

## **Appendix 3 Sample Bus Operator Accreditation Documentation**

- The following sample forms are provided to assist bus operators to meet the Accreditation Conditions in
    - Management Information System (MIS)
    - Driver Management and Monitoring
    - Vehicle Maintenance Management (VMMS), and
  - Operators may choose to use the sample forms in part or whole.
  - Generally the content of each form reflects the minimum requirements.
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### **Management Information System (MIS)**

- Form 1: Fleet register, that includes the vehicle identification number (VIN), fleet number (if appropriate) and registration details of each vehicle,
- Form 2: Register of insurance details of each vehicle in the fleet,
- Form 3: Maintenance record of each vehicle,
- Form 4: Records of Roads and Traffic Authority Heavy Vehicle Inspection Scheme in relation to each vehicle in fleet,
- Form 5a: Copies of drivers' vehicle defect reports (bus specific option)
- Form 5b: Copies of drivers' vehicle defect reports (fleet specific option)
- Form 6: Register of reports of accident involving vehicles in the fleet,
- Form 7a: Correspondence, Comments and Issues register detailing all complaints received in respect of each complaint (bus driver)
- Form 7b: Correspondence, Comments and Issues Register detailing all complaints received in respect of each complaint (general)

### **Driver Management and Monitoring**

- Form 8a Driver Register
- Form 8b Driver Licence and Authority Check Register

### **Vehicle Maintenance Management System (VMMS)**

- Form 9 Maintenance Staff Register
- Form 10 Daily Vehicle Check
- Form 11 Vehicle Data
- Form 12 Vehicle Daily Maintenance Record

Form 1: **Management Information System (MIS)**  
(Requirement under Clause 80 (1)(a) of the Passenger Transport Regulation 2007)

Fleet register (Sample)

Form 1

Issue No:.....Date:.....

**Fleet register [Company Name]**

As a condition of bus operator accreditation this form must be kept up to date.

<b>Fleet No.</b>	<b>Registration No.</b>	<b>Chassis Type</b>	<b>Vehicle Identification Number (VIN)</b>	<b>Engine No.</b>	<b>Body Type</b>	<b>Body ref No.</b>	<b>Manufacture Date</b>	<b>Seat Cap</b>	<b>Stand Cap</b>	<b>Insured Value</b>	<b>Finance Company</b>	<b>Finance Document</b>

**Form 2: Management Information System (MIS)**  
**(Requirement under Clause 80 (1)(b) of the Passenger Transport Regulation 2007)**

**Register of insurance details of each vehicle in the fleet (Sample)**

**Form 2**

Issue No:.....Date:.....

**Register of insurance details of each vehicle in fleet [Company Name]**

As a condition of bus operator accreditation this form must be kept up to date.

**TPPD = Third Party Property Damage**

<b>Fleet No.</b>	<b>Registration No.</b>	<b>Insured Value</b>	<b>TPPD Insurance No.</b>	<b>TPPD Insurance Value</b>	<b>TPPD Expiry Date</b>	<b>TPPD Finance Company</b>	<b>CTP insurance No.</b>

**Form 3: Management Information System (MIS)**  
**(Requirement under Clause 80 (1)(c) of the Passenger Transport Regulation 2007)**

**Maintenance record of each vehicle (Sample)**

**Form 3**

Issue No:.....Date:.....

**VEHICLE SAFETY INSPECTION FORM – MAINTENANCE RECORD**

[ **Company Name**]

The following Maintenance Procedure is to supplement and is in addition to the normal company service and Vehicle Manufacturers Specifications

<b>Company/Owner:</b>		<b>Registration Number</b>
<b>Address:</b>		

***MAINTENANCE RECORD***

All maintenance and repair of the following systems must be recorded: Brakes, suspension, steering, chassis, body structural members and stub axles.

<b>Date</b>	<b>Details of Maintenance/Repair</b>	<b>Odometer</b>	<b>Carried Out By</b>

**Form 4: Management Information System (MIS)**  
**(Requirement under Clause 80 (1)(d) of the Passenger Transport Regulation 2007)**

**Records of Roads and Traffic Authority Heavy Vehicle Inspection Scheme in relation to each vehicle in fleet (Sample)**

Form 4 Issue No:.....Date:.....

**Fleet register - RTA HVIS [Company Name]**

As a condition of bus operator accreditation this form must be kept up to date.

Fleet No.	Registration No.	Vehicle Identification Number (VIN)	HVIS Inspection Date	HVIS Inspection Date	HVIS Inspection Date	HVIS Inspection Date	HVIS Inspection Date	HVIS Inspection Date	HVIS Inspection Date

**Form 5a: Management Information System (MIS)**  
 (Requirement under Clauses 80 (1)(e) and 81 of the Passenger Transport Regulation 2007)

**Copies of drivers' vehicle defect reports (Bus Specific option) (Sample)**

**Note: operator can choose bus specific or fleet specific option.**

**Form 5a**

Issue No:.....Date:.....

**Fault Reporting System – Defects and Clearance Report / Bus Specific**

**[Company Name]**

Defect Report							
Company / operator name:							
Driver / Reporter name:					Vehicle Type:		
Registration Number:		Fleet Number:					
Item No	Date	Description of vehicle defect or symptoms	Action taken (tick)			Actioned by (name & initials)	Reason for action
			Repair	Defer	Monitor		

**Clearance Report**

Item No	Mileage	Date	Action Taken	Certified by (name and initials)

**Copies:**

1. **Maintenance/Operations**
2. **Driver**
3. **Remains in Book**

**Form 5b: Management Information System (MIS)**  
 (Requirement under Clauses 80 (1)(e) and 81 of the Passenger Transport Regulation 2007)

**Copies of drivers' vehicle defect reports (Fleet Specific option) (Sample)**

**Note: operator can choose bus specific or fleet specific option.**

**Form 5b** Issue No:.....Date:.....  
**Fault Reporting System – Defects and Clearance Report / Fleet Specific**  
**Daily Booking Sheet** [Company Name]

Defect Report							
Company / operator name:							
Depot:			Date				
Item No	Bus Number	Description of vehicle defect or symptoms	Action taken (tick)			Actioned by (name & initials)	Reason for action
			Repair	Defer	Monitor		

Clearance Report					
Item No	Bus No.	Kms	Date	Action Taken	Certified by (name and initials)

**Form 6: Management Information System (MIS)**  
**(Requirement under Clause 80 (1)(f)(g) of the Passenger Transport Regulation 2007)**

**Accident register reports of accident involving vehicles in the fleet (Sample)**

**Form 6**

Issue No:.....Date:.....

**Accident Register [Company Name]**

This form needs to be completed whenever there is an accident involving a public passenger vehicle.

Date of Accident:	Time of Accident	
Exact location:		
Driver name:		
Bus Fleet No:	Bus Registration No:	
Description of accident: (include sketch if required)		
Other parties involved:		
Name:		
Address:		
Contact Details		
Drivers Licence Details (If applicable)		
Incident /Accident reported to OTSi as per Bus Operator Accreditation requirement?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date and time incident or accident reported to OTSI		
Was a 72 Hour report required by OTSI?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes when was it submitted?		



**Form 7a: Management Information System (MIS)**  
 (Requirement under Clause 80 (1)(h) of the Passenger Transport Regulation 2007)

**Complaints Register - Correspondence, comments and issues register detailing all correspondence received in respect of each correspondence (bus driver) (Sample)**

Form 7a

Issue No:.....Date:.....

**Record of Correspondence, Comments or Issue Regarding Bus Driver**

[Company Name]

For use in situations where a member of the public files a complaint against a company driver

Date Lodged	Correspondence Lodged by: Name:..... Address:..... ..... Telephone:.....	Received by: Name:	Complaint against: Name:
Date of Incident	Nature of complaint:		
	Details		
Date	Follow up action: (Including any driver interviews etc)		
	Details	Person carrying out	
Date	Correspondence follow up action:		
	Details	Person carrying out	

**Form 7b: Management Information System (MIS)**  
 (Requirement under Clause 80 (1)(h) of the Passenger Transport Regulation 2007)

**Complaints Register - Correspondence, comment and issue register detailing all correspondence received in respect of each correspondence (general) (sample)**

**Form 7b** Issue No:.....Date:.....  
**Public Correspondence, Comments or Issue Register (General)**

**[Company Name]**

This form needs to be completed whenever there are complaints received by the bus operator from members of the public. A separate register (Form 7a) is to be used when the subject of the correspondence, comment or issue refers to a bus driver.

Date Lodged	Correspondence Lodged by:	Received by:
	Name:..... Address:..... ..... Telephone:.....	Name:
<b>Date of Incident</b>	<b>Nature of correspondence:</b>	
Details		
<b>Date</b>	<b>Follow up action:</b>	
	Person carrying out	
Details		
<b>Date</b>	<b>Correspondence follow up action:</b>	
	Person carrying out	
Details		

**Form 8a: Records of Drivers  
(Requirement under Clause 21 of the Passenger Transport Regulation 2007)**

**Driver Register (Sample)**

Form 8a Issue No:.....Date:.....

**Driver Register [Company Name]**

As a condition of bus operator accreditation this form must be kept up to date.

Driver Name SURNAME	Driver Name (First and Initial)	Residential Address	Contact No.	Perm or Casual	Drivers Licence No.	Drivers Licence Type.	Expiry Date.	MoT Driver Authority No.	Expiry Date	Commenced employment	Employment Ceased

**Note:** a separate record detailing the dates and times during which each bus was driven by drivers must also be kept (sample form not provided in this Manual)

**Form 8b: Records of Drivers**  
 (Requirement under Clause 21 of the Passenger Transport Regulation 2007)

**Driver Licence and Authority Check Register (Sample)**

**Form 8b** Issue No:.....Date:.....

**Driver Licence and Authority Check Register [Company Name]**

As a condition of bus operator accreditation this form must be kept up to date.

Driver Name SURNAME.	Driver Name (First and Initial)	Address	Licence Check Date.	Authority Check Date	Licence Check Date.	Authority Check Date	Licence Check Date.	Authority Check Date	Licence Check Date.	Authority Check Date

**Form 9: Vehicle Maintenance Management System (VMMS)**  
**(Requirement under Clause 16 of the Passenger Transport Regulation 2007)**

**Maintenance Staff Register (Sample)**

**Form 9**

Issue No:.....Date:.....

**Register of Maintenance Staff**

**[Company Name]**

As a condition of bus operator accreditation this form must be kept up to date.

*MVRIA – Motor Vehicle Repair Authority (NSW).*

<b>Employee Name.</b>	<b>Details of Certificate(s)</b>	<b>Details of Qualification(s)</b>	<b>MVRIA licence type</b>	<b>MVRIA Licence No.</b>	<b>Comments</b>

<b>Contractor (Bus Repairer Name)</b>	<b>Address</b>	<b>Details of Qualification(s)</b>	<b>MVRIA licence type</b>	<b>MVRIA Licence No.</b>	<b>Comments</b>

**Form 10: Vehicle Maintenance Management System (VMMS)  
(Requirement under Clause 16 of the Passenger Transport Regulation 2007)**

**Daily Vehicle Check (Sample)**

**Form 10:** Issue No: ..... Date: .....

**Daily Vehicle Check [Company Name]**

The vehicle Maintenance Management System (VMMS) requires that a Daily Vehicle Check for each vehicle when it is in use be carried out.

The Daily Vehicle Check is a document instruction of simple roadworthiness checks. The operator shall define when the instruction is carried out, by whom and how it is recorded. The individual completing the Daily Vehicle Check shall acknowledge the vehicle to be roadworthy to limits of the inspection.

**Date** ..... **Fleet No.** .....

**Registration No.** ..... **Inspection carried out by** .....

Item No.	Item for Inspection	What is being inspected	Item Okay (Y/N)
1	Wheels and Tyres	Visual check of tyre pressure and tread integrity	
		Wheel security	
2	Lights	All lights and reflectors working	
3	Windows, Mirrors and wipers	Windows and mirrors for security, damage and cleanliness	
		Wipers and washers working to ensure clear forward vision	
4	Bodywork	All panel and readily visible structural members secure including floor hatches	
		Leaks of any fluids (oil, fuel, water coolant and/or others)	
5	Brakes	Visual inspection of air pressure warning gauge/s, warning lights and or audible buzzers	
6	Fault reporting	Any faults found to be recorded in vehicle defect report system	

**Defect Report No:** .....

***Item Comments:***

- 1 .....
- 2 .....
- 3 .....
- 4 .....
- 5 .....
- 6 .....

**Form 11: Vehicle Maintenance Management System (VMMS)**  
 (Requirement under Clause 16 of the Passenger Transport Regulation 2007/)

**Vehicle Data Information (Sample)**

Form 11

Issue No:.....Date:.....

**Vehicle Data [Company Name]**

**VEHICLE MANAGEMENT INFORMATION SYSTEM**

Vehicle Regist No

**GENERAL DETAILS**

Date First Regist	<input type="text"/>	Regist Renewal Date	<input type="text"/>	Fleet No	<input type="text"/>	Licd Seat	<input type="checkbox"/>	Std	<input type="checkbox"/>
Purch. Date	<input type="text"/>	Purch From	<input type="text"/>			New: S/H	<input type="text"/>		
CTP Ins. Co.	<input type="text"/>		CTP Pol. No.	<input type="text"/>		Renewal Date	<input type="text"/>		
Chassis Make	<input type="text"/>		Model	<input type="text"/>	Chassis No.	<input type="text"/>			
Engine Make	<input type="text"/>		Model	<input type="text"/>	Engine No.	<input type="text"/>			
Gear Box Make	<input type="text"/>		Model	<input type="text"/>	G/Box No.	<input type="text"/>			
Body Make	<input type="text"/>		Model	<input type="text"/>	Body No.	<input type="text"/>	Type	<input type="text"/>	
Gross Weight	<input type="text"/>	Tare Weight	<input type="text"/>	703 Form: Y/N	<input type="checkbox"/>	O/weight Perm: Y/N	<input type="checkbox"/>		

**OILS REQUIRED DETAIL**

Oil Type	Brand	Type	Capacity	Change Interval
Engine				
Transmission				
Differential				
Power Steering				
Radiator				

**PARTS/FILTERS/DETAIL**

Parts Type	No. Of	Brand	Part Number	Change Interval
Oil Filter				
Fuel Filter Primary				
Fuel Filter Secondary				
P/Steering Filter				
Fan Belt No. 1				
Fan Belt No. 2				
Fan Belt No. 3				

**TYRE & BRAKE LINING DETAILS**

Location	Size	Type	New/Retread	Lining Make	Lining Number
N.S. Front					
O.S. Front					
N.S. Rear Outer					
N.S. Rear Inner					
N.S. Rear Tag					
O.S. Rear Outer					
O.S. Rear Inner					
O.S. Rear Tag					

**ELECTRICAL, TACHOGRAPH & SPEED LIMIT DETAIL**

Alternator/ Generator Make	<input type="text"/>	Amps	<input type="text"/>	Part No	<input type="text"/>
Voltage	<input type="text"/>	No Batteries	<input type="text"/>	x	<input type="text"/>
		Volts	<input type="text"/>	Battery Type	<input type="text"/>
Tachograph Make	<input type="text"/>	Type	<input type="checkbox"/>	One Day	<input type="checkbox"/>
				Week	
Speed Limiter Make	<input type="text"/>	Type	<input type="text"/>	Date Fitted	<input type="text"/>

**DATA VERIFICATION & UPDATE RECORD**

Checked Date	By	Kilometres	Checked Date	By	Kilometres





