



# Regional Bus Utilisation Funding Application for Financial Assistance

## Part A - Operator details

Operator name

Office use only

Application number

ABN

Trading as

Contract area

Postal address

Postcode

Contact name

Telephone number

Facsimile number

Email address

Mobile phone number

## Part B - Replacement bus details

Is bus for growth?

Yes  Go to Part C - Proposed vehicle description details

No  Please provide replacement vehicle details below

**Vehicle being replaced**

For multiple vehicles (See attached table)

Registration number

Make and model

VIN

Date of manufacture from the compliance plate

## Part C - Three quotations of proposed vehicle description details

### Quotation 1

Make/Model	Number of passenger seats (excluding driver)	Number of standing passengers	Number of wheelchair spaces	Number of accessible vehicles in fleet

Telematics system	Fire suppression	Air conditioned	Security cameras	Bus driver safety barriers	Seatbelts	Emission standard (i.e. Euro 5)	Fuel type
Yes <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Type <input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Standard <input type="text"/>	Diesel <input type="checkbox"/> Electric <input type="checkbox"/> Hybrid <input type="checkbox"/> Hydrogen <input type="checkbox"/> Other <input type="text"/>

Quoted price (please attach copy of quote and specifications)

\$  (GST exclusive)

Expected delivery date

/  /

**Quotation 2**

Make/Model	Number of passenger seats (excluding driver)	Number of standing passengers	Number of wheelchair spaces	Number of accessible vehicles in fleet

Telematics system	Fire suppression	Air conditioned	Security cameras	Bus driver safety barriers	Seatbelts	Emission standard (i.e. Euro 5)	Fuel type
Yes <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Type <input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Standard <input type="text"/>	Diesel <input type="checkbox"/> Electric <input type="checkbox"/> Hybrid <input type="checkbox"/> Hydrogen <input type="checkbox"/> Other <input type="text"/>

Quoted price (please attach copy of quote and specifications)    Expected delivery date

\$ <input type="text"/> (GST exclusive)	<input type="text"/> / <input type="text"/> / <input type="text"/>
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**Quotation 3**

Make/Model	Number of passenger seats (excluding driver)	Number of standing passengers	Number of wheelchair spaces	Number of accessible vehicles in fleet

Telematics system	Fire suppression	Air conditioned	Security cameras	Bus driver safety barriers	Seatbelts	Emission standard (i.e. Euro 5)	Fuel type
Yes <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Type <input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Standard <input type="text"/>	Diesel <input type="checkbox"/> Electric <input type="checkbox"/> Hybrid <input type="checkbox"/> Hydrogen <input type="checkbox"/> Other <input type="text"/>

Quoted price (please attach copy of quote and specifications)    Expected delivery date

\$ <input type="text"/> (GST exclusive)	<input type="text"/> / <input type="text"/> / <input type="text"/>
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## Operator certification

I certify that:

- I have read and understand the Regional Urban Bus Vehicle Policy regarding funding and obligations for the purchase of a vehicle
- The information provided on this application is true and correct
- I also understand that a person intentionally providing false information to obtain a benefit may be liable for a fine under section 149(3) of the *Transport Operations (Passenger Transport) Act 1994*.

**Privacy Statement:** The Department of Transport and Main Roads (TMR) is collecting the information on this form for the purpose of database maintenance and to assist in the assessment of your funding application. Authorised departmental officers will have access to this information for the preparation of correspondence and for the monitoring of bus purchases. Your personal information will not be disclosed to any third party without your consent unless required to do so by law.

Applicant's name (please print)

Signature

Date

Please return the completed form together with:

- the vehicle quote for each option (minimum three quotes)
- the vehicle specifications
- the fleet details.

Email: [RegionalBus@translink.com.au](mailto:RegionalBus@translink.com.au)

Further information about Regional Bus Utilisation Funding and a copy of the policy is available at [www.tmr.qld.gov.au](http://www.tmr.qld.gov.au).

TMR will inform you in writing of its decision with regard to your application for financial assistance.

### Please Note:

- It is important that operators do not proceed with the order or purchase of a vehicle prior to obtaining TMR's written decision on its application.
- Applications for funding will not be considered or be eligible for payment retrospectively.
- Financial assistance will be paid within a reasonable time only after the vehicle is inspected to TMR's satisfaction prior to delivery and all necessary documents have been provided to TMR.
- Financial assistance is only available to regional urban bus service contract holders for urban regional route services.
- Financial assistance will not be available where a vehicle is acquired through an operating lease.
- A separate application for each vehicle is required.
- Refer to the Regional Urban Bus Vehicle Policy for information on ticketing machine funding.

**Attachment - Vehicles being replaced**

No.	Registration Number	VIN	Vehicle Make	Vehicle Model	Date of manufacture from the compliance plate
1					
2					
3					
4					
5					
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