

# Vehicle Repair and Replacement Assistance Program

Please bring **completed application**, **proof of income**, and **documentation of a failed emissions test** to the 2nd Floor of the Davis County Health Department, **Located at: 22 S State St., Clearfield, UT 84015.**

## REGISTERED OWNER INFORMATION

Vehicle Owner Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Mailing Address (if different): \_\_\_\_\_

## VEHICLE INFORMATION

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_  
Odometer: \_\_\_\_\_ License Plate: \_\_\_\_\_  
Vehicle Identification Number(VIN): \_\_\_\_\_

## ADDITIONAL INFORMATION

I am applying for...

VEHICLE REPAIR ASSISTANCE       VEHICLE REPLACEMENT ASSISTANCE

Complete the next question only if you are 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      DATE: \_\_\_\_\_  
EVIDENCE OF TAMPERING?  YES  NO  
INCOME VERIFIED BY: \_\_\_\_\_ INCOME QUALIFICATION:    200%    250%    300%



# Vehicle Repair and Replacement Assistance Program



# 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.

### 2025 FEDERAL POVERTY GUIDELINES

DEPENDENTS <small>(Each household member counts as a dependent.)</small>	ANNUAL HOUSEHOLD INCOME		
	200%	250%	300%
<b>1</b>	\$31,300	\$39,125	\$46,950
<b>2</b>	\$42,300	\$52,875	\$63,450
<b>3</b>	\$53,300	\$66,625	\$79,950
<b>4</b>	\$64,300	\$80,375	\$96,450
Each Additional Dependent	+\$11,000	+\$13,750	+\$16,500

Income may be verified using the adjusted gross income (AGI) reported on the most recent federal tax form. W-2s, 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	<b>200%</b>	100% OF REPAIR UP TO \$1,000
INCOME AT OR BELOW	<b>250%</b>	75% OF REPAIR UP TO \$750
INCOME AT OR BELOW	<b>300%</b>	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 ANY REMAINING PORTION OF REPAIR BILL

# REPLACEMENT

Financial assistance toward a replacement vehicle is determined by the vehicle owner's household income and the emissions rating of the vehicle purchased.

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

## VEHICLE QUALIFICATIONS

Applicant's Vehicle Purchased Vehicle

MODEL YEAR 2003 AND OLDER OR 2004+ IF TIER 2 BIN 5 OR GREATER

FAILED AN EMISSIONS TEST WITHIN LAST 30 DAYS

REGISTERED OR REGULARLY OPERATED IN DAVIS COUNTY

REGISTERED IN UTAH WITHIN LAST 12 MONTHS

DRIVEN TO A PARTICIPATING DEALERSHIP

CURRENT OR 6 PREVIOUS MODEL YEARS

FEDERAL TIER 3 BIN 160 OR CLEANER

ODOMETER READING LESS THAN 110,000 MILES

PURCHASED THROUGH 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 OR FINANCE REMAINING PORTION OF VEHICLE PURCHASE