**Section 448.APPENDIX E Requisition for Certificates of Safety and Lane Forms**

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|  | | | STATE OF ILLINOIS  DEPARTMENT OF TRANSPORTATION  VEHICHLE INSPECTION SECTION  2300 SOUTH DIRKSEN PARKWAY | | | |  | | |
| REQUISITION FOR:  1. Certificates of Safety  2. Lane Forms | | |
|  | | | SPRINGFIELD, ILLINOIS 62764  PHONE: 217/782-2920 | | | |
| *PLEASE FURNISH THE FOLLOWING ITEMS* | | | | Station No. | | Telephone No. | | Date | |
|  | VIR-1 | Vehicle Inspection  Report | |
| Name of Station | | | | | |
|  | MSR-1-75-T | Monthly Station Report  (Truck) | |
| Address | | | | | |
|  | MSR-1-75-B | Monthly Station Report  (Bus) | |
| City or Town | | | | Zip Code | |
|  | SV1-1241 | Report of Lost or Stolen  Safety Certificates | |
| Signature of Authorized Person | | | | | |
|  | SV1-1274 | Requisition Card for  Supplies | |
|  | SV1-1280 | Defective, Mutilated or  Replacement C/S Report | | *PLEASE FURNISH THE FOLLOWING C/S'S AND/OR NUMERALS* | | | | | |
| # PADS | C/S'S OR NUMERALS | | | | TOTAL AMT. |
|  | SV1-1312 | Rejected Vehicle Card | |  | School Bus C/S's (10 per pad) | | | |  |
|  | Truck C/S's (25 Per pad) | | | |  |
|  | VIR Mailers | | |  | ILC.C.Bus C/S's (10 per pad) | | | |  |
|  | Other: | | |  | School Bus/LC.C.Inserts – Circle One  1 2 3 4 5 6 7 8 9 10 11 12 | | | |  |
| *IMPORTANT:* *Unless the name, address, and telephone number are correct, the Department will not be responsible for delivery of the items requested.* | | | | | | | | | |
| SV1-1274 (Rev. 9-75) | | | | | | | | | |