



Instructions for Application for Secure Transportation Vehicle Permit

1. Enter the name under which the secure transportation service will be licensed.
2. Check the type of permit requested for this vehicle. Only check one.
3. Complete the contact information for the registered owner of the secure transportation vehicle.
4. Complete the contact information for the person applying for the permit.
5. Complete the information for the secure transportation vehicle.
6. Have vehicle inspected by qualified mechanic. Have mechanic complete the Certification of Motor Vehicle Mechanical Evaluation.
7. Contact Archuleta County Vehicle Inspector at fleet@archuletacounty.org or (970) 264-8412 to schedule a Vehicle Inspection. The Vehicle Inspector will complete the Vehicle Inspection Report.

VIN is the vehicle identification number assigned by the manufacturer. Generally, it can be found on the number plate visible through the lower corner of the windshield on the driver side.

Briefly describe the secure transportation vehicle color scheme. Examples: black, white over silver with blue beltline stripe, red with gold lettering.

Describe any other significant distinguishing characteristics. For example: yellow sunburst logo, green and blue logo showing mountain lake scene.

Attachments required for all applications:

- Proof of motor vehicle insurance.
- Certification of Mechanical Evaluation.
- Vehicle Inspection Report.



Application for Secure Transportation Vehicle Permit

Name of Secure Transportation Service: _____

Type of Permit (check one):

- Type 1 (Partitioned)
- Type 2 (Non-Partitioned)

Contact Information for Secure Transportation Vehicle Owner:

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____ (business)

_____ (mobile)

Email Address: _____

Contact Information for the Person Applying for the Secure Transportation Vehicle Permit:

Name: _____

Physical Address: _____

City/State/Zip: _____

Mailing Address: _____

City/State/Zip: _____

Telephone: _____ (business)

_____ (mobile)

Email Address: _____

Secure Transportation Vehicle Information:

Chassis year: _____

Make: _____

Model: _____

VIN: _____

Colorado License Plate Number: _____

Date in Service: _____

Color: _____

Other Distinguishing Characteristics: _____

Submitted by:

Signature: _____

Printed Name: _____

Date: _____

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