## **NSW Department of Education**

Assisted School Travel Program



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## New vehicles or renew approved vehicle details

This form is for contractors to notify the Assisted School Travel Program (ASTP) of new vehicles or renew existing vehicle details.

## **Guidance notes:**

- Please ensure up-to-date insurance and registration policies are provided within 7 days after the commencement date and within 7 days of the anniversary renewal date. Periodic audits are conducted by the ASTP.
- The contractor must not use any vehicle for the provision of service until written approval is received by the Department.
- Vehicles will only be considered if under 15 years from the date of manufacture.
- Please allow up to 10 business days for this request to be processed.
- Email this completed form with all supporting documents to contractors.astp@det.nsw.edu.au.

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New vehicles or renew existing vehicle details Wheelchair vehicle ☐ Hoist ☐ Ramp Configuration 1 Number of passenger seats: \_\_\_\_\_ Wheelchair spaces: \_\_\_\_\_ Configuration 2 Number of passenger seats: \_\_\_\_\_ Wheelchair spaces: \_\_\_\_\_ **Configuration 3** Number of passenger seats: \_\_\_\_\_ Wheelchair spaces: \_\_\_\_\_ Configuration 4 Number of passenger seats: \_\_\_\_\_ Wheelchair spaces: \_\_\_\_\_ Run details If known, please indicate which run you wish for this vehicle to be assigned to: Run number: \_\_\_\_\_ start date: \_\_\_\_\_ end date: \_\_\_\_\_ **Documents attached** ☐ Transport for NSW Vehicle certificate of registration ☐ Copy of vehicle comprehensive insurance policy ☐ Copy of the vehicle engineering certificates (for modified vehicles) ☐ Consent to vehicle checks and disclosure of information form ☐ Hire car/leasing arrangements will require the above details on an official letterhead confirming the details from a supplier **Declaration** I declare that all the information provided in this form is, to the best of my knowledge, true and correct.

Contractor signature: \_\_\_\_\_ Date: \_\_\_\_\_