



Audits and Inspections-Fleets
 10240 Systems Parkway
 Sacramento, CA 95827
 916.255.1336 Telephone
 916.255.1385 Fax
 www.smogcheck.ca.gov



**GOVERNMENT FLEET SMOG CHECK PROGRAM
 LETTER OF RESPONSE**

The California Smog Check Program affects governmental agencies that own and/or operate vehicle(s) that are subject to program requirements. The law requires that every vehicle affected by program requirements be smog tested in accordance with an established schedule and the results reported to the Bureau of Automotive Repair. Every government agency shall assign an employee, of management level, as Responsible Managing Employee (RME) to oversee the performance of the agency's vehicle smog testing activities. A new Letter of Response should be submitted to the Bureau for any changes in vehicle inventory, RME, phone numbers, address change or status of vehicle ownership.

PLEASE COMPLETE AND RETURN THIS FORM TO THE BUREAU OF AUTOMOTIVE REPAIR, AUDITS AND INSPECTIONS UNIT

Agency: _____ BAR File Number: _____

Department: _____

Division/Unit: _____

Business Address: _____

City: _____ State: _____ ZIP: _____

RME: _____ Phone _____ Ext: _____

E-mail address: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

| BAR USE ONLY | |
|----------------|-------|
| Date Received: | _____ |
| Date Entered: | _____ |
| Entered by: | _____ |
| Comments: | _____ |

This agency owns and/or operates vehicles affected by the Smog Check Program.
 The smog inspections will be performed as follows:

- Within our agency's approved maintenance facility (BAR 97 equipment required).
- Contracted out to a licensed Smog Check station.
- Contracted out to another government agency with an approved maintenance facility.

This agency does not currently own any vehicles affected by the Smog Check Program. This agency will promptly notify the Bureau of Automotive Repair upon acquisition of any affected vehicle(s).

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| <p>This agency will submit the required annual vehicle reporting transmittal (Form 79-21) in accordance with the following schedule (check one):</p> <p><u>Odd/Even VIN Vehicles:</u> Odd VIN vehicles tested in odd years. Even VIN vehicles tested in even years.</p> <p><u>Annual Option:</u> Both Odd and Even VIN vehicles tested every year.</p> | <p>Enter the total number of passenger cars, light and heavy duty vehicles owned by this agency that are 1976 and newer that are powered by gasoline and alternate fuels. Include all 1998 and newer light duty (up to 14,000 lbs GVWR) diesel vehicles:</p> <p>Do not include electric, hybrid or vehicles model year 1975 and older.</p> |
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I declare that I have read and understood the above information and the statements I have made are true and correct.

Signature of RME: _____ **Date:** _____

INSTRUCTIONS

(Please Type or Print Clearly)

This interactive document is also available on our WEB Site:

www.smogcheck.ca.gov/

- BAR FILE NUMBER:** Enter the "G" file number issued to your Agency by the BAR. EXAMPLE: GA970000, GB910000, GF950000
- AGENCY:** Enter your Agency's administrative name (i.e., state of, county of, city of, etc. for local government. For federal Agencies enter the departmental level, i.e., Department of Commerce, Department of Justice, General Services Administration, etc.)
- DEPARTMENT:** Enter your Agency's department name (i.e., police department, fire department, motor pool, general services, transportation, equipment, etc. for local government. For federal Agencies enter department level, i.e., Bureau of Reclamation, Department of Air Force, National Park Service, etc.)
- DIVISION:** Enter the division name of your department, if applicable (i.e., water resources division, Los Angeles division, Port Mugu Naval Station, maintenance division, etc.)
- UNIT:** Enter the unit designation name of your department's division, if applicable (i.e., shop # 4, southern area branch office, heavy equipment center, etc.)
- BUSINESS ADDRESS:** Enter your Agency's business address. Do not list a post office box for the business address.
- RME:** Enter the name of the person designated as the Agency's RME (Responsible Managing Employee)
- TELEPHONE:** Enter the telephone number and extension for the RME.
- EMAIL ADDRESS:** Enter the email address for the RME.
- MAILING ADDRESS:** Enter the mailing address if this is a different address from your Agency's business address.
- AFFECTED VEHICLES:** Enter the total number of "Affected Vehicle" that your agency owns or operates. This box should include all vehicles to be smog tested in odd years, even years, and those vehicles six (6) yrs old and newer that do not require smog testing.
- An "Affected Vehicle" is any passenger car, light and heavy duty vehicle, model year 1976 and newer and powered by gasoline and alternate fuels. All 1998 light duty diesel powered vehicles up to 14,000 lbs GVWR are NOW included in the Smog Check Program.
- DIESEL VEHICLES:** Effective January 1, 2010, all 1998 and newer light duty diesel powered vehicles (up to 14,000 lbs. GVWR) are considered an "Affected Vehicle".
- EXEMPT VEHICLES:** Vehicles model year 1975 and older are exempt from the Smog Check Program. Vehicles six (6) model years old and newer are exempt from testing. Do **NOT** include vehicles that are model year 1975 and older in your Agency's count of affected vehicles. The six (6) years old and newer exemption does not apply to diesel powered vehicles. Hybrid gas/electric vehicles are exempt from inspection until further notice. Heavy duty vehicles over 14,000 lbs. GVWR, powered by diesel, GNC, LNG and LPG are **EXEMPT** from the Smog Check Program. Do not include these vehicles in your agency's affected vehicle count. *The (6) or less model-years old exemption from the biennial inspection for gasoline powered vehicles does not apply to diesel powered vehicles.*

If your Agency owns or operates vehicles affected by the Smog Check Program, check the appropriate box to indicate vehicle ownership/usage, then select the method your Agency will use to obtain the required emissions test. Indicate the total number of affected vehicles owned or operated by your Agency and the schedule by which the vehicles will receive the emissions test.

If your Agency does **not** own or operate any vehicles affected by the Smog Check Program, check the appropriate box to indicate no vehicle ownership by your Agency.

Sign and date the form and return to the Bureau of Automotive Repair, Audits and Inspections Unit at the address on the form no later than December 31st of each calendar year.