SECTION I: APPLICANT INFORMATION - PLEASE PRINT

Vehicle Owner Name: ____________________________________________
First  Middle Initial  Last

Vehicle Owner Name: ____________________________________________
First  Middle Initial  Last

Mailing Address: __________________________________________________ APT. #

City: _____________________________________________________________, TX Zip Code: __________

Telephone Number: ____________________________ Alternate Telephone Number: ____________________________

E-mail Address: ____________________________________________ How did you hear about this program? __________

SECTION II: VEHICLE INFORMATION - PLEASE PRINT

County where vehicle is registered (Circle One):

  COLLIN, DALLAS, DENTON, ELLIS, JOHNSON, KAUFMAN, PARKER, ROCKWALL, TARRANT

Vehicle Make: ____________________________ Model: ____________________________ Year: _________

Vehicle Identification Number (VIN): ____________________________________________

Texas Vehicle License Plate Number: ____________________________ Is the vehicle drivable? Y___ N___

SECTION III: INCOME ELIGIBILITY - PLEASE PRINT

Total number of household members: Adults: ________ Children: ________

Name(s) of each adult household member: ____________________________

__________________________, ____________________________

*Proof of income for each adult household member should be submitted with application

2015 Annual Income Guidelines

<table>
<thead>
<tr>
<th>Household Size</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Income</td>
<td>$35,310</td>
<td>$47,790</td>
<td>$60,270</td>
<td>$72,750</td>
<td>$85,230</td>
<td>$97,710</td>
<td>$110,190</td>
<td>$122,670</td>
</tr>
</tbody>
</table>

Add $12,480 for each additional household member

SECTION IV: AFFIDAVIT AND SIGNATURE - PLEASE SIGN AND DATE

I hereby certify under penalty of perjury that all information provided and contained herein is complete, accurate, and true. I understand that falsification of this information and/or attachments may result in criminal penalties, punishable by law. I acknowledge that all information given is subject to verification and/or monitoring. I authorize AirCheckTexas Program representatives to verify information needed to certify eligibility and release the Regional Administrator of all liability for personal injury, death, or property damage.

Vehicle Owner Signature: ____________________________ Date: __________

Vehicle Owner Signature: ____________________________ Date: __________

As Regional Administrator for the AirCheckTexas Program, the North Central Texas Council of Governments is subject to the Texas Public Information Act. Therefore, some participant information is considered public information and may be disclosed in response to a Public Information Act request.
PROGRAM REQUIREMENTS:
- The name(s) listed on the program application as the vehicle owner(s) must be the same name(s) on the registration and title of the vehicle applying to the program.
- Annual household income must be at or below the income guidelines to meet program requirements. Annual household income is determined by using the Adjusted Gross Income (AGI) on the most recent Federal Income Tax form. For other forms of income documentation, only the same qualified deductions that are used to determine AGI may be used to determine financial eligibility.
- Income can be verified with most recent Federal Income Tax Form 1040, W2, Disability or Social Security documents, pay stubs for last three months, or a signed, handwritten statement of unemployment. If an individual is receiving federal assistance a benefits letter may be submitted as income verification.

REQUIREMENTS OF VEHICLE APPLYING FOR REPAIR ASSISTANCE:
- Vehicle must have failed an emissions inspection within the past 30 days of the application date, and
- Vehicle must have passed the safety inspection before emissions repairs can be performed.
- Vehicle must be currently registered and has been for 12 of the past 15 months in a participating North Texas county prior to the application date. The counties currently participating are Collin, Dallas, Denton, Ellis, Johnson, Kaufman, Parker, Rockwall and Tarrant.
- Vehicle must be drivable and gasoline powered.
- Commercial and fleet vehicles are not eligible for the program assistance.
- No reimbursements are allowed if emissions repairs are made prior to receiving a valid voucher or repairs are performed at a non-participating repair facility.

IF REQUIREMENTS ARE MET, THE FOLLOWING REPAIR ASSISTANCE IS AVAILABLE:
- Up to $600 for a diagnostics test and emissions repairs

HOW TO SUBMIT AN APPLICATION:
- **Online** – Complete application (www.nctcog.org/airchecktexas), click submit, print application, and sign application. Mail or fax application, income documentation (for all adults) and vehicle inspection report.
- **Fax** – Fax application, income documentation (for all adults) and vehicle inspection report to 817-608-2315.
- **Mail** – Mail application, copies of income documentation (for all adults) and vehicle inspection report to: AirCheckTexas Program, P.O. Box 5888, Arlington, TX 76005.
- Please retain a copy of all documents submitted for your records.
- For questions, call 1-800-898-9103.