##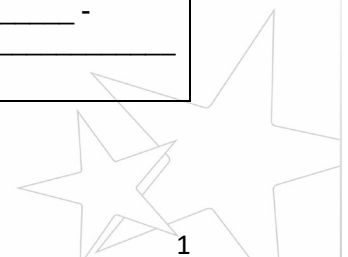 APPLICATION TO PURCHASE NEW SCHOOL BUSES AS COMPLETE UNITS, SCHOOL BUS BODIES, SCHOOL BUS CHASSIS, AND OPTIONAL EQUIPMENT

School Information		
Name of School District	# of Buses Purchased	Method of Payment? ☐Cash ☐Loan*
*If a loan, under what authority or how will the district repay the loan?		

School Bus Body and Chassis		
Year	Body	Model/Series
Tire Size	Wheelbase	Rim Color: ☐Blk ☐YL ☐Chrome ☐Other(MFSAB)_____
Front Axle GAWR	Rear Axle GAWR	Rear Axle Ratio
Type of Bus: ☐ Type A ☐ Type C ☐ Type D / ☐ Special Needs / ☐ School Bus / ☐ MFSAB		
Engine Series **Type D Eng. Only**: ☐Front Mounted ☐ Rear Mounted	Chassis	Brand Transmission
Fuel Type: ☐ Gas ☐ Diesel ☐ Electric ☐ Hybrid Electric ☐ Propane ☐ CNG		
If MFSAB, what color/color scheme is the bus? (Provide proof)		
Seating Capacity:		Cap. After Installation of Wheelchairs:
Price of Complete Bus Unit:		

Optional Equipment		
☐Additional Auxiliary Fan - **Price** _____	☐Fuel Tank (100 gals) – **Price**_____	☐Stop Arm – Air Operated - **Price** _____
☐Additional Heater - **Price**_____	☐Heater Booster Pump – **Price** _____	☐Stop Arm – Vacuum Operated **Price** _____
☐Air Brakes - **Price** _____	☐Heated Mirrors – **Price** _____	☐Stop Arm Violation System - **Price** _____
☐Auxiliary fuel-fired heating system - **Price** _____	☐Illuminated School Bus Sign Front and Rear - **Price** _____	☐Storage Box - **Price**_____
☐Camera System – Interior - **Price** _____	☐Illuminated Stop Arm – **Price** _____	☐Storage Compartment (Luggage 10-15 cubic ft) – **Price** _____
☐Camera System – Exterior - **Price** _____	☐Illuminated Rear Door Stop Sign – **Price** _____	☐Storage Compartment (Luggage 16-23 cubic ft.) – **Price** _____
☐Camera System – Stop Arm - **Price** _____	☐Noise Suppression Switch - **Price** _____	☐Storage Compartment (Luggage 24-30 cubic ft.) – **Price** _____
☐Collision Mitigation System - **Price** _____	☐Pedestrian Alert System - **Price** _____	☐ Traction Assisting Devices - **Price** _____
☐Door – Air Operated- **Price**_____	☐Power Lift – **Price** _____	☐Trash Container and Holding Device - **Price** _____
☐Door – Electric Operated – **Price** ____ _____	☐Public Address System - **Price** _____	☐Wheelchair Tie-Downs (per seating position) _____ - **Price**_____
☐Door Lock - **Price**_____	☐Remote Control External Rear View Mirrors - **Price** _____	
☐Electronic Stability Control – **Price** _____	☐Restraining Device – Integrated Child Restraint Seat (per seat) _____ - **Price** _____	
☐Extended Warranty (Chassis)- **Price** _____		

☐Extended Warranty (Battery Pack) – **Price** _____ ☐Extended Warranty (Body) – **Price** _____ ☐Evacuation Blanket – **Price** _____ ☐Fire Suppression System - **Price** _____ ☐Flat Floor (Specially Equipped Bus) - **Price** _____	☐Restraining Device – 3pt Lap/Shoulder Belt (per seat) ____ - **Price** _____ ☐Restraining Device – Lap Belt Only (per seat) _____ **Price**_____ ☐Retarder System - **Price**_____ ☐Special Service Entrance Door- **Price** _____ ☐Stop Arm – Additional Rear – **Price** _____	

Total price of optional equipment:	
Total price of complete bus unit + optional equipment:	

Vendor/Company Completes This Section	
I certify that the equipment meets or exceeds all Mississippi Minimum Standards for School Buses and the Federal Motor Safety Standards for the year it was manufactured.	
Representative Signature	Title
Name of Company	Address
Motor Vehicle License Number	Date Quoted

School District Completes This Section After School Board Approval	
I certify that the school board of _____ School District approved the total price of the complete bus unit including optional equipment from the approved vendor/company on the date specified in this application form and requests approval from the Mississippi Department of Education, Office of Safe and Orderly Schools, Division of Pupil Transportation.	
Date School Board Approved the Purchase	Superintendent's Name (print)
Superintendent's Signature	Date Signed

Mississippi Department of Education/Division of Pupil Transportation Completes This Section	
Based on the information contained within this application, the local school board is authorized to order, take delivery of, and pay for the equipment listed.	
Pupil Transportation Administrator's Signature and Date ☐**APPROVED** ☐ **NOT APPROVED**	
Comments:	