

# ABOUT

THE VEHICLE REPAIR AND REPLACEMENT ASSISTANCE PROGRAM PROVIDES FINANCIAL ASSISTANCE TOWARDS EMISSIONS RELATED REPAIRS OR REPLACEMENT OF VEHICLES THAT ARE UNABLE TO MEET CURRENT EMISSIONS STANDARDS

## INCOME QUALIFICATIONS

FINANCIAL ASSISTANCE MAY BE AWARDED TO INDIVIDUALS WITH HOUSEHOLD INCOMES AT OR BELOW 300% OF THE FEDERAL POVERTY GUIDELINES

2024 FEDERAL POVERTY GUIDELINES			
DEPENDENTS (EACH HOUSEHOLD MEMBER COUNTS AS A DEPENDENT.)	ANNUAL HOUSEHOLD INCOME		
	200%	250%	300%
1	\$30,120	\$37,650	\$45,180
2	\$40,880	\$51,100	\$61,320
3	\$51,640	\$64,550	\$77,460
4	\$62,400	\$78,000	\$93,600
EACH ADDITIONAL DEPENDENT	+\$10,760	+\$13,450	+\$16,140

INCOME SHALL BE VERIFIED USING THE ADJUSTED GROSS INCOME (AGI) REPORTED ON THE MOST RECENT FEDERAL TAX FORM






W-2, PAYSTUBS, DISABILITY STATEMENTS, ALIMONY, AND CHILD SUPPORT COURT ORDERS ARE ALSO ACCEPTABLE.

# REPAIR

FINANCIAL ASSISTANCE TOWARD REPAIR IS DETERMINED BY THE VEHICLE OWNER'S HOUSEHOLD INCOME

INCOME AT OR BELOW . . .	200%	100% OF REPAIR UP TO \$1000
INCOME AT OR BELOW . . .	250%	75% OF REPAIR UP TO \$750
INCOME AT OR BELOW . . .	300%	50% OF REPAIR UP TO \$500

## VEHICLE QUALIFICATIONS

-  FAILED AN EMISSIONS TEST
-  REGISTERED OR REGULARLY OPERATED IN DAVIS COUNTY
-  REGISTERED IN UTAH WITHIN THE LAST 12 MONTHS
-  REGISTERED UNDER VEHICLE OWNER'S NAME
-  NO EVIDENCE OF TAMPERING WITH EMISSIONS CONTROL SYSTEMS

## HOW TO PARTICIPATE











- 1 SUBMIT THE INCLUDED APPLICATION
- 2 RECEIVE AN ASSISTANCE VOUCHER
- 3 SUBMIT VEHICLE TO A PARTICIPATING AUTO REPAIR FACILITY
- 4 AGREE TO NECESSARY REPAIRS
- 5 PAY REMAINING PORTION OF REPAIR BILL

# REPLACEMENT

FINANCIAL ASSISTANCE TOWARD A REPLACEMENT VEHICLE DETERMINED BY THE VEHICLE OWNER'S HOUSEHOLD INCOME AND THE EMISSIONS RATING OF THE CAR PURCHASED

INCOME AT OR BELOW . . .	200%	\$5,500-\$7,560
INCOME AT OR BELOW . . .	250%	\$4,815-\$6,875
INCOME AT OR BELOW . . .	300%	\$4,125-\$6,190

## VEHICLE QUALIFICATIONS

APPLICANT'S VEHICLE	PURCHASED VEHICLE
 MODEL YEAR 2003 AND OLDER OR T2 B5 IF REPLACED WITH T3 B30	 CURRENT OR 6 PREVIOUS MODEL YEARS
 FAILED AN EMISSIONS TEST WITHIN LAST 30 DAYS	 FEDERAL TIER 2 BIN 5 OR CLEANER
 REGISTERED OR REGULARLY OPERATED IN DAVIS COUNTY	 ODOMETER READING LESS THAN 110,000 MILES
 REGISTERED IN UTAH WITHIN LAST 12 MONTHS	 PURCHASED THROUGH A PARTICIPATING DEALERSHIP
 DRIVEN TO A PARTICIPATING DEALERSHIP	 COST NO MORE THAN \$48,125 BEFORE TAX, TITLE, AND LICENSING

## HOW TO PARTICIPATE

- 1 SUBMIT THE INCLUDED APPLICATION
- 2 RECEIVE AN ASSISTANCE VOUCHER
- 3 SUBMIT VOUCHER AND OLD VEHICLE TO A PARTICIPATING DEALERSHIP
- 4 PURCHASE A QUALIFYING VEHICLE
- 5 PAY/FINANCE REMAINING PORTION OF VEHICLE PURCHASE

# VEHICLE REPAIR AND REPLACEMENT ASSISTANCE PROGRAM

PLEASE BRING COMPLETED APPLICATION, PROOF OF INCOME, AND DOCUMENTATION OF A FAILED EMISSIONS TEST  
TO THE DAVIS COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION, LOCATED AT:  
22 S. STATE ST., CLEARFIELD, UT 84015.

## REGISTERED OWNER INFORMATION

VEHICLE OWNER NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

MAILING ADDRESS (IF DIFFERENT): \_\_\_\_\_

## VEHICLE INFORMATION

VEHICLE MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YEAR: \_\_\_\_\_ ODOMETER: \_\_\_\_\_

VEHICLE IDENTIFICATION NUMBER: \_\_\_\_\_ LICENSE PLATE: \_\_\_\_\_

## ADDITIONAL INFORMATION

I AM APPLYING FOR ...

☐ VEHICLE REPAIR ASSISTANCE ☐ VEHICLE REPLACEMENT ASSISTANCE

COMPLETE THE NEXT QUESTION **ONLY** IF APPLYING FOR VEHICLE **REPLACEMENT** ASSISTANCE.

☐ I CERTIFY THAT IF IT WERE NOT FOR THIS FUNDING ASSISTANCE I WOULD  
HAVE RETAINED MY VEHICLE FOR AT LEAST THREE (3) MORE YEARS.

## SIGNATURE REQUIRED

I CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS COMPLETE, ACCURATE, AND TRUE. I UNDERSTAND  
THAT FALSIFICATION OF THIS INFORMATION AND/OR ATTACHMENTS MAY RESULT IN TERMINATION FROM OR DENIAL  
OF APPLICATION FOR THE VEHICLE REPAIR AND REPLACEMENT ASSISTANCE PROGRAM. I ACKNOWLEDGE THAT  
ALL INFORMATION GIVEN IS SUBJECT TO VERIFICATION.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## OFFICE USE ONLY

FAILED EMISSIONS INSPECTION? ☐ YES ☐ NO DATE: \_\_\_\_\_

UT REGISTRATION IN LAST 12 MONTHS? ☐ YES ☐ NO EVIDENCE OF TAMPERING? ☐ YES ☐ NO ☐ N/A

INCOME VERIFIED BY: \_\_\_\_\_ INCOME QUALIFICATION: 200% 250% 300%



Environmental Health Services Division  
22 S. State St., Clearfield, UT 84015  
(801) 525-5128



# VEHICLE REPAIR AND REPLACEMENT ASSISTANCE PROGRAM



Healthy Choices. Healthy People. Healthy Communities.