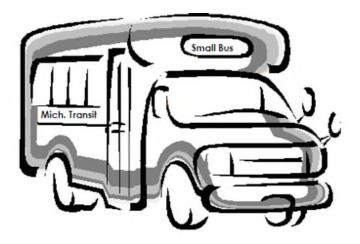
State Vehicle Purchasing Program VEHICLE PACKET

FOR

BATTERY ELECTRIC CUT-AWAY BUSES

Class I - 5 years/150,000 miles Class II - 7 years/200,000 miles 18 & 22 Passenger Non-lift buses - Lift buses with Alternate Seating



From August 2, 2022 to August 1, 2024



Office of Passenger Transportation Program Administration Section

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I. Introduction

Purpose

This packet contains vehicle ordering information and related forms for purchasing from the State Vehicle Purchasing Program.

Instructions

- 1. Please read the *State Vehicle Purchasing Program Guidelines* (available on the MDOT website) before ordering any vehicle. These guidelines provide information, procedures, and a checklist to assist with a vehicle purchase.
- Complete the Bus Color Sheet (if ordering stripes and/or colors), Bus Title and Delivery Information, and New Vehicle Order Form (found on the MDOT State Vehicle Contracts & Procurement website under "Battery Electric Bus").
- 3. Submit the completed forms (section III) to the vendor.
- 4. After receiving the vehicle, complete the Post Delivery Audit Work Sheets (section IV).

II. Ordering and Service Information

• To order a Light-Duty Small or Small bus, complete the separate New Vehicle Order Form (found on the MDOT State Vehicles & Contracts website under "Light-Duty Small" and "Small Bus") for the respective bus vendor.

Vendor	Forest River		
v chuor	Class I & II		
	Battery Electric Cut-away		
	Buses		
State Vehicle			
Purchasing			
Program	22000001206		
Contract #			
Funding	Low bidder. 100% paid State and		
0	Federal except optional equipment		
Sources	purchased outside of the contract.		
Order	Blair Taseff		
Contact	Regional Account Manager/Contract		
	Admin.		
	Transportation Equipment Sales		
	Corp. (TESCO)		
	6401 Seaman Road PO Box 167230		
	Oregon, OH 43618		
	(800) 227-3572 Office		
	(440) 653-0193 Mobile		
	(419) 836-8460 Fax		
C	btaseff@tescobus.com Josh Wise		
Service			
Contact	Warranty Manager 6401 Seaman Rd		
	Oregon, Ohio 43616		
	419-720-7471		
	1-800-227-3572		
	Jwise@tescobus.com		
Manufacturer	Forest River Bus, LLC		
	Mike Anglemyer		
	Forest River Bus		
	2367 Century Dr		
	Goshen, IN 46528		
	Office 800-348-7440 x 52115		
	manglemyer@forestriverinc.com		

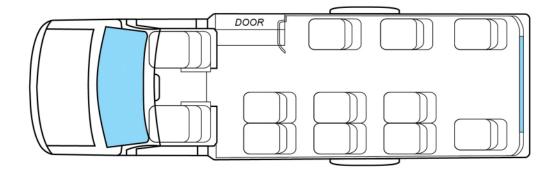
State of Michigan Contacts

	Jeff Turner	Rob Pearson	
	Office of Passenger Transportation	Supervisor BR&IU	
MDOT	(517) 335-1700	Office of Passenger Transportation	
MDOT	Fax: (517) 335-1702	(517) 930-3680	
	E-mail: turnerj3@michigan.gov	Fax: (517) 335-1702	
		E-mail: PearsonR1@michigan.gov	

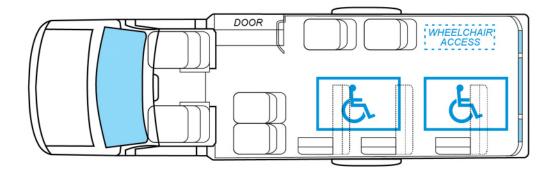
III. Vehicle Information

Light-Duty Small and Small Bus Floor Plans

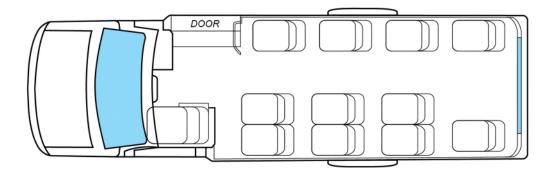
Class I Wheelbase 138" Minimum



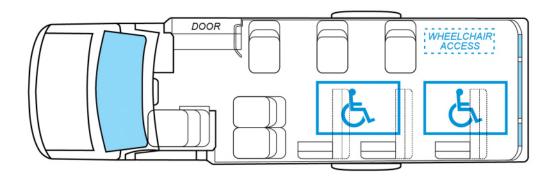
10 Passenger Bus without Lift



4 + 2 Passenger Bus with Lift

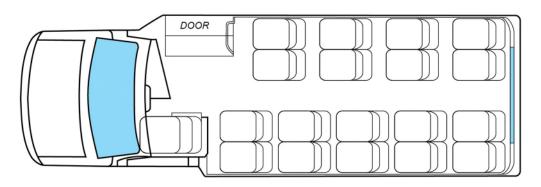


11 Passenger Bus without Lift

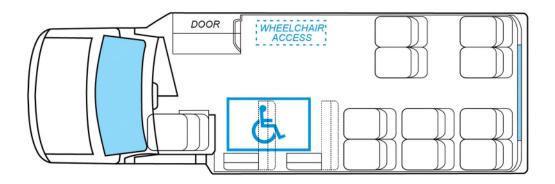


5 + 2 Passenger Bus with Lift

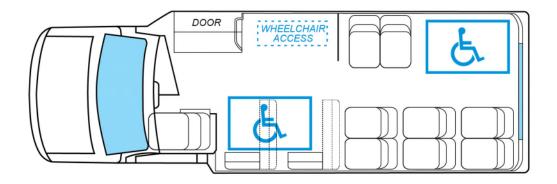
Class II Wheelbase 158" Minimum



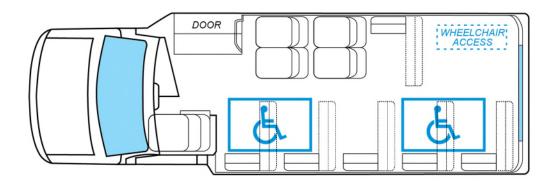
18 Passenger Bus without Lift



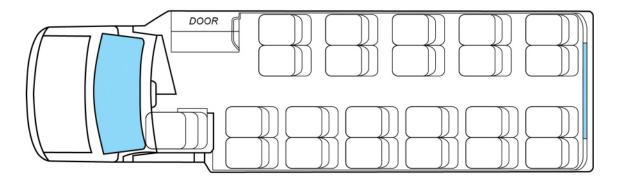
10 + 1 Passenger Bus with Lift



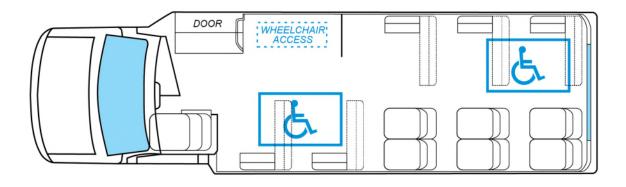
8 + 2 Passenger Bus with Lift



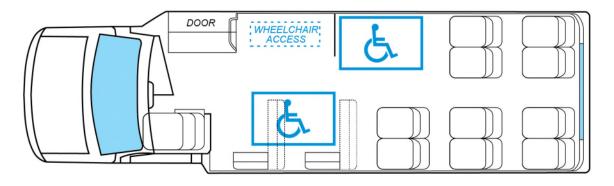
4 + 2 Passenger Bus with Lift



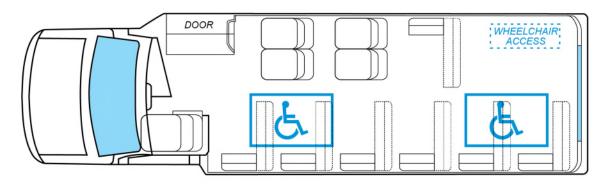
22 Passenger Bus without Lift



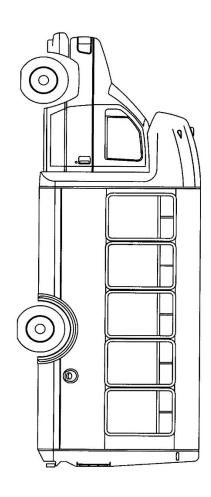
6 + 2 Passenger Bus with Lift



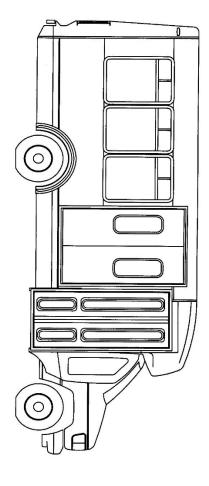
10 + 2 Passenger Bus with Lift

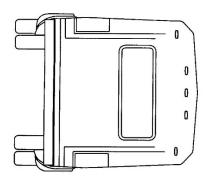


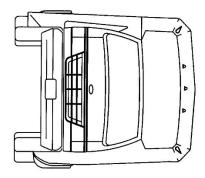
4 + 2 Passenger Bus with Lift



5.







Bus	Title	and	Delivery	Information
-----	-------	-----	----------	-------------

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TRANSIT AGENCY_____

CONTRACT NO._____ FED I.D. #_____

TITLE INFORMATION

Name of City, County, or Agency

.

Street Address (Post Office Box Not Acceptable)

First Secured Party (if required)

Tax I.D. Number	Ford FIN Number
City	Zip Code
eny	Elp Cour

DELIVERY ADDRESS					
Name of Operating Transit Agency					
Street Address (Post	Street Address (Post Office Box Not Acceptable)				
City	Zip Code	County			
Contact Person	Te	lephone Number			

Michigan Department of Transportation Office of Passenger Transportation POST-DELIVERY AUDITS ATTACHMENT A-8 CHECKLIST

Contract #	Vehicle Description	ontract #	
Dealer	Manufacturer	ealer	
Contract Term	Contract Admin. (MDOT or Agency)	ontract Term	

Post Delivery Audit

	Item	Completion Date	Initials
1	Total cost of vehicles purchased in this order: \$ If less than \$150,000, skip to #2 below. Do not complete or submit Attachments A10-12		
1.1	Buy America Certification stating regulations are still being met, if required		
2	Bid Certification		
2.1	Vehicle inspection		
2.2	Vehicle road test		
2.3	Were there 11 or more (Urban over 200,000 population) or 21 or more for (Rural or Urban under 200,000 population) vehicles purchased? Yes No		
2.4	If yes obtain Inspectors report*		
2.5	Certification vehicle meets bid specifications		
2.6	Federal Motor Vehicle Safety Standard's certification		

To be completed by Transit Agency

*The resident inspector's (Administrative Fee can be used to hire inspector) report must include, at a minimum:

• Accurate records of all bus construction activities (such as component manufacturing processes, final assembly activities, and quality control data collected)

and

• A description of how the construction and operation of the bus(es) fulfills the contract specifications (the report should reference the above cited manufacturing processes, final assembly activities, and quality control data).

Michigan Department of Transportation Office of Passenger Transportation POST-DELIVERY AUDITS ATTACHMENT A-9 FEDERAL MOTOR VEHICLE SAFETY STANDARDS CERTIFICATIONS

Check one that applies:

- The vehicles proposed under this contract are subject to the Federal Motor Vehicle Safety Standards (FMVSS) issued by the National Highway Traffic Safety Administration (NHTSA) in part 571 of this title.
- The vehicles proposed under this contract are not subject to the Federal Motor Vehicle Safety Standards (FMVSS) issued by the National Highway Traffic Safety Administration (NHTSA) in part 571 of this title.

As required by Title 49 of the CFR, Part 663 – Subpart D, I have received a copy of the manufacturer's self-certification in for mation concerning these vehicles compliance with relevant Federal Motor Vehicle Safety Standards. I have had this certification in my possession at both the pre-award and post-delivery stages of the procurement.

Vehicle Description	
Dealer	
Manufacturer	
Recipient	
Contact Name	
Position Title	
Recipient Authorized	
Signature	
Date	

To be completed by Transit Agency

Vendor to provide Post-delivery FMVSS Certification

Michigan Department of Transportation Office of Passenger Transportation POST-DELIVERY AUDITS ATTACHMENT A-10 BUY AMERICA CERTIFICATION Post-delivery

As required by 49 CFR part 663 – Subpart C, _______(the recipient) is satisfied that the vehicles to be received, _______(the number and description of vehicles) from _______(the manufacturer), meet the requirements of 49 U.S.C. 5323(j), as amended. The recipient \Box , or its appointed auditor \Box ______(the auditor – not the manufacturer or its agent), has reviewed documentation provided by the manufacturer, which lists (1) the actual component and subcomponent parts of the vehicles identified by the manufacturer, country of origin, and cost; and (2) the actual location of the final assembly point for the vehicles, including a description of the activities that took place at the final assembly point and the cost of final assembly.

Print Name			
Recipient Authorized			
Signature			
Position Title			
Date			
To be completed by Transit Aganay			

To be completed by Transit Agency

Michigan Department of Transportation Office of Passenger Transportation POST-DELIVERY AUDITS

ATTACHMENT A-11 BUY AMERICA POST-DELIVERY AUDIT Component Parts

	Component	Supplier/Manufacturer	Address	Country of Origin	Cost or % of Domestic Origin
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Vendor:

Vendor's Signature:

PLEASE MAKE ADDITIONAL COPIES IF NECESSARY

Completed by vendor – vendor can provide actual domestic content worksheet

Michigan Department of Transportation Office of Passenger Transportation POST-DELIVERY AUDITS

ATTACHMENT A-12 BUY AMERICA POST-DELIVERY AUDIT Sub-component Parts

	Subcomponent	Supplier/Manufacturer	Address	Country of Origin	Cost or % of Domestic Origin
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Vendor:

Vendor's Signature:_____

PLEASE MAKE ADDITIONAL COPIES IF NECESSARY

Completed by vendor – vendor can provide actual domestic content worksheet

Michigan Department of Transportation Office of Passenger Transportation POST-DELIVERY AUDITS ATTACHMENT A-13 BID SPECIFICATION AUDIT CERTIFICATION Post-Delivery

I have road tested and visually inspected the vehicle purchased. I certify that the vehicle delivered under this contract meets the contract specifications used for this solicitation.

There were fewer than eleven vehicles procured under this purchase.

There were eleven or more vehicles procured under this purchase. A copy of the inspector's report is attached.

Vehicle Description	
Dealer	
Manufacturer	
Recipient Contact Name	
Position Title	
Recipient Authorized Signature	
Date	

To be completed by Transit Agency

IV. Acceptance/Inspection Checklist

Battery Electric Bus Vehicle Acceptance/Inspection Checklist can be found on Office of Passenger Transportation web site:

https://www.michigan.gov/mdot/travel/mobility/pub-transit/state-vehicle-contracts-and-procurement