

SCHOOL BUS LICENSE APPROVAL (ORS 801.460)
SCHOOL ACTIVITY VEHICLE LICENSE APPROVAL (ORS 801.455)

PURCHASER:

Name of Contractor or District _____ District No. _____
Address _____ Zip _____ County _____

FIRM SELLING VEHICLE:

Name _____ Address _____

BODY INFORMATION:

Make _____ Model Year _____ Model _____ Body Serial No. _____
Manufacture date _____ Passenger Capacity _____ Maximum Design Capacity _____ Seat Knee Room _____ inches
Number of Passenger Seat Belts Installed _____ Number of Type 1 Seat Belts _____ Number of Type 2 Seat Belts _____
Body Weight: Empty Loaded _____ Load Distribution: Front _____% Rear _____% Overall Length _____ inches
Body Type: A B C D 10 20 21

Equipment: Windows _____
 Full Drop Split Sash _____ in.
 Reflective Markings
 FMVSS 111 Mirror System
 Posted Passenger Capacity
 Fire Block Seat Upholstery
 P.A. System
 Wheelchair Lift
 Wheelchair Positions # _____
 Full Track Seating
 Other _____

Emergency Exits (specify clear opening)
 Service Doors _____ sq. in.
 Rear Door _____ sq. in.
 Left Side Door _____ sq. in.
 Rear Window _____ sq. in.
 Right Side Door _____ sq. in.
_____ Roof Hatch(es) _____ sq. in. each
_____ Swing Out Window(s) _____ sq. in. each
TOTAL INCHES EMERGENCY EGRESS _____ sq.in.

CHASSIS INFORMATION:

Make _____ Model Year _____ Model _____ I.D. No. _____
Mfg's Rated Axle Capacity _____ front _____ rear Mfg's GVW Rating _____ Wheelbase _____ inches
Engine _____ make _____ cu. in. displ. _____ no cylds. Gas Diesel Propane CNG Hybrid Electric
Tire Size _____ Ply Rating _____ Fuel Tank Capacity _____ Alternator Capacity _____
Brakes: Air Hydraulic (or Battery Capacity for Electric Vehicle)
Equipment: Moisture Ejection System _____ Transmission _____ Wiring Diagram
 Manual to Skirt Automatic Tachometer
 Automatic Manual 4 Speed 2-Speed Axle _____
 Air Dryer Manual 5 Speed Other _____

I hereby certify that this chassis conforms to all applicable rules under ORS 820.100 to 820.120 and that the vehicle is safe for operation on the highway. (ORS 820.130)

_____ By _____
Dealer, Company, or School District

INSTRUCTIONS FOR FILING THIS REPORT

DEALER

The dealer shall complete and certify the body and chassis section of this form and immediately submit to the Oregon Department of Education, 255 Capitol St. NE Salem, Oregon 97310, or Fax to 503 378-5156

OREGON DEPARTMENT OF EDUCATION

Upon approval, copies will be sent to the purchaser and/or dealer.

PURCHASER

Upon receiving approval, submit with license application to DMV. Retain copy of this form until 3 years after disposal of vehicle.

The approval tab from the purchaser's copy must be attached to the license application before a license can be issued by the Motor Vehicles Division.

This form must be type-filled for processing. Handwritten forms will be returned for revision.

Form 581-2251-M (Rev. 10/21)

Purchaser _____
Address _____
Year & Make of Chassis _____
(to be filled in by dealer)
Identification No. _____
(to be filled in by dealer)
License No. _____
(to be filled in by Motor Vehicles Division)

APPROVED:

Oregon Department of Education
Pupil Transportation Services

By _____
Date _____
(Staple this tab to license plate application)