Print Form Clear Form

Michigan Department
of Transportation
3062 (08/2022)

FY 20__ VEHICLE INVENTORY

NOTE: Vehicles to be replaced in this application should be identified with an asterisk prior to the "Model Year & Chassis Type" Column.

INSTRUCTIONS: Complete and return it to the Michigan Department of Transportation.

NAME OF AGENCY (legal organization name)

MODEL YEAR & CHASSIS TYPE	LOANER (I) OR OWNED VEHICLE (O)	VEHICLE ID NUMBER (Chassis Serial Number)	LOCAL VEHICLE NUMBER	STATE LICENSE NUMBER	SEATING CAPACITY	LIFT EQUIPPED	MILEAGE AS OF 10/15/2022	IN SERVICE DATE	FUNDING SOURCES

TOTAL NUMBER OF VEHICLES	NUMBER OF LIFT/RAMP EQUIPPED VEHICLES	