CERTIFICATE OF PASSED PRIVATE BUS SAFETY INSPECTION

State Form 55962 (R4 / 12-24)
INDIANA BUREAU OF MOTOR VEHICLES

The legal authority for this form is IC 9-18.1-3 and IC 9-19-22-3.

INSTRUCTIONS:

1. *Complete in blue or black ink or print form.*
2. *The passenger capacity must be declared in Section 1 by the owner/registrant.*
3. *A safety inspection must be completed on a bus that meets the definition of a private bus under Indiana Code 9-13-2-133 and is designed to transport more than fifteen (15) passengers, including the driver.*
4. *A safety inspection must be performed by a person authorized by the Indiana State Police under Indiana Code 9-19-22-3(b)(1) and must be completed according to the prescribed safety standards outlined in Indiana Code 9-19-22-3.*
5. *This certificate must be submitted to the Indiana Bureau of Motor Vehicles by the vehicle registrant upon initial registration and for each subsequent registration renewal.*
6. *The inspection completion date entered on this certificate may not be more than one year prior to the date of the private bus registration transaction.*

If a safety inspection was completed in accordance with 49 CFR 396.17, this certificate of inspection may serve as the equivalent and must be carried in the vehicle being operated as a "private bus" at all times and must be presented upon demand of any law enforcement officer.

SECTION 1 - VEHICLE INFORMATION

Vehicle Identification Number (VIN)	Passenger Capacity, including the driver

I swear or affirm under the penalties for perjury that the vehicle identified in this section is designed or used to transport the number of passengers indicated so indicated.

Name of Registrant	Signature of Registrant	Date *(mm/dd/yyyy)*

SECTION 2 – AFFIRMATION OF COMPLETION OF SAFETY INSPECTION

I swear or affirm under the penalties for perjury that I am authorized under Indiana Code 9-19-22-3(b)(1) to perform safety inspections for private buses, that the inspection for the above mentioned vehicle was completed according to the inspection safety standards prescribed in Indiana Code 9-19-22-3, and that the private bus has passed all of the inspection items for the annual vehicle inspection report based on the standards set forth at 49 CFR 396.

Name of Business *(where inspection was performed)*

Street Address *(where inspection was performed) (number and street)*	City	State	ZIP Code

Name of Inspector	Signature of Inspector	Date *(mm/dd/yyyy)*

For all questions or any additional information about private bus safety inspections, please visit the Indiana State Police (ISP) website at http://in.gov/isp/3137.htm . You may also contact ISP's Commercial Vehicle Enforcement division by telephone or e-mail.

Commercial Vehicle Enforcement Division
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