

SECURE TRANSPORTATION <u>VEHICLE PERMIT</u> APPLICATION CHECKLIST

Application for Vehicle Permit – One for Each Vehicle (Form 3)
Copy of Certificate of Insurance Showing Automobile Liability Coverage
Certificate of Mechanical Inspection Form Completed by Licensed Mechanic - One for Each Vehicle (Form 4)
County Vehicle Inspection Report - One for Each Vehicle (to be completed by contracted inspection managed by Jefferson County)
Application Fee



APPLICATION FOR SECURE TRANSPORTATION VEHICLE PERMIT (FORM 3)

Please submit one form per vehicle to be permitted

Name of Secured Transportati	on Service:
Contact Name:	Phone Number:
Type of Permit Sought: Type 1 (Partitioned)	☐ Type 2 (Non-Partitioned)
Vehicle Information:	
Make:	
Model:	
Chassis Year:	
VIN:	
License Plate No.:	
Date in Service:	
Color:	
Other Distinguishing Characte	ristics (e.g. logo):
Acknowledgement:	
=	ges that the Permit granted pursuant to this application is not that the vehicle is sold or transferred, the permit will not transfer.
applicable laws and regulation undersigned represents that	rms that the Secure Transportation Service is compliant with all is required to operate the above-reference vehicle in Colorado. The he/she has the authority to act on behalf of the Secured information in this application and accompanying documentation is of his/her knowledge.
Name	Date
Title	



Certificate of Mechanical Inspection (FORM 4)

Name of Secured Trans	portation Serv	rice:		
Vehicle Information:				
Chassis Year:	Make: _		Model:	
VIN:		Mileage	·	<u>-</u>
	MECHAN	NICAL EVALUAT	TION CHECK LIST	
System	Acceptable	Not Acceptable	Comi	ments
Wheels, Tires, and brake systems				
Steering, alignment, and suspension system				
Climate Control and Ventilation System				
Lighting and Electrical System				
Exhaust System				
Fuel System				
Glass, body, and sheet metal				
Certification:				
As a qualified motor vehice and have determined that not guarantee future stat	t the vehicle is	in safe operatir	ng condition as of this da	te. This evaluation does
Company Shop or Agency	Name	Mechan	ic name (print or type)	_
Address		———— Mechan	ic Signature	 Date