

**Public Transportation Management System  
Physical Rolling Stock Inventory & Verification of Continued Use**

*I hereby certify that all information reported in the inventories reflects true, accurate and complete information for the agency/organization listed and that project equipment purchased through a state or federal grant agreement is still being used in accordance with the terms and conditions of the grant agreement.*

*Signature and Title*

*Date*

**Agency/Organization:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

Year/Make/Model	Vehicle Code	Vehicle Identification Number (VIN)	Agency Vehicle Number	Current Odometer	Condition (points)	Age (years)	Remaining Useful Life (years)	Replacement Cost \$	ADA Access (yes/no)	Seating Capacity	Fuel Type	WSDOT Title (yes/no)
1.												
2.												
3.												
4.												
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15.												