executive Order to parts sold prior to the date shown on the Executive Order, 4. Market the device(s) for an application other than those listed on the Executive Order, 5. Offer for sale, or advertise any component of an applicable kit as an individual device, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, offer for sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior to or concurrent with transfer to an ultimate purchaser.
Signature (authorized device manufacturer contact): Date of Signature:
INSTRUCTIONS FOR SUBMITTING THIS FORM
Please submit to: (insert email address). A received receipt email will be automatically sent to the sender's email account.
For questions regarding this form, please contact (insert email address)
A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.
PRIVACY STATEMENT

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## Category I – Private Label(s) or Extending Coverage to Subsidiaries

A manufacturer can request the California Air Resources Board (CARB) to extend all or part of its previously issued exemption Executive Order(s) (EO) to another manufacturer or to its own subsidiaries. A manufacturer may request either a new Executive Order to be issued to this "marketing manufacturer" or a new Executive Order to be issued with the added marketing manufacturer listed in the Executive Order. The following criteria must be met:

- 1. Requesting manufacturer maintains design control.
- 2. Part(s) are identical in design (excluding exterior appearances, such as color), fit, and function to those currently exempted.

Private label(s) and subsidiaries can use different marketing names and part numbers for this request, but cannot make modifications to the applicable vehicle or engine list. The manufacturer with design control maintains all responsibility for emissions compliance.

If the submitted application is outside the scope of this application form, the application will be redirected by the Executive Officer to an appropriate category. A written response will be sent to the manufacturer detailing why the submitted application does not qualify for this requested category and if additional information is needed to continue the evaluation process.

## APPLICANT INFORMATION

Name of Device Manufacturer with design control:							
Device Name:	Device Name:						
Name of Authorized Device Man	ufacturer Contac	t:					
Mailing Address:							
City:	State:		Zip Code:				
Telephone Number:	Email Address						
Name of Authorized Representative (if different from above):							
Mailing Address:							
City:	State: Zip Code:		Zip Code:				
Telephone Number:		Email Address:					

## **MARKETING MANUFACTURER INFORMATION (Repeat for Each Marketer)**

Name of marketing manufacture	r:			
Device Name:				
Mailing Address:				
City:	State:		Zip Code:	
Telephone Number:		Email Address:		
Name of Authorized Representa	tive:			
Mailing Address:				
City:	State:		Zip Code:	
Telephone Number:		Email Address:		
Category I – Private Lab	el(s) or Extend	ing Coverage t	to Subsidiar	ries Checklist
Please confirm the following:				
The application seeks I	Private Label(s)	or Extending C	overage to S	Subsidiaries.
				Yes [ ] No [ ]
2. Requesting manufactur	rer maintains de	esign control.		Yes [ ] No [ ]
3. Part(s) are identical in	design (excludir	ng exterior appe	earances, suc	ch as color), fit,
and function to those c	urrently exempt	ed.		Yes [ ] No [ ]
4. The requested vehicle	coverage is alre	eady on an exist	ting EO.	Yes [ ] No [ ]

REQUESTED VEHICLE/ENGINE COVERAGE, AS TO BE LISTED ON NEW ISSUED EO (Repeat for Each Marketer if Applicable)

(Attach applicable file)

Provide a list of applicable vehicle(s) or engine(s) in the format specified below using Excel. Fill in applicable columns.

*Existing Device Name	New Device Name	*Existing EO #	*Existing Part Number	New Part Number	Vehicle Make	Vehicle Model	Model Year(s)	Engine Displacement	Test Group information if listed on original Exemption Executive Order(s)	Evaporative Family information if listed on original Exemption Executive Order(s)
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* Will not be listed on new EO.				
REQUESTED INFORMATION				
To expedite CARB's review of this submitted application, please provide the following:				
Exemption Executive Order number(s) applicable to this request.     a				
2. Statement attesting that the requesting manufacturer maintains design control.				
<ol> <li>Documentation demonstrating that the part(s)/device will retain the same device design (excluding exterior appearances such as color), fit, and function as those which are currently exempted.</li> </ol>				
4. All installation instructions for the covered part(s) or kit(s).				
<ol> <li>Facsimile of the product information label for each secondary marketer. Labeling requirements can be found here under Section VIII (Insert hyperlink to exemption procedures).</li> </ol>				
6. Recipient of the new Executive Order, please check appropriate box:				
<ul> <li>Marketing manufacturer, or</li> <li>Requesting manufacturer with the marketing manufacturer added to the Executive Order</li> </ul>				
REQUEST FOR SAMPLE				
CARB may require one or more devices for evaluation. Device(s) will be returned only if a return is requested at the time the device(s) is submitted. Do you agree to provide the device(s) free of costs?   Yes  No				
SIGNATURE				

☐I affirm the information provided is true, accurate, and complete, and that to the best of my knowledge installation of the device on a covered vehicle or engine will not cause regulated emissions to increase beyond the certification standards to which the vehicle or engine was certified, including any noxious or toxic matter, and will not cause emission

control components and OBD to function different engine manufacturer.	ntly than as designed by the vehicle or
□ I understand that I shall not: 1. Use the Executive CARB, 2. Market the device(s) using any ider Executive Order, 3. Apply the Executive Order to Executive Order, 4. Market the device(s) for an a Executive Order, 5. Offer for sale, or advertise a individual device, 6. Advertise the product as calloffer for sale, sell, or install the device on a moto to or concurrent with transfer to an ultimate purc	ntification other than that shown on the parts sold prior to the date shown on the application other than those listed on the any component of an applicable kit as an pable of reducing emissions, or 7. Advertise, or vehicle, except on-road motorcycle, prior
Signature (authorized device manufacturer contact):	Date of Signature:
INSTRUCTIONS FOR SUE	BMITTING THIS FORM

Please submit to: (insert email address). A received receipt email will be automatically sent to the sender's email account.

For questions regarding this form, please contact (insert email address)

A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.

### PRIVACY STATEMENT

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## Category II – Air Intake Kits or Modifications

Air Intake kits or modifications made to the stock air intake system that are not applicable to Category VIII and include no other parts or modifications for proper installation. Category IX should be selected for the application if other parts or modifications are included.

### APPLICANT INFORMATION

Name of Device Manufacturer with design control:					
Device Name:					
Name of Authorized Device Man	ufacturer Contac	t:			
Mailing Address:					
City:	State:		Zip Code:		
Telephone Number:		Email Address:			
Name of Authorized Representative (if different from above):					
Mailing Address:					
City:	State:		Zip Code:		
Telephone Number:		Email Address:			

## **APPLICATION REQUIREMENTS**

- 1. Vehicle coverage list must be:
  - a. Single original equipment vehicle/engine manufacturer
  - b. Same vehicle class unless combined under same engine test group
  - c. Same engine configuration (e.g., I4, V6, V8, method of aspiration)
  - d. Same fuel type (flex-fuel may be included with gasoline)

- e. Same emissions control technology (grouping patterns follow those of On-Road New Vehicle or Engine Certification Executive Orders).
- f. Same emission standards (e.g., LEV III ULEV 125 and LEV III ULEV 30 are unique emission standards).
- 2. List of part numbers assigned by the manufacturer for each unique design or modification.
- 3. For each part number, step-by-step installation instructions with associated parts list and diagrams/pictures/schematics for proper installation of each part number. Installation instructions that represent more than one part number must have all applicable part numbers clearly presented in the instructions, along with applicable vehicles covered.
- 4. Detailed description of the device to assist CARB staff in understanding its operation, including technical operating principles, dimensional drawings, schematics, material specifications, and impacts to performance, fuel economy, drivability, emission control components, OBD, and emissions. Manufacturers shall include impacts to any affected OEM parts, components or systems, identified by part name and number
- 5. A facsimile of the exemption label (see Section VIII of the Procedures for labeling requirements). Manufacturers with a previously issued exemption Executive Order must include an actual physical label with the first application submission of each calendar year.

## **APPLICATION REQUESTS**

- 1. Sample device (if requested by the Executive Officer).
- 2. Independent laboratory report (in the format as detailed in Section V(e) of the Procedures) from emissions and OBD II testing, if previously completed.

## **VEHICLE/ENGINE COVERAGE LIST\***

(attach applicable file)

Please provide a spreadsheet (in Excel), with all vehicle(s) or engine(s) coverage information. File name should identify vehicle list according to requirements outlined above in item 1 as follows: Mfr\_Device\_OEM\_Class\_Engine-Config.\_Fuel Type\_Emissions Std

For example: Air-Intake-Maker\_Super-Flow\_Ford\_LDT\_V6-TC\_Gas\_LEV3ULEV70

	Model Year Model		Engine Size	Test Group	Evaporative Family	New Vehicle Cert. EO #
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\*If applicable, provide a list of <u>excluded models/configurations</u> that are within the scope of requested vehicle or engine coverage.

### **INSTALLATION INSTRUCTIONS**

(Submit all applicable installation instructions)	
Total number of uploaded or attached installation instruction files:	

### **DETAILED DEVICE DESCRIPTION**

(Insert text or attach a separate document for device description)

For each unique design or modification:

- Include color pictures of all components with size dimensions
- Material specifications for all components
- If the stock system contains any sensor(s), specify the sensor function, and provide comparison pictures of the stock and modified part(s) which contain the impacted sensor(s).

The following questions regarding your modification(s) will help CARB staff evaluate your device as it relates to the evaporative systems. Please answer, in specific detail, each response.

- 1. Does the OEM system contain a hydrocarbon trap (HCT)? If yes, proceed to question 1(a), if no, proceed to question 2.
  - a. Is the OEM HCT retained? Yes [ ] No [ ] If yes, proceed to 1(b), if no, proceed to question 1(c)-(e).
  - b. If the OEM HCT is retained, explain how OEM HCT is incorporated to the new air intake system. Provide methodology of affixing the HCT to the air intake, supplying pictures or drawings to compare original and new HCT location.
  - c. If the OEM HCT is replaced: Compare modified HCT to OEM HCT. Provide material and dimension specifications, HCT location, methodology of affixing the HCT to the air intake and durability data. Supply pictures or drawings for clarification.
  - d. If replacing the OEM HCT, it must be replaced with one with demonstrated evaporative emissions and mechanical durability performance of 150,000 miles or 10 years.
  - e. If replacing the OEM HCT, how will 150,000 mile evaporative emission durability and mechanical durability be demonstrated?

- 2. Are vehicle(s) or engine(s) listed in vehicle coverage application list certified to "the optional zero fuel evaporative emissions standard" (e.g. 0.35/0.40 diunal PC/LDT standards) LEV III evaporative emission standards? If yes, proceed to question 2(a)
  - a. Explain in detail, how, the tube/component design of the stock system is designed to retain evaporative emissions.
  - b. If the stock system is designed to retain evaporative emissions without the use of a hydrocarbon trap, how is your kit or modification designed to maintain the intent of the original equipment design.

the original equipment design.
EMISSIONS EVALUATION CRITERIA *
* Explanation of Evaluation Criteria can be found here (Insert hyperlink).
Evaluation Criteria (Check One):
☐Emission Standards ☐Comparison to Baseline Emission Levels
LABELING REQUIREMENTS *
* Explanation of labeling requirements can be found here (Insert hyperlink).
(Submit facsimile of an exemption label)
(Submit material and lettering specifications for label)
REQUEST FOR SAMPLE
CARB may require one or more devices for evaluation. Device(s) will be returned only if a return is requested at the time the device(s) is submitted. Do you agree to provide the device(s) free of costs?   No
SIGNATURE

☐ I affirm the information provided is true, accurate, and complete, and that to the best of my knowledge installation of the device on a covered vehicle or engine will not cause regulated emissions to increase beyond the certification standards to which the vehicle or engine was certified, including any noxious or toxic matter, and will not cause emission control components and OBD to function differently than as designed by the vehicle or engine manufacturer.
I understand that I shall not: 1. Use the Executive Order as an endorsement or approval by CARB, 2. Market the device(s) using any identification other than that shown on the Executive Order, 3. Apply the Executive Order to parts sold prior to the date shown on the Executive Order, 4. Market the device(s) for an application other than those listed on the Executive Order, 5. Offer for sale, or advertise any component of an applicable kit as an individual device, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, offer for sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior to or concurrent with transfer to an ultimate purchaser.
Signature (authorized device manufacturer contact): Date of Signature:

## INSTRUCTIONS FOR SUBMITTING THIS FORM

Please submit to: (insert email address). A received receipt email will be automatically sent to the sender's email account.

For questions regarding this form, please contact (insert email address)

A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.

### PRIVACY STATEMENT

Under the California Public Records Act (Gov. Code, § 6250 et seq.), your submissions, including associated contact information (e.g., your address, phone, email, etc.) become public records and may be released to the public upon request. Personal information will be protected from disclosure as required by law, including under the Information Practices Act (Cal. Civ. Code, § 1798, et seq.). Information that is claimed to be confidential should be submitted as provided in CARB's regulations for submitting confidential data, California Code of Regulations, title 17, section 91011.



# Category III – Engine Control Module (ECM) Programmers and/or ECM Signal Modifications

New ECM calibrations and/or ECM signal modifications that include no other parts or modifications for proper installation. Category IX should be selected for the application if other parts or modifications are included.

## **APPLICANT INFORMATION**

Name of Device Manufacturer with design control:						
Device Name:	Device Name:					
Name of Authorized Device Man	ufacturer Contac	t:				
Mailing Address:						
City:	State:		Zip Code:			
Telephone Number:		Email Address:				
Name of Authorized Representative (if different from above):						
Mailing Address:						
City:	State:		Zip Code:			
Telephone Number:		Email Address:				

## **APPLICATION REQUIREMENTS**

- 1. Vehicle coverage list must be:
  - a. Single original equipment vehicle/engine manufacturer
  - b. Same vehicle class unless combined under same engine test group
  - c. Same engine configuration (e.g., I4, V6, V8, method of aspiration)

- d. Same fuel type (flex-fuel may be included with gasoline)
- e. Same emissions control technology (grouping patterns follow those of On-Road New Vehicle or Engine Certification Executive Orders).
- f. Same emission standards (e.g., LEV III ULEV 125 and LEV III ULEV 30 are unique emission standards).
- 2. List of part numbers assigned by the manufacturer for each unique calibration (calibration number(s) and/or unique calibration identifier(s)).
- 3. For each part number, step-by-step installation instructions with associated parts list and diagrams/pictures/schematics for proper installation of each part number. Installation instructions that represent more than one part number must have all applicable part numbers clearly presented in the instructions, along with applicable vehicles covered.
- 4. Detailed description of the device to assist CARB staff in understanding its operation, including technical operating principles, dimensional drawings, schematics, material specifications, and impacts to performance, fuel economy, drivability, emission control components, OBD, and emissions. Manufacturers shall include impacts to any affected OEM parts, components or systems, identified by part name and number
- 5. A facsimile of the exemption label (see Section VIII of the Procedures for labeling requirements). Manufacturers with a previously issued exemption Executive Order must include an actual physical label with the first application submission of each calendar year.
- 6. A plan to collect vehicle identification numbers (VIN) from purchaser's vehicles for any device that modifies a stock engine, body, or transmission control module's software, excluding speedometer and/or wheel speed adjusters.

## **APPLICATION REQUESTS**

- 1. Sample device (if requested by the Executive Officer).
- 2. Independent laboratory report (in the format as detailed in Section V(e) of the Procedures) from emissions and OBD II testing, if previously completed.
- 3. Stock and modified maximum horsepower graphs. If vehicle is equipped with a supercharger or turbocharger, include stock and modified maximum boost pressure graphs.

### **VEHICLE/ENGINE COVERAGE LIST\***

(attach applicable file)

Please provide a spreadsheet (in Excel) with all of the vehicle(s) or engine(s) coverage information. File name should identify vehicle list according to requirements outlined above in item 1 as follows: Mfr\_Device\_OEM\_Class\_Engine-Config.\_Fuel Type\_Emissions Std

For example: Tuner-Maker\_Super-Tuner\_Ford\_LDT\_V6-TC\_Gas\_LEV3ULEV70

							New	Performance
Part	Calibration	Model	0.4  -	Engine	Test	Evaporative	Vehicle	Impact
Number	Number/	Year	Model	Size	Group	Family	Cert. EO	(i.e. HP, TQ,
	Identifier						#	and/or Boost)

<sup>\*</sup>If applicable, provide a list of <u>excluded models/configurations</u> that are within the scope of requested vehicle or engine coverage.

## **INSTALLATION INSTRUCTIONS**

(	<b>Submit</b>	all a	applicab	le insta	Illation	instru	ctions
١		٠ د	~ P P O O. N				01.00

Total number of u	ploaded or attached	installation instruct	ion files:

## **DETAILED DEVICE DESCRIPTION**

(Insert text or attach a separate document for device description)

Include all technical operating principles, dimensional drawings, electrical schematics, material specifications, and impacts to performance, fuel economy, drivability, and emissions for the following affected parts, components, and/or systems (if applicable).

- ECM parameters (e.g. fuel tables, lambda tables, ignition advance/retard, parameters sensed/controlled, and/or adjustable settings)
- Transmission Control Module (TCM) parameters (e.g. shift points, shift pressure)
- Sensors (i.e. signal modifications, location, and/or functionality)

The following questions in regards to your device's modification(s) will help CARB staff evaluate your device. Please answer, in specific detail, each response.

- 1. Identify all parameters being sensed and engine parameters or components being controlled by your device. Attach a table and/or spreadsheet to support your explanation with the following:
  - a. Include all Parameters Sensed and Parameters Controlled.

- b. Explain how and to what degree these parameters/components are being controlled and/or modified.
- c. Describe the conditions under which these parameter changes are active.
- 2. Submit calibration tables and/or lookup tables for all of the parameters being modified by your device (e.g. fuel, ignition timing, boost pressure, volumetric efficiency, air/fuel target ratios, etc.). You may attach these, formatted as electronic spreadsheets, diagrams, and/or photos.
- 3. Explain in technical and quantitative terms how your device affects performance, fuel economy, and emissions during the following operating conditions:
  - a. Low load (e.g. highway cruise speeds, coasting)
  - b. High load (e.g. hard acceleration, towing)
  - c. Cold start (i.e. below normal operating temperature)
  - d. Idle speeds
  - e. Rapid-throttle motion (also explain fuel enrichment in terms of percentage), or percentage gain in signal voltage(s), etc.)
  - f. Wide-open throttle (also explain fuel enrichment in terms of percentage), or percentage gain in signal voltage(s), etc.)
- 4. Identify any and all changes made to ECU programming that are outside any emissions test cycles (e.g. FTP, SFTP). Be sure to quantify (e.g. percentage) any change to the vehicle's performance, fuel economy, and emissions when compared to stock configuration.
- 5. Identify all operating conditions where your device command open loop operation, turn off any emission control components, or turn off OEM designated engine derates (power reductions).
- 6. Describe the effects your device's modifications could have on the durability of the engine and any of its emission control components?
- 7. Describe the effects your device's modifications could have on vehicle drivability?
- 8. Include comparative (baseline vs. modified) maximum horsepower and/or torque test results for any of the included vehicles.
- 9. Disclose if your device's ECU modification utilizes multiple calibration mapping (i.e. user selectable recalibrations). If more than one calibration map is being utilized, please elaborate on the major differences between each map. For each additional map, address all above items.
- 10. Describe any modifications that have been made to any OBDII diagnostics (monitors or DTCs).

# **EMISSIONS EVALUATION CRITERIA \***

* Explanation of Evaluation Criteria can be found here (Insert hyperlink).			
Evaluation Criteria (Check One):			
☐Emission Standards ☐Comparison to Baseline Emission Levels			
LABELING REQUIREMENTS *			
* Explanation of labeling requirements can be found here (Insert hyperlink).			
(Submit facsimile of an exemption label)			
(Submit material and lettering specifications for label)			
REQUEST FOR SAMPLE			
CARB may require one or more devices for evaluation. Device(s) will be returned only if a return is requested at the time the device(s) is submitted. Do you agree to provide the device(s) free of costs?   No			
SIGNATURE			
☐ I affirm the information provided is true, accurate, and complete, and that to the best of my knowledge installation of the device on a covered vehicle or engine will not cause regulated emissions to increase beyond the certification standards to which the vehicle or engine was certified, including any noxious or toxic matter, and will not cause emission control components and OBD to function differently than as designed by the vehicle or engine manufacturer.			
☐ I understand that I shall not: 1. Use the Executive Order as an endorsement or approval by CARB, 2. Market the device(s) using any identification other than that shown on the Executive Order, 3. Apply the Executive Order to parts sold prior to the date shown on the Executive Order, 4. Market the device(s) for an application other than those listed on the Executive Order, 5. Offer for sale, or advertise any component of an applicable kit as an			

individual device, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, offer for sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior to or concurrent with transfer to an ultimate purchaser.

Signature (authorized device manufacturer contact):	Date of Signature:

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For questions regarding this form, please contact (insert email address)

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## **Category IV – Fuel Tanks or Fuel Tank Modifications**

New fuel tanks or modifications made to the stock fuel tank, including hoses and lines.

## **APPLICANT INFORMATION**

Name of Device Manufacturer with design control:						
Device Name:	Device Name:					
Name of Authorized Device Man	ufacturer Contac	t:				
Mailing Address:						
City:	State:		Zip Code:			
Telephone Number:		Email Address:				
Name of Authorized Representative (if different from above):						
Mailing Address:						
City:	State:		Zip Code:			
Telephone Number:		Email Address:				

## **APPLICATION REQUIREMENTS**

- 1. Vehicle coverage list must fall within the following scope:
  - a. Single original equipment vehicle/engine manufacturer
  - b. Same vehicle class unless combined under same engine test group
  - c. Same engine configuration (e.g., I4, V6, V8, method of aspiration)
  - d. Same fuel type (flex-fuel may be included with gasoline)

- e. Same emissions control technology (grouping patterns follow those of On-Road New Vehicle or Engine Certification Executive Orders).
- f. Same emission standards (e.g., LEV III ULEV 125 and LEV III ULEV 30 are unique emission standards).
- 2. List of part numbers assigned by the manufacturer for each unique design or modification.
- 3. For each part number, step-by-step installation instructions with associated parts list and diagrams/pictures/schematics for proper installation of each part number. Installation instructions that represent more than one part number must have all applicable part numbers clearly presented in the instructions, along with applicable vehicles covered.
- 4. Detailed description of the device to assist CARB staff in understanding its operation, including technical operating principles, dimensional drawings, schematics, material specifications, and impacts to performance, fuel economy, drivability, emission control components, OBD, and emissions. Manufacturers shall include impacts to any affected OEM parts, components or systems, identified by part name and number.
- A facsimile of the exemption label (see Section VIII of the Procedures for labeling requirements). Manufacturers with a previously issued exemption Executive Order must include an actual physical label with the first application submission of each calendar year.

### **APPLICATION REQUESTS**

- 1. Sample device (if requested by the Executive Officer).
- 2. Independent laboratory report (in the format as detailed in Section V(e) of the Procedures) from emissions and OBD II testing, if previously completed.

## **VEHICLE/ENGINE COVERAGE LIST\***

(attach applicable file)

Please provide a spreadsheet (in Excel) with all of the vehicle(s) or engine(s) coverage information. File name should identify vehicle list according to requirements outlined above in item 1 as follows: Mfr Device OEM Class Engine-Config Fuel Type Emissions Std

For example: Tank-Maker\_Super-Tank\_Ford\_LDT\_V6-TC\_Gas\_LEV3ULEV70

Part Model Model Engine Number Year Size	Test	Evaporative	New Vehicle
	Group	Family	Cert. EO #

\*If applicable, provide a list of <u>excluded models/configurations</u> that are within the scope of requested vehicle or engine coverage.

### INSTALLATION INSTRUCTIONS

(Submit all applicable installation instructions)	
Total number of uploaded or attached installation instruction files:	

### **DETAILED DEVICE DESCRIPTION**

(Insert text or attach a separate document for device description)

For each unique design or modification:

- Include color pictures of all components with size dimensions
- Include material specifications for all components
- If the stock system contains any sensor(s), provide comparison pictures of the stock and modified part(s) which contain the impacted sensor(s).

The following questions in regard to your modification(s) will help CARB staff evaluate your device or modification. Please answer in specific detail each question.

- 1. Does the device replace the stock fuel tank, re-locate the stock fuel tank, and/or add to the stock fuel tank?
- 2. Submit separate schematics of the stock fuel tank system and the modified fuel tank system. Schematics should include all the components from the fuel tank gas cap to the emission canister purge valve. Components include, but are not limited to, the gas cap, fuel fill pipe, fuel transfer tubes, check valves, fuel tank, fuel pump/sending unit, pressure sensor, rollover vales, vent valves, fuel lines, emission canister, emission vapor lines, vent lines, and on-board diagnostic system components. Indicate on the schematics how all the components are connected and which components are replaced, re-used, added, extended, and/or modified. Submit a separate explanation, if needed.
- Submit the "AIR RESOURCES BOARD APPLICATION FORMAT FOR FUEL TANK SYSTEM COMPONENT REQUIREMENTS" found here (Insert hyperlink).
- 4. Submit the "AIR RESOURCES BOARD APPPLICATION FORMAT FOR COMPLIANCE WITH THE FILL PIPE REQUIREMENTS" found here (Insert hyperlink), if replacing the stock fuel fill pipe.

- 5. Is the vehicle's emission canister purge system modified (e.g., canister purge valve, vent solenoid, etc.)? Explain.
- 6. Submit separate schematics of the stock exhaust system and the modified exhaust system. Schematics should include all the components from the exhaust manifold to the tail pipe. Components include, but are not limited to, the exhaust sensors, catalytic converters, resonators, mufflers, and exhaust pipes. Indicate on the schematics how all the components are connected and which components are replaced, re-used, added, removed, lowered, and/or cut. Submit a separate explanation, if needed.
- 7. What impact do the exhaust system modifications have on vehicle exhaust emissions, backpressure, and ground clearance?
- 8. Describe all other modifications made to the vehicle.

EMISSIONS EVALUATION CRITERIA *
* Explanation of Evaluation Criteria can be found here (Insert hyperlink).
Evaluation Criteria (Check One):
☐Emission Standards ☐Comparison to Baseline Emission Levels
LABELING REQUIREMENTS *
* Explanation of labeling requirements can be found here (Insert hyperlink).
(Submit facsimile of an exemption label)
(Submit material and lettering specifications for label)
REQUEST FOR SAMPLE
CARB may require one or more devices for evaluation. Device(s) will be returned only if a return is requested at the time the device(s) is submitted. Do you agree to provide the device(s) free of costs?   No

### **SIGNATURE**

☐I affirm the information provided is true, accurate, and complete, and that to the best of my knowledge installation of the device on a covered vehicle or engine will not cause regulated emissions to increase beyond the certification standards to which the vehicle or engine was certified, including any noxious or toxic matter, and will not cause emission control components and OBD to function differently than as designed by the vehicle or engine manufacturer.
I understand that I shall not: 1. Use the Executive Order as an endorsement or approval by CARB, 2. Market the device(s) using any identification other than that shown on the Executive Order, 3. Apply the Executive Order to parts sold prior to the date shown on the Executive Order, 4. Market the device(s) for an application other than those listed on the Executive Order, 5. Offer for sale, or advertise any component of an applicable kit as an individual device, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, offer for sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior to or concurrent with transfer to an ultimate purchaser.
Signature (authorized device manufacturer contact): Date of Signature:

## INSTRUCTIONS FOR SUBMITTING THIS FORM

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For questions regarding this form, please contact (insert email address)

A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.

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submitted as provided in CARB's regulations for submitting confidential data, California Code of Regulations, title 17, section 91011.





## Category V – Intercooler Kits, Intercooler Components or Modifications

Intercooler kits, intercoolers, intercooler pipes or tubes, or modifications made to the stock intercooler systems that include no other parts or modifications for proper installation. Category IX should be selected for the application if other parts or modifications are included.

## APPLICANT INFORMATION

Name of Device Manufacturer with design control:						
Device Name:	Device Name:					
Name of Authorized Device Man	ufacturer Contac	:				
Mailing Address:						
City:	State:		Zip Code:			
Telephone Number: Email Address:						
Name of Authorized Representative (if different from above):						
Mailing Address:						
City:	State:		Zip Code:			
Telephone Number:		Email Address:				

### APPLICATION REQUIREMENTS

- 1. Vehicle coverage list must be:
  - a. Single original equipment vehicle/engine manufacturer
  - b. Same vehicle class unless combined under same engine test group
  - c. Same engine configuration (e.g., I4, V6, V8, method of aspiration)

- d. Same fuel type (flex-fuel may be included with gasoline)
- e. Same emissions control technology (grouping patterns follow those of On-Road New Vehicle or Engine Certification Executive Orders).
- f. Same emission standards (e.g., LEV III ULEV 125 and LEV III ULEV 30 are unique emission standards).
- 2. List of part numbers assigned by the manufacturer for each unique design or modification.
- 3. For each part number, step-by-step installation instructions with associated parts list and diagrams/pictures/schematics for proper installation of each part number. Installation instructions that represent more than one part number must have all applicable part numbers clearly presented in the instructions, along with applicable vehicles covered.
- 4. Detailed description of the device to assist CARB staff in understanding its operation, including technical operating principles, dimensional drawings, schematics, material specifications, and impacts to performance, fuel economy, drivability, emission control components, OBD, and emissions. Manufacturers shall include impacts to any affected OEM parts, components or systems, identified by part name and number
- A facsimile of the exemption label (see Section VIII of the Procedures for labeling requirements). Manufacturers with a previously issued exemption Executive Order must include an actual physical label with the first application submission of each calendar year.

## **APPLICATION REQUESTS**

- 1. Sample device (if requested by the Executive Officer).
- 2. Independent laboratory report (in the format as detailed in Section V(e) of the Procedures) from emissions and OBD II testing, if previously completed.

### **VEHICLE/ENGINE COVERAGE LIST\***

(attach applicable file)

Please provide a spreadsheet (in Excel) with all vehicle(s) or engine(s) coverage information. File name should identify vehicle list according to requirements outlined above in item 1 as follows: Mfr\_Device\_OEM\_Class\_Engine-Config.\_Fuel Type\_Emissions Std

For example: Intercooler-Maker\_Super-Intercooler\_Ford\_LDT\_V6-TC\_Gas\_LEV3ULEV70

\*If applicable, provide a list of <u>excluded models/configurations</u> that are within the scope of requested vehicle or engine coverage.

### INSTALLATION INSTRUCTIONS

(Submit all applicable installation instructions)

Total number of uploaded or attached installation instruction files:

### **DETAILED DEVICE DESCRIPTION**

(Insert text or attach a separate document for device description)

Include all technical operating principles, dimensional drawings, electrical schematics, material specifications, and impacts to performance, fuel economy, drivability, and emissions for the following affected parts, components, and/or systems (if applicable).

- Heat exchanger, intercooler, or EGR cooler
- Make and model (if applicable)
- Size, volume, and type (air or water) of heat exchanger
- Intercooler tubing or pipes
- Sensors (e.g., signal modifications, location, and functionality)

The following regarding your modification(s) will help CARB staff evaluate your device or modification. Please answer, in specific detail, each response.

- Include color pictures of all components with size dimensions
- If the stock system contains any sensor(s), provide comparison pictures, diagrams, and/or dimensions of the stock and modified part(s) which contain the impacted sensor(s)

## **EMISSIONS EVALUATION CRITERIA\***

* Exp	olanation	of Evaluation	Criteria can	be found	here	(Insert	hype	erlink	)
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Eva	luation	Criteria (	(Check	One)	):

_		
	Гранана	Standards
	rmission	Sianoaros

Page <b>4</b> of <b>5</b>
Comparison to Baseline Emission Levels
LABELING REQUIREMENTS *
* Explanation of labeling requirements can be found here (Insert hyperlink).
(Submit facsimile of an exemption label)
(Submit material and lettering specifications for label)
REQUEST FOR SAMPLE
CARB may require one or more devices for evaluation. Device(s) will be returned only if a return is requested at the time the device(s) is submitted. Do you agree to provide the device(s) free of costs?   SIGNATURE
SIGNATURE
☐ I affirm the information provided is true, accurate, and complete, and that to the best of my knowledge installation of the device on a covered vehicle or engine will not cause regulated emissions to increase beyond the certification standards to which the vehicle or engine was certified, including any noxious or toxic matter, and will not cause emission control components and OBD to function differently than as designed by the vehicle or engine manufacturer.
□ I understand that I shall not: 1. Use the Executive Order as an endorsement or approval by CARB, 2. Market the device(s) using any identification other than that shown on the Executive Order, 3. Apply the Executive Order to parts sold prior to the date shown on the Executive Order, 4. Market the device(s) for an application other than those listed on the Executive Order, 5. Offer for sale, or advertise any component of an applicable kit as an

Signature (authorized device manufacturer contact):	Date of Signature:

to or concurrent with transfer to an ultimate purchaser.

individual device, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, offer for sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior

### INSTRUCTIONS FOR SUBMITTING THIS FORM

Please submit to: (insert email address). A received receipt email will be automatically sent to the sender's email account.

For questions regarding this form, please contact (insert email address)

A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.

### PRIVACY STATEMENT



## **EXEMPTION APPLICATION**

# Category VI – Supercharger and Turbocharger Kits or Modifications

Supercharger and Turbocharger kits or modifications made to a stock supercharger or turbocharger.

# **APPLICANT INFORMATION**

Name of Device Manufacturer w	ith design control		
Device Name:			
Name of Authorized Device Man	ufacturer Contac	t:	
Mailing Address:			
City:	State:		Zip Code:
Telephone Number:		Email Address:	
Name of Authorized Representa	tive (if different fr	om above):	
Mailing Address:			
City:	State:		Zip Code:
Telephone Number:		Email Address:	

### **APPLICATION REQUIREMENTS**

- 1. Vehicle coverage list must be:
  - a. Single original equipment vehicle/engine manufacturer
  - b. Same vehicle class unless combined under same engine test group
  - c. Same engine configuration (e.g., I4, V6, V8, method of aspiration)
  - d. Same fuel type (flex-fuel may be included with gasoline)

- e. Same emissions control technology (grouping patterns follow those of On-Road New Vehicle or Engine Certification Executive Orders).
- f. Same emission standards (e.g., LEV III ULEV 125 and LEV III ULEV 30 are unique emission standards).
- 2. List of part numbers assigned by the manufacturer for each unique design or modification..
- 3. For each part number, step-by-step installation instructions with associated parts list and diagrams/pictures/schematics for proper installation of each part number. Installation instructions that represent more than one part number must have all applicable part numbers clearly presented in the instructions, along with applicable vehicles covered.
- 4. Detailed description of the device to assist CARB staff in understanding its operation, including technical operating principles, dimensional drawings, schematics, material specifications, and impacts to performance, fuel economy, drivability, emission control components, OBD, and emissions. Manufacturers shall include impacts to any affected OEM parts, components or systems, identified by part name and number
- 5. A facsimile of the exemption label (see Section VIII of the Procedures for labeling requirements). Manufacturers with a previously issued exemption Executive Order must include an actual physical label with the first application submission of each calendar year.
- 6. A plan to collect vehicle identification numbers (VIN) from purchaser's vehicles for any device that modifies a stock engine, body, or transmission control module's software, excluding speedometer and/or wheel speed adjusters.

### **APPLICATION REQUESTS**

- 1. Sample device (or sample components) (if requested by the Executive Officer).
- 2. Independent laboratory report (in the format as detailed in Section V(e) of the Procedures) from emissions and OBD II testing, if previously completed.
- 3. Stock and modified maximum boost pressure graphs or maximum horsepower/torque graphs.

### **VEHICLE/ENGINE COVERAGE LIST\***

(attach applicable file)

Please provide a spreadsheet (in Excel) with all applicable vehicle(s) or engine(s) coverage information. File name should identify vehicle list according to requirements outlined above in item 1 as follows: Mfr\_Device\_OEM\_Class\_Engine-Config.\_Fuel Type\_Emissions Std

For example: Supercharger-Maker\_Super-Charger\_Ford\_LDT\_V6-TC\_Gas\_LEV3ULEV70

Part Number	Model Year Model	Engine Size	Test Group	Evaporative Family	New Vehicle Cert. EO #	Performance Impact (i.e. HP, TQ, or Boost)
----------------	---------------------	----------------	---------------	-----------------------	------------------------------	---

Cuporchargor	Crank	Injector	Handheld	ECU	Air Intake Part		Intercooler
Supercharger Pulley Size	Pulley	Fuel	Tuner	Calibration	Number	HCA in Air Intake?	Part
Pulley 312e	Size	Rate	Model	Identifier	Nullibei	IIIIake:	Number

<sup>\*</sup>If applicable, provide a list of <u>excluded models/configurations</u> that are within the scope of requested vehicle or engine coverage.

## **INSTALLATION INSTRUCTIONS**

(Submit all applicable installation instructions)

Total number of uploaded or attached installation instruction files:

#### **DETAILED DEVICE DESCRIPTION**

(Insert text or attach a separate document for device description)

Include all technical operating principles, dimensional drawings, electrical schematics, material specifications, and impacts to performance, fuel economy, drivability, and emissions for the following affected parts, components, and/or systems (if applicable).

## Supercharger or Turbocharger Add-On or Modifications to Stock

- 1. New add-on systems
  - a. Supercharger (make, model, unit type, size, drive and crank pulley diameters)
  - b. Turbocharger (make, model, unit type, variable or fixed geometry, pneumatic or electronic waste gate, compressor and turbine impeller sizes, turbine housing area ratio (A/R), area of throat, turbine inlet and outlet pipes, and flange sizes)
  - c. Boost pressure
  - d. Fuel system hardware modifications
  - e. Throttle body and intake manifold
- 2. Modifications made to stock system only

- a. Supercharger or turbocharger
- b. Boost pressure
- c. Intake or exhaust system
- d. Fuel system hardware
- e. Fuel and timing calibration
- f. Turbine inlet and outlet pipes

### **ECU Modifications**

- 1. Identify all parameters being sensed and engine parameters or components being controlled by your device. Attach a table and/or spreadsheet to support your explanation with the following:
  - a. Include all Parameters Sensed and Parameters Controlled.
  - b. Explain how and to what degree these parameters/components are being controlled and/or modified.
  - c. Describe the conditions under which these parameter changes are active.
- Submit calibration tables and/or lookup tables for all of the parameters being modified by your device (e.g. fuel, ignition timing, boost pressure, volumetric efficiency, air/fuel target ratios, etc.). You may attach these, formatted as electronic spreadsheets, diagrams, and/or photos.
- Disclose if your device's ECU modification utilizes multiple calibration mapping (i.e. user selectable recalibrations). If more than one calibration map is being utilized, please elaborate on the major differences between each map. For each additional map, address all above items.

## Air Intake Modifications

- 1. For each unique design or modification:
  - a. Include color pictures of all components with size dimensions
  - b. Material specifications for all components
  - c. If the stock system contains any sensor(s), provide comparison pictures of the stock and modified part(s) which contain the impacted sensor(s)
- 2. The following questions regarding your modification(s) will help CARB staff evaluate your device as it relates to the evaporative systems. Please answer to the best of your knowledge and include specific details in each response.
  - a. Does the stock system contain a hydrocarbon trap? If yes, proceed to question a(i), if no, proceed to question b.
    - i. How is the functionality of the hydrocarbon trap retained?

- b. Are vehicle(s) or engine(s) listed in application list certified to a zero evaporative emission standard? If yes, proceed to question b(i)
  - i. Explain in detail, if or if not, the tube/component design of the stock system is designed to retain evaporative emissions.
  - ii. If the stock system is designed to retain evaporative emissions without the use of a hydrocarbon trap, how is your kit or modification designed to maintain the intent of the original equipment design.

# Intercooler Add-On or Stock Intercooler System Modifications

- a. Intercooler (make, model, size, volume, type (air or water)
- b. Tubing or pipes
- c. Sensors (signal modifications, location, and functionality)

EMISSIONS EVALUATION CRITERIA *
* Explanation of Evaluation Criteria can be found here (Insert hyperlink).
Evaluation Criteria (Check One):
☐Emission Standards ☐Comparison to Baseline Emission Levels
LABELING REQUIREMENTS *
* Explanation of labeling requirements can be found here (Insert hyperlink).
(Submit facsimile of an exemption label)
(Submit material and lettering specifications for label)
REQUEST FOR SAMPLE
CARB may require one or more devices for evaluation. Device(s) will be returned only if a return is requested at the time the device(s) is submitted. Do you agree to provide the device(s) free of costs?   Yes   No

### **SIGNATURE**

☐I affirm the information provided is true, accurmy knowledge installation of the device on a covergulated emissions to increase beyond the cert engine was certified, including any noxious or to control components and OBD to function differen	vered vehicle or engine will not cause ification standards to which the vehicle or xic matter, and will not cause emission
engine manufacturer.	
☐ I understand that I shall not: 1. Use the Executive CARB, 2. Market the device(s) using any ider Executive Order, 3. Apply the Executive Order to Executive Order, 4. Market the device(s) for an a Executive Order, 5. Offer for sale, or advertise a individual device, 6. Advertise the product as calloffer for sale, sell, or install the device on a moto to or concurrent with transfer to an ultimate purc	ntification other than that shown on the parts sold prior to the date shown on the application other than those listed on the any component of an applicable kit as an pable of reducing emissions, or 7. Advertise, or vehicle, except on-road motorcycle, prior
Signature (authorized device manufacturer contact):	Date of Signature:

## INSTRUCTIONS FOR SUBMITTING THIS FORM

Please submit to: (insert email address). A received receipt email will be automatically sent to the sender's email account.

For questions regarding this form, please contact (insert email address)

A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.

### PRIVACY STATEMENT



## **EXEMPTION APPLICATION**

## **Category VII – Pre-Catalyst Exhaust Components**

Exhaust components installed upstream of any catalytic converter(s) such as headers, connecting pipes, exhaust manifolds, and turbine inlet and outlet pipes, that are not covered by Category VIII. No other parts or modifications can be required or included for proper installation under this category. Category IX should be selected for the application if other parts or modifications are included.

### APPLICANT INFORMATION

Name of Device Manufacturer w	ith design contro	l:	
Device Name:			
Name of Authorized Device Man	ufacturer Contac	et:	
Mailing Address:			
City:	State:		Zip Code:
Telephone Number:		Email Address:	
Name of Authorized Representa	tive (if different fr	rom above):	
Mailing Address:			
City:	State:		Zip Code:
Telephone Number:		Email Address:	

### **APPLICATION REQUIREMENTS**

- 1. Vehicle coverage list must be:
  - a. Single original equipment vehicle/engine manufacturer
  - b. Same vehicle class unless combined under same engine test group

- c. Same engine configuration (e.g., I4, V6, V8, method of aspiration)
- d. Same fuel type (flex-fuel may be included with gasoline)
- e. Same emissions control technology (grouping patterns follow those of On-Road New Vehicle or Engine Certification Executive Orders).
- f. Same emission standards (e.g., LEV III ULEV 125 and LEV III ULEV 30 are unique emission standards).
- 2. List of part numbers assigned by the manufacturer for each unique design or modification.
- 3. For each part number, step-by-step installation instructions with associated parts list and diagrams/pictures/schematics for proper installation of each part number. Installation instructions that represent more than one part number must have all applicable part numbers clearly presented in the instructions, along with applicable vehicles covered.
- 4. Detailed description of the device to assist CARB staff in understanding its operation, including technical operating principles, dimensional drawings, schematics, material specifications, and impacts to performance, fuel economy, drivability, emission control components, OBD, and emissions. Manufacturers shall include impacts to any affected OEM parts, components or systems, identified by part name and number
- 5. A facsimile of the exemption label (see Section VIII of the Procedures for labeling requirements). Manufacturers with a previously issued exemption Executive Order must include an actual physical label with the first application submission of each calendar year.

### **APPLICATION REQUESTS**

- 1. Sample device (stock and/or modified) (if requested by the Executive Officer).
- 2. Independent laboratory report (in the format as detailed in Section V(e) of the Procedures) from emissions and OBD II testing, if previously completed.

### **VEHICLE/ENGINE COVERAGE LIST\***

(attach applicable file)

Please provide a spreadsheet (in Excel) with all vehicle(s) or engine(s) coverage information. File name should identify vehicle list according to requirements outlined above in item 1 as follows: Mfr\_Device\_OEM\_Class\_Engine-Config.\_Fuel Type\_Emissions Std

For example: Exhaust-Maker Super-Exhaust Ford LDT V6-TC Gas LEV3ULEV70

Part Number	Model Year	Model	Engine Size	Test Group	Evaporative Family	New Vehicle Cert. EO#	Performance Impact (i.e. HP, TQ, or Boost)
----------------	---------------	-------	----------------	---------------	-----------------------	-----------------------------	---

<sup>\*</sup>If applicable, provide a list of <u>excluded models/configurations</u> that are within the scope of requested vehicle or engine coverage.

### **INSTALLATION INSTRUCTIONS**

(Submit all applicable installation instructions)

Total number of uploaded or attached installation instruction files:

### **DETAILED DEVICE DESCRIPTION**

(Insert text or attach a separate document for device description)

Include all technical operating principles, dimensional drawings, electrical schematics, material specifications, and impacts to performance, fuel economy, drivability, and emissions for the following affected parts, components, and/or systems (if applicable).

- Exhaust system and after-treatment
- Exhaust manifold, header
- Upstream oxygen sensors (e.g., location geometry, and functionality)
- Turbine inlet and outlet pipes

The following regarding your modification(s) will help CARB staff evaluate your device or modification. Please answer in detail.

- Include color pictures of all components with size dimensions
- If the stock system contains any sensor(s), specify the sensor function, and provide side-by-side comparison pictures of the stock and modified part(s) which contain the impacted sensor(s)

### **EMISSIONS EVALUATION CRITERIA\***

* Explanation of Eva	iluation Criteria can be	found here (	Insert hyperlin	<b>k</b> ).
Evaluation Crite	eria (Check One):			

Emission Standards	
Comparison to Baseline Emission	Levels

# **LABELING REQUIREMENTS\***

\* Explanation of labeling requirements can be found here (Insert hyperlink).

(Submit facsimile of an exemption label)

(Submit material and lettering specifications for label)

## **REQUEST FOR SAMPLE**

CARB may require one or more devices for evaluate return is requested at the time the device(s) is subdevice(s) free of costs?   Yes  No	omitted. Do you agree to provide the
SIGNATU	IRE
☐I affirm the information provided is true, accurate my knowledge installation of the device on a coveregulated emissions to increase beyond the certification was certified, including any noxious or toxicontrol components and OBD to function different engine manufacturer.	ered vehicle or engine will not cause ication standards to which the vehicle or ic matter, and will not cause emission
☐ I understand that I shall not: 1. Use the Execut by CARB, 2. Market the device(s) using any ident Executive Order, 3. Apply the Executive Order to Executive Order, 4. Market the device(s) for an approximate Executive Order, 5. Offer for sale, or advertise an individual device, 6. Advertise the product as capa offer for sale, sell, or install the device on a motor to or concurrent with transfer to an ultimate purchase.	ification other than that shown on the parts sold prior to the date shown on the oplication other than those listed on the my component of an applicable kit as an able of reducing emissions, or 7. Advertise, vehicle, except on-road motorcycle, prior
Signature (authorized device manufacturer contact):	Date of Signature:

## **INSTRUCTIONS FOR SUBMITTING THIS FORM**

Please submit to: (insert email address). A received receipt email will be automatically sent to the sender's email account.

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A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.

### **PRIVACY STATEMENT**





## **EXEMPTION APPLICATION**

## **Category VIII – Other Categorized Parts**

This category is for add-on or modified parts that fit in one of the following descriptions:

- Air Filter Rams (e.g., dirty side air intake funnel, retaining stock air box lid)
- Air Cleaner Kits for motorcycles (not equipped with an original equipment manufacturer (OEM) HC trap)
- Automatic Transmission Shift Kits (no change in shift points)
- Exhaust or Transmission Braking Systems
- Ignition Coils, Spark Enhancers, Multi-spark Modules
- Ignition Modules that replace stock ignition points
- Ignition Distributors
- Intake Manifolds (limited to vehicles or engines not equipped with an OBD II system or EGR valve)
- Lift Pumps, Non-Adjustable Fuel Pumps, Fuel Pump Voltage Modifiers, or Fuel Pump Control Modules (only for vehicles or engines equipped with a downstream pressure regulator)
- Pulley Kits (limited to non-supercharged vehicles or engines)
- Axle Ratio Modifications (within a 3 percent N/V (engine speed to vehicle speed) ratio change from an OEM range option)
- Exhaust Manifolds or Shorty Headers for 1995 and older vehicles or engines that retain the stock or direct fit connecting pipe(s). Applicable sensor(s), air injection and EGR ports must remain in a stock location and orientation.
- Speedometer or Wheel Speed Adjusters
- Throttle Bodies (without fuel injectors), Throttle Body Spacers, Throttle Body Elbows, or Carburetor Spacers
- Torque Converters
- Oil Separators (limited to diesel vehicles or engines only)

### APPLICANT INFORMATION

Name of Device Manufacturer with design control:					
Device Name:					
Name of Authorized Device Man	ufacturer Contac	t:			
Mailing Address:					
City:	State:		Zip Code:		
Telephone Number:		Email Address:			
Name of Authorized Representa	tive (if different fr	om above):			
Mailing Address:					
City:	State:		Zip Code:		
Telephone Number:		Email Address:			

## **APPLICATION REQUIREMENTS**

- 1. Vehicle coverage list must be:
  - a. Single original equipment vehicle/engine manufacturer
  - b. Same vehicle class unless combined under same engine test group
  - c. Same engine configuration (e.g., I4, V6, V8, method of aspiration)
  - d. Same fuel type (flex-fuel may be included with gasoline)
  - e. Same emissions control technology (grouping patterns follow those of On-Road New Vehicle or Engine Certification Executive Orders).
  - f. Same emission standards (e.g., LEV III ULEV 125 and LEV III ULEV 30 are unique emission standards).
- 2. List of part numbers assigned by the manufacturer for each unique design or modification.

- 3. For each part number, step-by-step installation instructions with associated parts list and diagrams/pictures/schematics for proper installation of each part number. Installation instructions that represent more than one part number must have all applicable part numbers clearly presented in the instructions, along with applicable vehicles covered.
- 4. Detailed description of the device to assist CARB staff in understanding its operation, including technical operating principles, dimensional drawings, schematics, material specifications, and impacts to performance, fuel economy, drivability, emission control components, and OBD. Manufacturers shall include impacts to any affected OEM parts, components or systems, identified by part name and number
- 5. A facsimile of the exemption label (see Section VIII of the Procedures for labeling requirements). Manufacturers with a previously issued exemption Executive Order must include an actual physical label with the first application submission of each calendar year.

#### **APPLICATION REQUESTS**

- 1. Sample device (if requested by the Executive Officer).
- 2. Independent laboratory report (in the format as detailed in Section V(e) of the Procedures) for OBD testing, if previously completed.

### **VEHICLE/ENGINE COVERAGE LIST\***

(attach applicable file)

Please provide a spreadsheet (in Excel) with all of the vehicle(s) or engine(s) coverage information. File name should identify vehicle list according to requirements outlined above in item 1 as follows: Mfr\_Device\_OEM\_Class\_Engine-Config.\_Fuel Type\_Emissions Std

For example: Device-Maker Device-Name Ford LDT V6-TC Gas LEV3ULEV70

Part Model Number Year	Model	Engine Size	Test Group	Evaporative Family	New Vehicle Cert. EO #
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<sup>\*</sup>If applicable, provide a list of <u>excluded models/configurations</u> that are within the scope of requested vehicle or engine coverage.

### **INSTALLATION INSTRUCTIONS**

(Submit all applicable installation instructions)

Total number of uploaded or attached installation instruction files:

#### DETAILED DEVICE DESCRIPTION

(Insert text or attach a separate document for device description)

Include all technical operating principles, dimensional drawings, electrical schematics, material specifications, and possible impacts to performance, fuel economy, drivability, and OBD.

For each unique design or modification:

- Include color pictures of all components with size dimensions
- Material specifications for all components
- If the stock system contains any sensor(s), specify the sensor function, and provide comparison pictures of the stock and modified part(s) which contain the impacted sensor(s)

# **EVALUATION CRITERIA**

OBD system testing is required for 1996 and newer model-year vehicles.

### LABELING REQUIREMENTS \*

\* Explanation of labeling requirements can be found here (Insert hyperlink).

(Submit facsimile of an exemption label)

(Submit material and lettering specifications for label)

#### REQUEST FOR SAMPLE

CARB may require one or more devices for evaluation. Device(s) will be returned only if	а
return is requested at the time the device(s) is submitted. Do you agree to provide the	
device(s) free of costs?	

### **SIGNATURE**

I affirm the information provided is true, accurate, and complete, and that to the best of my knowledge installation of the device on a covered vehicle or engine will not cause regulated emissions to increase beyond the certification standards to which the vehicle or engine was certified, including any noxious or toxic matter, and will not cause emission control components and OBD to function differently than as designed by the vehicle or engine manufacturer.					
□ I understand that I shall not: 1. Use the Executive Order as an endorsement or approval by CARB, 2. Market the device(s) using any identification other than that shown on the Executive Order, 3. Apply the Executive Order to parts sold prior to the date shown on the Executive Order, 4. Market the device(s) for an application other than those listed on the Executive Order, 5. Offer for sale, or advertise any component of an applicable kit as an individual device, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, offer for sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior to or concurrent with transfer to an ultimate purchaser.					
Signature (authorized device manufacturer contact): Date of Signature:					

## INSTRUCTIONS FOR SUBMITTING THIS FORM

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For questions regarding this form, please contact (insert email address)

A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.

### PRIVACY STATEMENT



## **EXEMPTION APPLICATION**

Category IX – Add-On or Modified Part(s) Not Covered by Categories II through VIII.

This category is for add-on or modified parts that do not fit the criteria set forth in Categories II through VIII (hybrid kits, engine displacement increase kits, multistage performance kits with various components, camshafts, cylinder heads, transmissions, fuel injectors, and EGR coolers are just a few examples).

If the submitted application is missing information that is critical to the evaluation of the device or modification, a written response will be sent to the manufacturer requesting additional information.

## **APPLICANT INFORMATION**

Name of Device Manufacturer with design control:							
Device Name:							
Name of Authorized Device Manufacturer Contact:							
Mailing Address:							
City:	State:		Zip Code:				
Telephone Number:	Email Address						
Name of Authorized Representative (if different from above):							
Mailing Address:							
City:	State:		Zip Code:				
Telephone Number:		Email Address:					

### **APPLICATION REQUIREMENTS**

- 1. Vehicle coverage list must be:
  - a. Single original equipment vehicle/engine manufacturer
  - b. Same vehicle class unless combined under same engine test group
  - c. Same engine configuration (e.g., I4, V6, V8, method of aspiration)
  - d. Same fuel type (flex-fuel may be included with gasoline)
  - e. Same emissions control technology (grouping patterns follow those of On-Road New Vehicle or Engine Certification Executive Orders).
  - f. Same emission standards (e.g., LEV III ULEV 125 and LEV III ULEV 30 are unique emission standards).
- 2. List of part numbers assigned by the manufacturer for each unique design or modification.
- 3. For each part number, step-by-step installation instructions with associated parts list and diagrams/pictures/schematics for proper installation of each part number. Installation instructions that represent more than one part number must have all applicable part numbers clearly presented in the instructions, along with applicable vehicles covered.
- 4. Detailed description of the device to assist CARB staff in understanding its operation, including technical operating principles, dimensional drawings, schematics, material specifications, and impacts to performance, fuel economy, drivability, emission control components, OBD, and emissions. Manufacturers shall include impacts to any affected OEM parts, components or systems, identified by part name and number
- 5. A facsimile of the exemption label (see Section VIII of the Procedures for labeling requirements). Manufacturers with a previously issued exemption Executive Order must include an actual physical label with the first application submission of each calendar year.

#### **APPLICATION REQUESTS**

- 1. Sample device or modified vehicle (if requested by the Executive Officer).
- Independent laboratory report (in the format as detailed in Section V(e) of the Procedures) for emissions and OBD testing, if previously completed.

### **VEHICLE/ENGINE COVERAGE LIST\***

(attach applicable file)

Please provide a spreadsheet (in Excel) with all of the vehicle(s) or engine(s) coverage information. File name should identify vehicle list according to requirements outlined above in item 1 as follows: Mfr\_Device\_OEM\_Class\_Engine-Config.\_Fuel Type\_Emissions Std

For example: Device-Maker\_Device-Name\_Ford\_LDT\_V6-TC\_Gas\_LEV3ULEV70

Part Model Model Number Year	Engine Size	Test Group	Evaporative Family	New Vehicle Cert. EO #
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<sup>\*</sup>If applicable, provide a list of <u>excluded models/configurations</u> that are within the scope of requested vehicle or engine coverage.

### INSTALLATION INSTRUCTIONS

Total number of uploaded or attached installation instruction files: \_\_\_\_\_

### **DETAILED DEVICE DESCRIPTION**

(Insert text or attach a separate document for device description)

Include all technical operating principles, dimensional drawings, electrical schematics, material specifications, and possible impacts to performance, fuel economy, drivability, OBD, and emissions.

For each unique design or modification:

- Include color pictures of all components with size dimensions
- Material specifications for all components
- If the stock system contains any sensor(s), provide comparison pictures of the stock and modified part(s) which contain the impacted sensor(s)

#### **EVALUATION CRITERIA**

Testing requirements will be based on the Executive Officer's review of the submitted application.

## **LABELING REQUIREMENTS\***

\* Explanation of labeling requirements can be found here (Insert hyperlink).

(Submit facsimile of an exemption label)

(Submit material and lettering specifications for label)

# **REQUEST FOR SAMPLE**

CARB may require one or more devices for evalueturn is requested at the time the device(s) is sudevice(s) free of costs?   Yes  No	. ,				
SIGNAT	URE				
☐I affirm the information provided is true, accurately knowledge installation of the device on a coveregulated emissions to increase beyond the certification was certified, including any noxious or to control components and OBD to function different engine manufacturer.	ered vehicle or engine will not cause fication standards to which the vehicle or xic matter, and will not cause emission				
□ I understand that I shall not: 1. Use the Executive Order as an endorsement or approval by CARB, 2. Market the device(s) using any identification other than that shown on the Executive Order, 3. Apply the Executive Order to parts sold prior to the date shown on the Executive Order, 4. Market the device(s) for an application other than those listed on the Executive Order, 5. Offer for sale, or advertise any component of an applicable kit as an individual device, 6. Advertise the product as capable of reducing emissions, or 7. Advertise, offer for sale, sell, or install the device on a motor vehicle, except on-road motorcycle, prior to or concurrent with transfer to an ultimate purchaser.					
Signature (authorized device manufacturer contact):	Date of Signature:				

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For questions regarding this form, please contact (insert email address)

A staff engineer assigned to your application submission will contact you after a preliminary review has been completed.

### **PRIVACY STATEMENT**