



RECEIVED

JAN 12 2026

By: FRESNO COG

CITY *of* CLOVIS

REPORT TO THE CITY COUNCIL

TO: Mayor and City Council
FROM: Finance Department
DATE: December 15, 2025
SUBJECT: Finance - Approval – Res. 25-____, Approving the submittal of the 2025-2026 Transportation Funding Claim, in the amount of \$18,585,056 to the Fresno Council of Governments.

ATTACHMENTS: 1. Res. 25-____, Submission of Transportation Funding Claim Forms

RECOMMENDATION

That the Council approve Resolution 25-____, approving the submittal of the 2025-2026 Transportation Funding Claim, in the amount of \$18,585,056 to the Fresno Council of Governments.

EXECUTIVE SUMMARY

Each year the City of Clovis is required to submit an annual transportation claim for the Local Transportation Fund of Fresno County to the Fresno Council of Governments (COG) to receive funds provided through the Transportation Development Act (TDA) of 1971. The claim is prepared in accordance with the City's annual budget. After the TDA claim is adopted by the Resolution of the City Council, the claim is submitted to COG for adoption by Resolution of the COG board. After approval, the City will begin to receive the funds apportioned by COG for the 2025-2026 fiscal year.

BACKGROUND

Each year the City files a claim with the Fresno Council of Governments (COG) to receive funds provided through the Transportation Development Act (TDA) of 1971. The claim provides information on the various sources that are used to fund the transit operation and to fund bicycle/pedestrian projects.

The claim is normally based on the current year budget. If circumstances have changed since the budget was prepared, the claim will be based on the best available information.

In order for COG to allocate the TDA funds, the claim needs to be submitted to COG for approval. The claim allocates the available funds based on the final estimated allocation received from COG in May 2025.

FISCAL IMPACT

The TDA funds are budgeted in 2025-2026 based upon the final estimated allocation received from COG in May 2025. Approval of the claim by the Council will allow the City to receive the funds.

REASON FOR RECOMMENDATION

To allocate the funds in accordance with the 2025-2026 estimates, it is necessary to submit the TDA claim to COG for approval. Approval of the claim by the Council for submittal is required.

ACTIONS FOLLOWING APPROVAL

After Council approval, the claim will be filed with COG.

CONFLICT OF INTEREST

None.

Prepared by: Emily Pimentel, Accountant

Reviewed by: City Manager AM

CLERK'S CERTIFICATE

I, Diana Stice, Deputy City Clerk of the City of Clovis, State of California, do hereby certify that the foregoing is a full, true and correct copy of Res. 25-131 duly approved and adopted by the City Council of the City of Clovis on the date therein stated and as it appears in the Office of the City Clerk.

IN WITNESS WHEREOF, I hereunto set my hand and affix the seal of the City of Clovis on January 7, 2026.



Diana Stice, Deputy City Clerk

RESOLUTION 25-131

**RESOLUTION OF THE CITY COUNCIL OF THE CITY OF CLOVIS
APPROVING SUBMISSION OF THE 2025-2026 TRANSPORTATION FUNDING CLAIM TO
THE FRESNO COUNCIL OF GOVERNMENTS**

WHEREAS, the City of Clovis is required to submit an annual transportation claim for the Transportation Funding through the Fresno Council of Governments for the fiscal year 2025-2026; and

WHEREAS, the Fresno Council of Governments has the authority to review claims and allocate such funds in accordance with the Transportation Development Act of 1971 and Chapter 3 of Title 30 of the California Administrative Code; and

WHEREAS, the City of Clovis has approved the 2025-2026 Budget for expenditures for 2025-2026; and

WHEREAS, the Transportation Act of 1971 requires certain findings and declarations regarding transit needs and conformance with Article 8, Chapter 1400, Statutes 1971 and applicable rules and regulations.

NOW, THEREFORE, BE IT RESOLVED, that the City of Clovis hereby authorizes submittal of its Claim for Local Transportation Funds, as Attachment A, in the amount of \$18,585,056 for purposes allowed under Articles 3, 4, 4.5, and 8 of the Transportation Development Act of 1971.

* * * * *

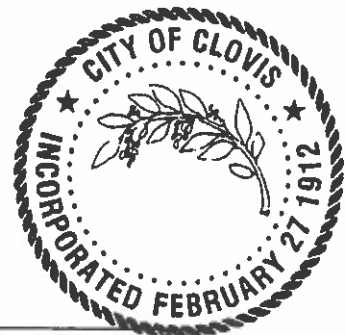
The foregoing resolution was introduced and adopted at a regular meeting of the City Council of the City of Clovis held on December 15, 2025, by the following vote, to wit:

AYES: Councilmembers Ashbeck, Basgall, Bessinger, Mayor Pro Tem Pearce, and
Mayor Mouanoutoua
NOES: None
ABSENT: None
ABSTAIN: None

DATED: December 15, 2025


Mayor


City Clerk



Enter Date: 12/2/2025

Claimant Name: City of Clovis

TRANSPORTATION FUNDING CLAIM FOR FISCAL YEAR: 2025/26

Instructions: Please note that each page of this claim is a separate worksheet, please click through all tabs and complete. Also note that light yellow fields require an entry if applicable, light grey fields contain formulas that will automatically calculate based on corresponding entries. A date and claimant name field is at the top of the first page, and automatically repeats on following pages, (date should be formatted 00/00/0000)

When completed, please print, sign and send signed original via mail to:

Les Beshears, Director of Finance, Fresno Council of Governments, 2035 Tulare Street, Suite 201, Fresno, CA 93721

From: Applicant:	City of Clovis
Address:	1033 Fifth Street
City/State/Zip:	Clovis, CA 93612
Contact Phone/email:	Jay Schengel / 559-324-2113

This applicant is an eligible claimant pursuant to Section 99203 of the Public Utilities Code and certifies that the following transportation funds are available to be claimed:

Local Transportation Fund

Apportionment:	\$ 7,321,916
Unexpended, Held by Claimant:	\$ 9,662,708
County 4.5 Contribution	\$ 17,408
County Contract for Tarpey Roundup:	\$ 171,793

State Transit Assistance Fund

Estimate:	\$ 1,411,231
Other Agency:	

Other

Audit Exception/Impairment (required General Fund Payback):	
Other:	

Eighteen Million, Five Hundred Eighty Five Thousand, Fifty Six	TOTAL
	\$ 18,585,056

spell out total amount in above cell

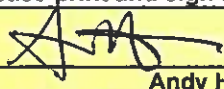
for the purposes and respective amounts specified in the attached claim be drawn from the Local Transportation Fund and State Transit Assistance Fund.

Please print and sign after completing form

Authorized Signature:

Name/Title:

Date:


Andy Haussler, City Manager
12/15/2025



2035 Tulare St., Ste. 201 tel 559-233-4148
Fresno, California 93721 fax 559-233-9645

www.fresnocog.org

Enter Date: 12/2/2025

Claimant Name: City of Clovis

TRANSPORTATION FUNDING CLAIM DETAIL FOR FISCAL YEAR: 2025/26

PURPOSE	AMOUNT	SUBTOTAL
1. Bicycle & Pedestrian Facilities:		
Article 3:	\$ 146,469	
Article 8a:		
Audit Exceptions (General Fund Payback);		
Unexpended Funds, Held by Claimant:		\$ 146,469
2. Regional Transportation Planning:	\$ 204,544	\$ 204,544
3. Public Transportation		
Article 4:	\$6,613,597	
Article 8c:		
Tarpey Roundup County Contract:	\$ 171,793	
Other Agency:		
State Transit Assistance Funds (STA):	\$ 1,411,231	
Audit Exceptions (General Fund Payback):		
Unexpended Funds, Held by Claimant:	\$ 9,662,708	\$17,859,329
4. Community Transit Service CTSA, Article 4.5:	\$ 374,714	\$ 374,714
5. To Be Claimed By:		
FAX Contract:	\$ -	\$ -
GRAND TOTAL		\$ 18,585,056
Claim Total Must Agree With Total on First Page		\$ 18,585,056
Minus All Unexpended Funds and RTP not used for Transit Claims		\$ 9,867,252
GRAND TOTAL PAYABLE TO CLAIMANT		\$ 8,717,804

Allocation instructions and payment by the Fresno County Auditor-Controller to the applicant is subject to such monies being available for distribution, and to the provisions that such monies will be used only in accordance with the rules and regulations of the Transportation Development Act.

Enter Date: 12/2/2025

Claimant Name: City of Clovis

BICYCLE AND PEDESTRIAN FACILITIES FOR FISCAL YEAR: 2025/26

Two percent (2%) of the claimant's Local Transportation Fund apportionment must be spent on bicycle and pedestrian facilities (PUC 99233.3 and 99234); such claims are to be filed as Article 3. Claims for projects in excess of 2% may be filed as Article 8a (PUC 99400(a)). If other funding is to be used with Local Transportation Funds to implement projects, such funding should be shown on the claim form.

PROJECT TITLE & BRIEF DESCRIPTION	PROJECT COST
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Various Bicycle & Pedestrian Facilities throughout the claimant's jurisdiction:

\$ 146,469.00

AND/OR:

Other - describe briefly if applicable:	\$ -
Other - describe briefly if applicable:	\$ -
Other - describe briefly if applicable:	\$ -
TOTAL PROJECT COSTS	\$ 146,469.00

Enter Date: 12/2/2025

Claimant Name: City of Clovis

PUBLIC AND SPECIALIZED TRANSPORTATION SERVICE CLAIM FOR OPERATING AND CAPITAL EXPENSES FY: 2025/26

GENERAL TRANSPORTATION SERVICE PROPOSED 2025/26		PROJECT COSTS		TOTALS
<i>(Information needed per PUC 99266, which states no moneys may be allocated in excess of 15% above preceding year unless claim is accompanied by supporting documentation)</i>		TOTAL PROJECT COSTS		
		Prior Year	\$ 9,174,346.00	
		Percentage Change	66%	
		<i>more than prior year</i>		
Revenue Source & Amount		Operating	Capital	Total
LTF Article 4:		\$ 3,874,338.00		\$ 3,874,338.00
LTF Article 4.5 or 8c:				\$ -
STA:			\$ 1,034,543.00	\$ 1,034,543.00
Fares:		\$ 5,000.00	N/A	\$ 5,000.00
Local Support:		\$ 1,411,960.00	N/A	\$ 1,411,960.00
Fed/State Grants:		\$ 1,715,000.00	\$ 888,005.00	\$ 2,603,005.00
Measure C:		\$ -	\$ 167,000.00	\$ 167,000.00
Interest:		\$ 78,500.00		\$ 78,500.00
Unexpended Funds Held By Claimant:				\$ -
Audit Exception - General Payback Fund:				\$ -
SUB-TOTALS		\$ 7,084,798.00	\$ 2,089,548.00	\$ 9,174,346.00

ELDERLY/HANDICAPPED SERVICE PROPOSED 2025/26		PROJECT COSTS		TOTALS
<i>(Information needed per PUC 99266, which states no moneys may be allocated in excess of 15% above preceding year unless claim is accompanied by supporting documentation)</i>		TOTAL PROJECT COSTS		
		Prior Year	\$ 6,761,512.00	
		Percentage Change	14%	
		<i>more than prior year</i>		
Revenue Source & Amount		Operating	Capital	Total
LTF Article 4:		\$ 3,670,067.00		\$ 3,670,067.00
Tarpey Roundup:		\$ 171,793.00		\$ 171,793.00
STA:			\$ 500,000.00	\$ 500,000.00
Fares:			N/A	\$ -
Local Support:		\$ 626,152.00	N/A	\$ 626,152.00
Fed/State Grants:		\$ 1,715,000.00		\$ 1,715,000.00
Measure C:		\$ -		\$ -
Interest:		\$ 78,500.00		\$ 78,500.00
Unexpended Funds Held By Claimant:				\$ -
Audit Exception - General Payback Fund:				\$ -
SUB-TOTALS		\$ 6,261,512.00	\$ 500,000.00	\$ 6,761,512.00

CONSOLIDATED TRANSIT SERVICE AGENCY PROPOSED 2025/26		PROJECT COSTS		TOTALS
<i>(Information needed per PUC 99266, which states no moneys may be allocated in excess of 15% above preceding year unless claim is accompanied by supporting documentation)</i>		TOTAL PROJECT COSTS		
		Prior Year	\$ 832,698.00	
		Percentage Change	1%	
		<i>more than prior year</i>		
Revenue Source & Amount		Operating	Capital	Total
LTF Article 4.5:		\$ 374,714.00		\$ 374,714.00
LTF Article 8c:				\$ -
STA:				\$ -
Fares:			N/A	\$ -
Local Support:		\$ 457,984.00	N/A	\$ 457,984.00
Fed/State Grants:				\$ -
Other - describe briefly if applicable:				\$ -
Other - describe briefly if applicable:				\$ -
Unexpended Funds Held By Claimant:				\$ -
Audit Exception - General Payback Fund:				\$ -
SUB-TOTALS		\$ 832,698.00	\$ -	\$ 832,698.00

GRAND TOTALS:		OPERATING	CAPITAL	TOTAL
		\$ 14,179,008.00	\$ 2,589,548.00	\$ 16,768,556.00

Enter Date: 12/2/2025

Claimant Name: City of Clovis

PUBLIC AND SPECIALIZED TRANSPORTATION SERVICE FAREBOX CALCULATION FOR FISCAL YEAR: 2025/26

REQUIRED OPERATING/FAREBOX CALCULATIONS

General Transportation Service:

1. Total Operating Expenses Minus Exclusions	Operating Expenses:	\$ 7,084,798.00
2. Farebox Revenues	Amount Excluded	\$ 7,084,798.00
3. Other Local Support		\$ 5,000.00
4. Total Local Support (Adds Lines 2 + 3)		\$ 1,411,960.00
5. Farebox Revenue/Operating Expense Ratio (Line 2 Divided By Line 1)		\$ 1,416,960.00
6. Required Minimum Ratio Verification: Enter 1 for Urban, 2 for Rural		0%
7. Total Local Support/Operating Expense Ratio (Line 4 Divided By Line 1)		20%
8. Required Minimum Ratio Criteria:		20%
URBAN 20%		
RURAL 10%		
	Meets Minimum Requirements	20%

Elderly/Handicapped Service:

1. Total Operating Expenses Minus Exclusions	Operating Expenses:	\$ 6,261,512.00
2. Farebox Revenues	Amount Excluded	\$ 6,261,512.00
3. Other Local Support		\$ -
4. Total Local Support (Adds Lines 2 + 3)		\$ 626,152.00
5. Farebox Revenue/Operating Expense Ratio (Line 2 Divided By Line 1)		\$ 626,152.00
6. Required Minimum Ratio Verification:		0%
7. Total Local Support/Operating Expense Ratio (Line 4 Divided By Line 1)		10%
8. Required Minimum Ratio Criteria:		10%
10%		
	Meets Minimum Requirements	10%

Consolidated Transportation Service Agency:

1. Total Operating Expenses Minus Exclusions	Operating Expenses:	\$ 832,698.00
2. Farebox Revenues	Amount Excluded	\$ 832,698.00
3. Other Local Support		\$ -
4. Total Local Support (Adds Lines 2 + 3)		\$ 457,984.00
5. Farebox Revenue/Operating Expense Ratio (Line 2 Divided By Line 1)		\$ 457,984.00
6. Required Minimum Ratio Verification:		0%
7. Total Local Support/Operating Expense Ratio (Line 4 Divided By Line 1)		55%
8. Required Minimum Ratio Criteria:		55%
Fares 10%		
Other Local Support 45%		
	Meets Minimum Requirements	55%

SUMMARY TOTALS:

1. Total OF ALL Operating Expenses PLUS Exclusions	Total Operating Expenses:	\$ 14,179,008.00
	Total Amount Excluded:	\$ - \$ 14,179,008.00

Must Agree With TOTAL, Project Detail Operator Tab: \$ 2,589,548.00

2. Total of All Capital Projects: \$ 2,589,548.00

Must Agree With CAPITAL PROJECTS, Project Detail Operator Tab: \$ 16,768,556.00

3. GRAND TOTAL: \$ 16,768,556.00

Enter Date: 12/2/2025

Claimant Name: City of Clovis

CONTINGENCY PROJECT LISTING FOR FISCAL YEAR: 2025/26

Should additional Local Transportation Fund or State Transit Assistance Fund monies be made available during the current fiscal year, they are hereby also claimed for the following purposes:

CHECK ALL THAT APPLY (Enter "X" in yellow box)

BICYCLE AND PEDESTRIAN FACILITIES

☒ Article 3

PUBLIC TRANSPORTATION

☒ Article 4

SUPPLEMENTAL INFORMATION REQUIRED OF TRANSIT CLAIMANTS (CCR 6632)

ATTACHED TO THIS CLAIM ARE SUBMITTED THE FOLLOWING DOCUMENTS:

(initial yellow box all that apply)



Budget or proposed budget for the 2025/26 fiscal year.



Statement for prior year revenues and expenditures (projections acceptable).



California Highway Patrol Certification pursuant to PUC 99251 (no claim may be approved unless accompanied by this certification). Date on this certification must be within 13 months of the proposed claim approval date.

STANDARD ASSURANCES FOR TRANSIT CLAIMANTS

CLAIMANT ASSURANCES: (initial yellow box all that apply)



A. Claimant certifies that it has submitted a satisfactory, independent fiscal audit, with required certification statement, to the RTPA and to the State Controller, pursuant to PUC 99245 and 21 Cal. Code of Regulations Section 6664 for the prior fiscal year (project year minus two). Claimant assures that this audit requirement will be completed for the current fiscal year (project year minus one).



B. Claimant certifies that it has submitted a State Controller Report, in conformance with the uniform system of accounts and records, to the RTPA, and to the State Controller, pursuant to PUC 99243, for the prior year (project year minus two). Beginning with the 1979-80 fiscal year, claimant assures that this report will be audited by an independent CPA. Claimant assures that this report will be completed for the current fiscal year (project year minus one).



C. Claimant certifies in accordance with PUC Section 99314.5(b) that it is not precluded by any contract entered into on or after June 28, 1979, from employing part-time drivers or contracting with common carriers of persons operating under a franchise or license. Claimant further certifies that no person who was a full-time employee on June 28, 1979, shall have his or her employment terminated or his or her regular hours of employment, excluding overtime, reduced by the operator as a result of it employing part-time drivers or contracting with such common carriers.

D. Claimant filing claim pursuant to PUC Section 99260 certifies that:

(check one by entering "X" in yellow cell):



1. the current cost of its retirement system is fully funded with respect to the officers and employees of its public transportation system (PUC Section 99271a); or



2. the operator is implementing a plan approved by the transportation planning agency which will fully fund the retirement system for such officers and employees within 40 years (PUC Section 99271a); or



3. the operator has a private pension plan which sets aside and invests on a current basis funds sufficient to provide for the payment of future pension benefits and which is fully compliant with the requirements stated in PUC Sections 99272 and 99273.



E. Claimant certifies that it is in compliance with PUC Section 99264 that it does not routinely staff, with two or more persons, a vehicle for public transportation purposes designed to be operated by one person.



F. Claimant certifies that it is making full use of federal funds available under the Urban Mass Transportation Act of 1964, as amended in accordance with Section 6754(a)(3).



G. Claimant certifies that this is in compliance with PUC Section 99155 that if it offers reduced fares to seniors, the same reduced rate is offered to disabled persons, handicapped persons, and disabled veterans and it honors the federal Medicare card for identification to receive reduced fares.



H. Claimant certifies that it is in compliance with PUC Section 99155.5 regarding dial-a-ride and paratransit services being accessible to handicapped persons and that the service is provided to persons without regard to vehicle ownership and place of residence.

The undersigned hereby certifies that the above statements are true and correct.

Please print and sign after completing form

Authorized Signature:

Name/Title:

Andy Haussler, City Manager

Date:

12/15/2025

City of Clovis Budget Worksheet by Department

Ledger: GL

Section: 00515 TRANSIT FUND

Object Type: Revenue Accounts

SpecObj

44015 INTEREST INCOME-PROPRIETARY

Object Type: Expenditure Accounts

SpecObj

62015 COMPENSATED FUTURE ABSENCES

64801 INTEREST EXPENSE - SBITA

65202 SUBSCRIPTIONS

66758 PENSION EXPENSE

68760 PROPRIETARY CONTRA ASSET

68950 DEPRECIATION-ROLLING STOCK

68951 DEPRECIATION EQUIPMENT

68971 AMORTIZATION-INT SBITA

Total Revenue for 00515:

Total Expenditures for 00515:

Expense Less Revenue Total:

Prior Year Actual FY 2025 Ver (PY)	Adjusted Budget FY 2026 Ver (WB)	Actuals Through 12-8-25 Ver (AD)	Encumb Balance To Date	Estimate to Close FY 2026 Ver (EC)	Department Requested FY 2026 Ver (DR)	EC to D Percen Chang
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235,630.73 157,000.00 158,732.37 0.00 0.00 0.00 0.00

-205.00 0.00 0.00 0.00 0.00 0.00 0.00

2,923.00 0.00 0.00 0.00 0.00 0.00 0.00

-110,783.00 0.00 0.00 0.00 0.00 0.00 0.00

182,605.00 0.00 0.00 0.00 0.00 0.00 0.00

-694,608.00 0.00 0.00 0.00 0.00 0.00 0.00

650,363.00 0.00 0.00 0.00 0.00 0.00 0.00

19,233.00 0.00 0.00 0.00 0.00 0.00 0.00

103,241.00 0.00 0.00 0.00 0.00 0.00 0.00

235,630.73 157,000.00 158,732.37 0.00 0.00 0.00 0.00

152,769.00 0.00 0.00 0.00 0.00 0.00 0.00

-82,861.73 -157,000.00 -158,732.37 0.00 0.00 0.00 0.00

Section: 34700 TRANSIT-ROUND UP-CTSA

Object Type: Revenue Accounts

SpecObj

45031 1/2 % SALES TAX-MEAS C

45038 OTHER GRANTS-CAP

45053 CMAQ-FEDERAL FUNDING-CAP

45061 LTF-ARTICLE 4 TRANSIT

45062 LTF-ART 4.5-SPEC TRANSIT

45066 STATE TRANSIT ASSISTANCE (STA)

45201 FEDERAL TRANSIT ADMIN (FTA)

Object Type: Expenditure Accounts

SpecObj

1,080,000.00 1,107,000.00 0.00 0.00 0.00 0.00 0.00

91,916.00 0.00 0.00 0.00 0.00 0.00 0.00

0.00 1,205,500.00 0.00 0.00 0.00 0.00 0.00

4,486,675.89 3,788,300.00 542,295.00 0.00 0.00 0.00 0.00

372,271.00 374,000.00 0.00 0.00 0.00 0.00 0.00

605,113.27 555,200.00 0.00 0.00 0.00 0.00 0.00

0.00 1,715,000.00 0.00 0.00 0.00 0.00 0.00

City of Clovis

Budget Worksheet by Department

Ledger: GL

		Prior Year	Adjusted	Actuals	Encumb Balance To Date	Estimate	Department	EC to D Percer Change
		Actual	Budget	Through		to Close	Requested	
		FY 2025	FY 2026	12-8-25		FY 2026	FY 2026	
		Ver (PY)	Ver (WB)	Ver (AD)		Ver (EC)	Ver (DR)	
61000	SALARIES REGULAR	1,278,842.13	1,736,100.00	549,553.49	0.00	0.00	0.00	0.00
61200	OVERTIME REGULAR	24,584.18	28,000.00	21,782.82	0.00	0.00	0.00	0.00
61207	OVERTIME-CALLOUT	12,491.77	13,500.00	4,207.68	0.00	0.00	0.00	0.00
61216	CTO BUYBACK	7,860.09	11,500.00	4,370.69	0.00	0.00	0.00	0.00
61300	EXTRA HELP	1,246,550.04	1,370,000.00	674,507.78	0.00	0.00	0.00	0.00
62001	RETIREMENT-MISC	274,639.69	364,100.00	114,974.69	0.00	0.00	0.00	0.00
62004	DEFERRED COMP CONTRIBUTION	19,054.76	27,900.00	7,876.66	0.00	0.00	0.00	0.00
62005	WORKER'S COMPENSATION	43,386.86	50,500.00	16,270.94	0.00	0.00	0.00	0.00
62006	HEALTH BENEFIT PLAN	244,651.95	289,900.00	103,929.52	0.00	0.00	0.00	0.00
62007	MEDICARE	20,243.26	25,900.00	8,918.08	0.00	0.00	0.00	0.00
62010	SICK LEAVE INCENTIVE	11,326.97	15,700.00	10,797.02	0.00	0.00	0.00	0.00
62011	SOC SEC/PERS-EXTRA HELP	274,924.50	307,200.00	142,902.33	0.00	0.00	0.00	0.00
62012	OTHER BENEFITS	3,400.00	2,800.00	932.00	0.00	0.00	0.00	0.00
62013	WORKER'S COMP-EH	50,354.24	55,300.00	23,923.52	0.00	0.00	0.00	0.00
62014	HEALTH INS REBATE	64,727.89	34,400.00	30,086.94	0.00	0.00	0.00	0.00
62016	HEALTH INS-EH	0.00	150,000.00	0.00	0.00	0.00	0.00	0.00
63004	VEHICLE ALLOWANCE	13,222.69	22,800.00	6,231.30	0.00	0.00	0.00	0.00
63009	FLEET ADMIN CHARGES	189,800.00	200,800.00	66,932.00	0.00	0.00	0.00	0.00
63010	FLEET CHARGES-ACTUAL BASIS CHR	810,185.90	846,200.00	367,091.43	0.00	0.00	0.00	0.00
63205	TELEPHONE-COMM SERVICES	159,161.73	160,000.00	100,979.96	0.00	0.00	0.00	0.00
63304	MARKETING SERVICES	19,083.22	40,000.00	4,764.83	211.01	0.00	0.00	0.00
63305	DEVELOPMENT SERVICES	5,075.00	0.00	0.00	0.00	0.00	0.00	0.00
63308	AUDITING & ACCOUNTING	0.00	0.00	2,500.00	0.00	0.00	0.00	0.00
63315	OTHER SERVICES	69,574.48	90,000.00	32,207.78	1,857.43	0.00	0.00	0.00
63350	TEMP PERSONNEL SERVICES	0.00	5,600.00	0.00	0.00	0.00	0.00	0.00
65001	TRAVEL-CONFERENCES	11,445.54	11,600.00	4,738.15	365.00	0.00	0.00	0.00
65101	TRAINING-EDUCATIONAL INCENTIVE	4,955.00	8,000.00	997.50	0.00	0.00	0.00	0.00
65102	TRAINING-CLASSES & SEMINARS	3,410.00	4,200.00	44.00	0.00	0.00	0.00	0.00
65201	MEMBERSHIP/ASSOCIATION DUES	1,395.00	1,400.00	940.00	0.00	0.00	0.00	0.00
66001	GENERAL ADMINISTRATION CHARGES	118,500.00	136,500.00	45,500.00	0.00	0.00	0.00	0.00
66003	GENERAL SERVICE CHARGES	749,500.00	822,100.00	274,032.00	0.00	0.00	0.00	0.00
66005	PROPERTY & LIABILITY INS CHGS	206,600.00	251,000.00	83,668.00	0.00	0.00	0.00	0.00

City of Clovis Budget Worksheet by Department

Ledger: GL

	Prior Year Actual FY 2025 Ver (PY)	Adjusted Budget FY 2026 Ver (WB)	Actuals Through 12-8-25 Ver (AD)	Encumb Balance To Date	Estimate to Close FY 2026 Ver (EC)	Department Requested FY 2026 Ver (DR)	EC to D Peren Change
68725 TRANSIT BUSES/VANS	697,029.27	1,861,700.00	0.00	0.00	0.00	0.00	0.00
Total Revenue for 34700:	6,635,976.16	8,745,000.00	542,295.00	0.00	0.00	0.00	0.00
Total Expenditures for 34700:	6,635,976.16	8,944,700.00	2,705,661.11	2,433.44	0.00	0.00	0.00
Expense Less Revenue Total:	0.00	199,700.00	2,163,366.11	2,433.44	0.00	0.00	0.00

Section: 34800 TRANSIT-STAGELINE-GEN
Object Type: Revenue Accounts

SpecObj									
44220 TROLLEY RENTAL-TRANSIT	5,745.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
44300 ADVERTISING INCOME	56,607.59	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
45031 1/2 % SALES TAX-MENS C	1,069,550.32	1,620,000.00	370,308.12	0.00	0.00	0.00	0.00	0.00	0.00
45038 OTHER GRANTS-CAP	22,609.44	167,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
45046 OTHER GRANTS-OPERATING	233.15	80,000.00	276.96	0.00	0.00	0.00	0.00	0.00	0.00
45061 LTF-ARTICLE 4 TRANSIT	3,216,738.07	3,471,700.00	-542,295.00	0.00	0.00	0.00	0.00	0.00	0.00
45066 STATE TRANSIT ASSISTANCE (STA)	22,634.07	440,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
45072 SB1 STATE OF GOOD REPAIR	0.00	232,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
45073 LOW CARBON TRANSIT OPERATIONS	0.00	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
45076 TRANSIT INTERCITY RAIL CAP PRG	0.00	0.00	9,750,385.96	0.00	0.00	0.00	0.00	0.00	0.00
45077 ZERO EMISSION TRANSIT CAP PRGM	0.00	0.00	740,468.71	0.00	0.00	0.00	0.00	0.00	0.00
45201 FEDERAL TRANSIT ADMIN (FTA)	0.00	1,715,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
46506 METRO PASS	3,024.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
47902 MISCELLANEOUS RECEIPTS	536.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Object Type: Expenditure Accounts									
SpecObj									
61000 SALARIES REGULAR	1,064,068.09	1,396,600.00	538,099.21	0.00	0.00	0.00	0.00	0.00	0.00
61200 OVERTIME REGULAR	38,455.08	36,000.00	44,772.04	0.00	0.00	0.00	0.00	0.00	0.00
61207 OVERTIME-CALLOUT	4,873.69	7,500.00	2,083.91	0.00	0.00	0.00	0.00	0.00	0.00
61216 CTO BUYBACK	3,138.23	7,600.00	3,720.61	0.00	0.00	0.00	0.00	0.00	0.00
61300 EXTRA HELP	590,759.83	1,884,000.00	276,647.81	0.00	0.00	0.00	0.00	0.00	0.00
62001 RETIREMENT-MISC	227,898.79	292,900.00	113,596.48	0.00	0.00	0.00	0.00	0.00	0.00

City of Clovis

Budget Worksheet by Department

Ledger: GL

	Prior Year		Adjusted		Actuals		Encumb	Estimate		Department		EC to D
	Actual	FY 2025	Budget	FY 2026	Through	12-8-25		to Close	FY 2026	Requested	FY 2026	Peren
	Ver (PY)		Ver (WB)		Ver (AD)		To Date	Ver (EC)		Ver (DR)		Changi
62004	DEFERRED COMP CONTRIBUTION	6,517.55	17,700.00	3,345.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
62005	WORKER'S COMPENSATION	35,201.67	38,700.00	16,208.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
62006	HEALTH BENEFIT PLAN	214,530.98	245,700.00	107,974.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
62007	MEDICARE	16,623.62	21,100.00	8,903.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
62010	SICK LEAVE INCENTIVE	5,908.63	9,500.00	5,734.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
62011	SOC SEC/PERS-EXTRA HELP	129,557.36	422,400.00	56,883.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
62012	OTHER BENEFITS	2,300.00	1,900.00	632.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
62013	WORKER'S COMP-EH	23,408.06	74,500.00	9,575.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
62014	HEALTH INS REBATE	26,031.61	13,200.00	13,719.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
63004	VEHICLE ALLOWANCE	11,600.00	21,300.00	5,612.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
63009	FLEET ADMIN CHARGES	140,100.00	143,200.00	47,732.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
63010	FLEET CHARGES-ACTUAL BASIS CHR	457,605.06	561,700.00	236,856.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
63205	TELEPHONE-COMM SERVICES	96,130.17	120,000.00	22,902.14	1,200.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
63304	MARKETING SERVICES	20,585.44	42,000.00	7,936.94	181.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00
63308	AUDITING & ACCOUNTING	0.00	0.00	2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
63315	OTHER SERVICES	75,091.76	80,000.00	39,421.24	1,926.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00
63316	TRANSIT SERVICES	332,609.96	413,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
63350	TEMP PERSONNEL SERVICES	0.00	5,300.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
63390	CREDIT CARD CHARGES	81.94	1,600.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
65001	TRAVEL-CONFERENCES	10,961.14	11,600.00	4,616.42	365.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
65101	TRAINING-EDUCATIONAL INCENTIVE	4,955.00	8,500.00	997.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
65102	TRAINING-CLASSES & SEMINARS	3,410.00	5,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
65201	MEMBERSHIP/ASSOCIATION DUES	1,395.00	2,500.00	940.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
66001	GENERAL ADMINISTRATION CHARGES	118,500.00	136,500.00	45,500.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
66003	GENERAL SERVICE CHARGES	499,000.00	784,400.00	261,468.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
66005	PROPERTY & LIABILITY INS CHGS	180,600.00	266,200.00	88,732.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
66803	GEN LIABILITY CLAIM-PROP	10,536.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
68131	LCTOP ROUTE IMPROVEMENTS 2018	4,375.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
68132	LCTOP ROUTE IMPROVEMENTS 2019	0.00	5,000.00	35,243.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
68135	LCTOP CAPITAL	1,172.02	571,004.96	216,988.14	354,016.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00
68151	STA CAPITAL OUTLAY	0.00	41,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
68160	SUSTAINABLE COMMUNITIES GRANT	0.00	90,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

City of Clovis Budget Worksheet by Department

Ledger: GL

	Prior Year Actual FY 2025 Ver (PY)	Adjusted Budget FY 2026 Ver (WB)	Actuals Through 12-8-25 Ver (AD)	Encumb Balance To Date	Estimate to Close FY 2026 Ver (EC)	Department Requested FY 2026 Ver (DR)	EC to D Percen Change
68208 DEPT HW/SW SYSTEMS	45,243.51	187,000.00	75,380.45	0.00	0.00	0.00	0.00%
68725 TRANSIT BUSES/VANS	0.00	1,195,542.68	0.00	695,542.68	0.00	0.00	0.00%
Total Revenue for 34800:	4,397,678.52	7,735,700.00	10,319,144.75	0.00	0.00	0.00	0.00%
Total Expenditures for 34800:	4,403,225.60	9,161,647.64	2,294,724.18	1,053,231.71	0.00	0.00	0.00%
Expense Less Revenue Total:	5,547.08	1,425,947.64	-8,024,420.57	1,053,231.71	0.00	0.00	0.00%

City of Clovis
Budget Worksheet by Department

Ledger: GL

	Prior Year	Adjusted	Actuals	Encumb	Estimate	Department	EC to D
	Actual FY 2025 Ver (PY)	Budget FY 2026 Ver (WB)	Through 12-8-25 Ver (AD)	Balance To Date	to Close FY 2026 Ver (EC)	Requested FY 2026 Ver (DR)	Perce Change
Grand Total Revenue:	11,269,285.41	16,637,700.00	11,020,172.12	0.00	0.00	0.00	0.00%
Grand Total Expenditures:	11,191,970.76	18,106,347.64	5,000,385.29	1,055,665.15	0.00	0.00	0.00%
Expense Less Revenue Grand Total:	-77,314.65	1,468,647.64	-6,019,786.83	1,055,665.15	0.00	0.00	0.00%

CARRIER NAME	CA NUMBER	LOC. CODE	SUBAREA
City of Clovis Public Transit	43134	435	05
STREET ADDRESS, CITY, STATE, ZIP CODE	PHONE NUMBER	DATE	
155 N Sunnyside Ave Clovis, CA 93611	(559) 324-2770	12/11-16-18/2025	
CARRIER REPRESENTATIVE	TITLE	TIME IN	TIME OUT
Bethany Berube	Transit Manager	15 00	16 00
INSPECTION LOCATION (if other than the carrier's principal place of business)	U.S. DOT NUMBER	MC NUMBER	
Same	2808119		

On this date, the above named motor carrier was inspected by the California Highway Patrol. The inspection evaluated the carrier's compliance with the following requirements:

☒ CONTROLLED SUBSTANCES & ALCOHOL TESTING PROGRAM [VC 34520 & 49 CFR 382]

☐ OTHER: _____

REMARKS

The carrier is currently enrolled in a random DOT controlled substance and alcohol testing program with the consortium listed below:

Preferred Alliance Inc
16960 S Harlan Rd
Lathrop CA 95330
(877) 272-5227
Michelle Vincent


See Part B

As a result of the inspection noted above, this carrier was assigned a compliance rating of SATISFACTORY
This rating applies only to carrier requirements - Terminals are rated separately.


RATING HISTORY 1 <u>S</u> 2 <u>S</u> 3 <u>S</u> 4 <u>S</u>	NO. OF RECORDS INSPECTED 60	NO. OF VIOLATIONS	CHP 345 ISSUED <input type="checkbox"/>	SUSPENSE DATE <input checked="" type="checkbox"/> Auto <input type="checkbox"/> None	CHP 100D COLUMN NO.
INSPECTED BY (Name) Daniel Ortiz			ID NUMBER A11992		CARRIER TYPE <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Bus

MOTOR CARRIER CERTIFICATION

I hereby certify that all violations recorded hereon and on the attached pages (2 through 6) will be corrected in accordance with applicable provisions of the California Vehicle Code and the California Code of Regulations. I understand that I may request a review of an unsatisfactory rating by contacting the CENTRAL Division Motor Carrier Safety Unit Supervisor at (559) 453-3130 within 5 calendar days of the rating.

CARRIER REPRESENTATIVE'S PRINTED NAME Nick Chin	TITLE Transit Manager	DRIVER LICENSE NUMBER D4215230 CA
CARRIER REPRESENTATIVE'S SIGNATURE 	CURRENT CARRIER RATING Satisfactory	DATE 12/18/25

California Highway Patrol

	US DOT #	Legal: CITY OF CLOVIS-PUBLIC TRANSIT Operating (DBA):CLOVIS TRANSIT		
	2808119			
MC/MX #:		State #: 43134		Federal Tax ID: 94-6000311 (EIN)
Review Type: Non-ratable Review - Special Study				
Scope: Terminal		Location of Review/Audit: Company facility in the U. S.		Territory:
Operation Types		Interstate	Intrastate	Business: Corporation Gross Revenue: \$0.00 for year ending:
Carrier: N/A		Non-HM		
Shipper: N/A		N/A		
Cargo Tank: N/A				
Company Physical Address:				
155 N SUNYSIDE AVE CLOVIS, CA 93611				
Contact Name: BETHANY BERUBE				
Phone numbers: (1) 559- 324-2770 (2) Fax				
E-Mail Address: BETHANYB@CITY OF CLOVIS.COM				
Company Mailing Address:				
155 N SUNYSIDE AVE CLOVIS, CA 93611				
Carrier Classification				
State Government				
Cargo Classification				
Passengers				
Equipment				
	Owned	Term Leased	Trip Leased	Owned Term Leased Trip Leased
Minibus, 16+	36	0	0	
Power units used in the U.S.: 36				
Percentage of time used in the U.S.: 100				
Does carrier transport placardable quantities of HM? No				
Is an HM Permit required? N/A				
Driver Information				
	Inter	Intra	Average trip leased drivers/month: 0	
< 100 Miles:	0	60	Total Drivers: 60	
>= 100 Miles:	0	0	CDL Drivers: 60	





CLOVIS TRANSIT (CITY OF CLOVIS-PUBLIC TRANSIT dba) - Terminal

U.S. DOT #: 2808119

State #: 43134

Review Date:

12/18/2025

Part A

QUESTIONS regarding this report
may be addressed to the Central Division Motor Carrier Safety Unit at:

5435 E Olive Ave
Fresno, CA 93727
(559)453-3130

This TERMINAL REVIEW deals only with safety compliance at this terminal.

Person(s) Interviewed

Name: BETHANY BERUBE

Title: TRANSIT MANAGER

Name: NICK CHIN

Title: TRANSIT MANAGER





CLOVIS TRANSIT (CITY OF CLOVIS-PUBLIC TRANSIT dba) - Terminal

U.S. DOT #: 2808119

State #: 43134

Review Date:

12/18/2025

Part B Violations

Safety Fitness Rating Information:

Total Miles Operated 400,001

Recordable Accidents 0

OOS Vehicle (CR): 0

Number of Vehicle Inspected (CR): 0

OOS Vehicle (MCMIS): 0

Number of Vehicles Inspected (MCMIS): 0

Your proposed safety rating is :

This Review is not Rated.





CLOVIS TRANSIT (CITY OF CLOVIS-PUBLIC TRANSIT dba) - Terminal

U.S. DOT #: 2808119

State #: 43134

Review Date:

12/18/2025

Part B Requirements and/or Recommendations

1. Questions related to this inspection may be directed to the Central Division Motor Carrier Safety Unit Supervisor at (559) 453-3130
2. For questions about Motor Carrier of Property Permit : 916-657-8153



**CLOVIS TRANSIT (CITY OF CLOVIS-PUBLIC TRANSIT dba) - Terminal**

U.S. DOT #: 2808119

State #: 43134

Review Date:

12/18/2025

Part C

Reason for Review: Other

CSAT

Planned Action: Compliance Monitoring

Parts Reviewed Certification:

325 382 383 387 390 391 392 393 395 396 397 398 399 171 172 173 177 178 180

Prior Reviews**Prior Prosecutions**

Reason not Rated: Special Study

Study Code: CA

11/10/2022

11/10/2022

11/10/2022

Unsat/Unfit Information

Is the motor carrier of passengers subject to the safety fitness
procedures contained in 49 CFR part 385 subpart A, AND does it
transport passengers in a commercial motor vehicle?

Yes - Intrastate

Does carrier transport placardable quantities of hazardous materials?

Unsat/Unfit rule:

Not Applicable

Corporate Contact: BETHANY BERUBE

Special Study Information:

Corporate Contact Title: TRANSIT MANAGER

Remarks:

CARRIER NAME: CITY OF CLOVIS PUBLIC-TRANSIT

CA # 43134

CARRIER ADDRESS: 155 N SUNNYSIDE AVE CLOVIS CA 93611

RATING INFORMATION:

IN ACCORDANCE WITH 13 CCR 1233, THIS CARRIER IS NOW RATED SATISFACTORY AT THIS TIME.

CONSORTIUM INFORMATION:

PREFERRED ALLIANCE

16960 S HARLAN RD

LATHROP CA 95330

(209) 825-3425

NOTE; CARRIER IS PLANING ON IN THE NEXT FEW MONTHS TO START OPEARATING UNDER A FEDERAL GRANT
FUNDING, SO CSAT REQUIREMNTS WILL CHANGE AND DRIVERS WILL BE SUJET TO COMPLY AS COVERED
EMPLOYES UNDER SUBPART 40 OF TITLE 49 CRF.

Upload Authorized:	Yes	No
Authorized by:		Date:
Uploaded:	Yes	No
Verified by:		Failure Code:
		Date:



**SAFETY COMPLIANCE REPORT/
TERMINAL RECORD UPDATE**

CHP 343 (Rev. 12-17) OPI 062

NEW TERMINAL INFORMATION <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CA NUMBER 43134	FILE CODE NUMBER 113866	COUNTY CODE 10	BED
TERMINAL TYPE <input type="checkbox"/> Truck <input type="checkbox"/> Bus <input type="checkbox"/> Mod Limo	CODE B	OTHER PROGRAM(S)	LOCATION CODE 435	SUBAREA 05

CARRIER LEGAL NAME City Of Clovis Public Transit	TERMINAL NAME (IF DIFFERENT) Same	TELEPHONE NUMBER (W/ AREA CODE) (559) 324-2770
---	--------------------------------------	---

TERMINAL STREET ADDRESS (NUMBER, STREET, CITY, ZIP CODE)

155 N Sunnyside Ave Clovis CA 93611

MAILING ADDRESS (NUMBER, STREET, CITY, ZIP CODE) (IF DIFFERENT FROM ABOVE)

Same

INSPECTION LOCATION (NUMBER, STREET, CITY OR COUNTY)

Same

LICENSE, FLEET AND TERMINAL INFORMATION

HM LIC. NO.	HWT REG. NO.	IMS LIC. NO.	TRUCKS AND TYPES	TRAILERS AND TYPES	PASS VEH BY TYPE I 36 II 18 Mod Limo	DRIVERS 40	BIT FLEET SIZE
EXP. DATE	EXP. DATE	EXP. DATE	REG. CT.	HW VEH.	HW CONT.	PPB/CSAT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Powered Towed

TERMINALS IDENTIFIED IN SECTION 34515(b) CVC

☐ Yes ☒ No

FILE CODE NUMBERS OF TERMINALS INCLUDED IN INSPECTION AS A RESULT OF SECTION 34515(b) CVC

EMERGENCY CONTACTS (In Calling Order of Preference)

EMERGENCY CONTACT (NAME) Bethany Berube	DAY TELEPHONE NO. (W/ AREA CODE) (559) 324-2771	NIGHT TELEPHONE NO. (W/ AREA CODE) (559) 765-6399
EMERGENCY CONTACT (NAME) Nick Chin	DAY TELEPHONE NO. (W/ AREA CODE) (559) 324-2762	NIGHT TELEPHONE NO. (W/ AREA CODE) (559) 824-7643

ESTIMATED CALIFORNIA MILEAGE FOR THIS TERMINAL FOR LAST YEAR (2024)

A <input type="checkbox"/> UNDER 15,000	B <input type="checkbox"/> 15,001 — 50,000	C <input type="checkbox"/> 50,001 — 100,000	D <input checked="" type="checkbox"/> 100,001 — 500,000	E <input type="checkbox"/> 500,001 — 1,000,000	F <input type="checkbox"/> 1,000,001 — 2,000,000	G <input type="checkbox"/> 2,000,001 — 5,000,000	H <input type="checkbox"/> 5,000,001 — 10,000,000	I <input type="checkbox"/> MORE THAN 10,000,000
--	---	--	--	---	---	---	--	--

OPERATING AUTHORITIES OR PERMITS

PUC <input type="checkbox"/> T <input type="checkbox"/> TCP <input type="checkbox"/> PSC	MOTOR CARRIER OF PROPERTY PERMIT ACTIVE <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	IMS FITNESS EVALUATION <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
USDOT USDOT NUMBER 280119	MC MX	REASON FOR INSPECTION Annual Bus inspection


INSPECTION FINDINGS	INSPECTION RATINGS: S = Satisfactory U = Unsatisfactory C = Conditional UR = Unrated N/A = Not Applicable
REQUIREMENTS	VIOL
MAINTENANCE PROGRAM	1 S 2 S 3 S 4 S
DRIVER RECORDS	No. 9 Time 4.0
DRIVER HOURS	HAZARDOUS MATERIALS <input checked="" type="checkbox"/> No H/M Transported <input type="checkbox"/> No H/M violations noted
HAZARDOUS MATERIALS	CONTAINERS/TANKS No. Time
HAZARDOUS MATERIALS	VEHICLES PLACED OUT-OF-SERVICE Vehicles 2 Units

BRAKES	REMARKS
LAMPS & SIGNALS	
CONNECTING DEVICES	
STEERING & SUSPENSION	
TIRES & WHEELS	
EQUIPMENT REQUIREMENTS	
CONTAINERS & TANKS	
HAZARDOUS MATERIALS	

INSPECTION TYPE <input type="checkbox"/> I <input type="checkbox"/> R	NON-BIT <input type="checkbox"/>	CPSS <input type="checkbox"/> Yes <input type="checkbox"/> No	CHP 345 <input type="checkbox"/>	CHP 100D COL <input type="checkbox"/>	INSPECTION DATE(S) 12/11-16-18/2025	TIME IN 9:00	TIME OUT 3:00
INSPECTED BY (NAME(S)) Daniel Ortiz					ID NUMBER(S) A11992	SUSPENSE DATE <input checked="" type="checkbox"/> Auto <input type="checkbox"/> None	

MOTOR CARRIER CERTIFICATION

I hereby certify that all violations described hereon and recorded on the attached pages (2 through 15), will be corrected in accordance with applicable provisions of the California Vehicle Code and the California Code of Regulations. I understand that I may request a review of an unsatisfactory rating by contacting the Motor Carrier Safety Unit Supervisor at (559) 453-3130 within 5 business days of the rating.

CURRENT TERMINAL RATING SATISFACTORY	CARRIER REPRESENTATIVE'S SIGNATURE 	DATE 12/18/25
CARRIER REPRESENTATIVE'S PRINTED NAME Nick Chin	TITLE Transit Manager	DRIVER LICENSE NUMBER STATE

Destroy Previous Editions

Chp343_1217.pdf

California Highway Patrol



US DOT #
2808119

Legal: CITY OF CLOVIS-PUBLIC TRANSIT
Operating (DBA): CLOVIS TRANSIT

AC/MX #:

State #: 43134

Federal Tax ID: 94-6000311 (EIN)

Review Type: Non-ratable Review - Special Study

Scope: Terminal

Location of Review/Audit: Company facility in the U. S.

Territory:

Operation Types Interstate Intrastate

Carrier: N/A Non-HM
Shipper: N/A N/A
Cargo Tank: N/A

Business: Corporation
Gross Revenue: \$0.00

for year ending:

Company Physical Address:

155 N SUNYSIDE AVE
CLOVIS, CA 93611

Contact Name: BETHANY BERUBE

Phone numbers: (1) 559-324-2770 (2) 559-240-0024

Fax

E-Mail Address: BETHANYB@CITYOFCLOVIS.COM

Company Mailing Address:

155 N SUNYSIDE AVE
CLOVIS, CA 93611

Carrier Classification

State Government

Cargo Classification

Passengers

Equipment

Owned Term Leased Trip Leased

Owned Term Leased Trip Leased

Minibus, 16+

36

0

0

Power units used in the U.S.: 36

Percentage of time used in the U.S.: 100

Does carrier transport placardable quantities of HM? No

Is an HM Permit required? N/A

Driver Information

Inter

Intra

Average trip leased drivers/month: 0

< 100 Miles:

0

60

Total Drivers: 60

>= 100 Miles:

0

0

CDL Drivers: 60





CLOVIS TRANSIT (CITY OF CLOVIS-PUBLIC TRANSIT dba) - Terminal

U.S. DOT #: 2808119

State #: 43134

Review Date:

12/18/2025

Part A

QUESTIONS regarding this report
may be addressed to the Central Division Motor Carrier Safety Unit at:

5435 E Olive Ave
Fresno, CA 93727
(559)453-3130

This TERMINAL REVIEW deals only with safety compliance at this terminal.

Person(s) Interviewed

Name: BETHANY BERUBE

Title: TRANSIT MANAGER

Name: NICK CHIN

Title: TRANSIT MANAGER





CLOVIS TRANSIT (CITY OF CLOVIS-PUBLIC TRANSIT dba) - Terminal

U.S. DOT #: 2808119

State #: 43134

Review Date:

12/18/2025

Part B Violations

Safety Fitness Rating Information:

Total Miles Operated 400,001
Recordable Accidents 0

OOS Vehicle (CR): 0

Number of Vehicle Inspected (CR): 9

OOS Vehicle (MCMIS): 0

Number of Vehicles Inspected (MCMIS): 0

Your proposed safety rating is :

This Review is not Rated.





CLOVIS TRANSIT (CITY OF CLOVIS-PUBLIC TRANSIT dba) - Terminal

U.S. DOT #: 2808119

State #: 43134

Review Date:

12/18/2025

Part B Requirements and/or Recommendations

1. Questions related to this inspection may be directed to the Central Division Motor Carrier Safety Unit Supervisor at (559) 453-3130
2. Forms and publications are available at the CHP internet website at: <http://www.chp.ca.gov/publications/index.html>
3. For questions about Employer Pull Notice Program: 916-657-6346
For questions about passenger transportation authority: 415-703-2063





CLOVIS TRANSIT (CITY OF CLOVIS-PUBLIC TRANSIT dba) - Terminal

U.S. DOT #: 2808119

State #: 43134

Review Date:

12/18/2025

Part C

Reason for Review: Other

ANNUAL GPPV

Planned Action: Compliance Monitoring

Parts Reviewed Certification:

325 382 383 387 390 391 392 393 395 396 397 398 399 171 172 173 177 178 180

Prior Reviews

11/10/2022

11/10/2022

11/10/2022

Prior Prosecutions

Reason not Rated: Special Study

Study Code: CA

Unsat/Unfit Information

Is the motor carrier of passengers subject to the safety fitness procedures contained in 49 CFR part 385 subpart A, AND does it transport passengers in a commercial motor vehicle?

Yes - Intrastate

Does carrier transport placardable quantities of hazardous materials?

Unsat/Unfit rule:

Not Applicable

Corporate Contact: BETHANY BERUBE

Special Study Information:

Corporate Contact Title: TRANSIT MANAGER

Remarks:

TERMINAL NAME: CITY OF CLOVIS PUBLIC-TRANSIT

CA # 43134

TERMINAL ADDRESS: 155 N SUNNYSIDE AVE CLOVIS CA 93611

FCN # 113866

RATING INFORMATION:

IN ACCORDANCE WITH 13 CCR 1233, THIS TERMINAL IS NOW RATED SATISFACTORY AT THIS TIME.

Upload Authorized:	Yes	No
Authorized by:		Date:
Uploaded:	Yes	No
Verified by:		Failure Code:
		Date:





California Highway Patrol
601 N. 7th Street
Sacramento, CA 95811
Phone: (916) 843-3400
Internationally Accredited Agency

Report Number: CAN994001817
Inspection Date: 12/11/2025
Start: 7:20 AM PT End: 8:00 AM PT
Inspection Level: V - Terminal
HM Inspection Type: None

Carrier: CITY OF CLOVIS-PUBLIC TRANSIT

DBA: CLOVIS TRANSIT

155 N SUNYSIDE AVE

CLOVIS, CA, 93611

USDOT: 2808119

MC/MX#:

State#: 43134

Location: CLOVIS

Highway:

County: FRESNO

Email:

Phone#: (559)324-2770

Fax#: (559)324-2853

Driver:

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth:

State:

State:

Milepost:

Shipper: N/A

Origin: N/A

Destination: N/A

Bill of Lading: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	CHAM	2019	CA	1551022	50083	1FDFF4FS7KDC40598	14500		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	N/A	N/A
Left	N/A	N/A
Chamber	HYDR	HYDR

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 25207; File Code Number: 113866; Fuel Type: E; Passenger Capacity: 16; WC Passenger Capacity: 2; Bus Type: 1; Beat/Sub Area: 05; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 09



TRUCKERS AGAINST TRAFFICKING

If you suspect human trafficking please contact 911 and call the National Human Trafficking Hotline at 1-888-373-7888. Make the call, save lives! Go to <https://truckersagainstrafficking.org/> to learn more.

Report Prepared By:

D. ORTIZ

ID/Badge #:

A11992

Copy Received By:

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California Highway Patrol
601 N. 7th Street
Sacramento, CA 95811
Phone: (916) 843-3400
Internationally Accredited Agency

Report Number: CAN994001818
Inspection Date: 12/11/2025
Start: 8:12 AM PT End: 8:50 AM PT
Inspection Level: V - Terminal
HM Inspection Type: None

Carrier: CITY OF CLOVIS-PUBLIC TRANSIT

DBA: CLOVIS TRANSIT

155 N SUNYSIDE AVE

CLOVIS, CA, 93611

USDOT: 2808119

MC/MX#:

State#: 43134

Location: CLOVIS

Highway:

County: FRESNO

Email:

Phone#: (559)324-2770

Fax#: (559)324-2853

Driver:

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth:

State:

State:

Milepost:

Shipper: N/A

Origin: N/A

Destination: N/A

Bill of Lading: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	CHAM	2019	CA	1450682	50031	1FDFF4F58KDC14091	14500		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	N/A	N/A
Left	N/A	N/A
Chamber	HYDR	HYDR

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 35539; File Code Number: 113866; Fuel Type: G; Passenger Capacity: 15; WC Passenger Capacity: 3; Bus Type: 1; Beat/Sub Area: 05; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 09



TRUCKERS AGAINST TRAFFICKING

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Report Prepared By:

D. ORTIZ

ID/Badge #:

A11992

Copy Received By:

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California Highway Patrol
601 N. 7th Street
Sacramento, CA 95811
Phone: (916) 843-3400
Internationally Accredited Agency

Report Number: CAN994001819
Inspection Date: 12/11/2025
Start: 9:00 AM PT End: 9:32 AM PT
Inspection Level: V - Terminal
HM Inspection Type: None

Carrier: CITY OF CLOVIS-PUBLIC TRANSIT

DBA: CLOVIS TRANSIT

155 N SUNYSIDE AVE

CLOVIS, CA, 93611

USDOT: 2808119

MC/MX#:

State#: 43134

Location: CLOVIS

Highway:

County: FRESNO

Email:

Phone#: (559)324-2770

Fax#: (559)324-2853

Driver:

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth:

State:

State:

Milepost:

Origin: N/A

Destination: N/A

Shipper: N/A

Bill of Lading: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	CHAM	2024	CA	1669309	50085	4UZADRFD2RCVG2458	25850		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	N/A	N/A
Left	N/A	N/A
Chamber	HYDR	HYDR

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Beat/Sub Area: 05; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 09



TRUCKERS AGAINST TRAFFICKING

If you suspect human trafficking please contact 911 and call the National Human Trafficking Hotline at 1-888-373-7888. Make the call, save lives! Go to <https://truckersagainstrafficking.org/> to learn more.

Report Prepared By:

D. ORTIZ

ID/Badge #:

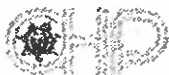
A11992

Copy Received By:

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California Highway Patrol
601 N. 7th Street
Sacramento, CA 95811
Phone: (916) 843-3400
Internationally Accredited Agency

Report Number: CAN994001820
Inspection Date: 12/11/2025
Start: 9:35 AM PT End: 10:03 AM PT
Inspection Level: V - Terminal
HM Inspection Type: None

Carrier: CITY OF CLOVIS-PUBLIC TRANSIT

DBA: CLOVIS TRANSIT

155 N SUNYSIDE AVE

CLOVIS, CA, 93611

USDOT: 2808119

MC/MX#:

State#:

Location: CLOVIS

Highway:

County: FRESNO

Email:

Phone#: (559)324-2770

Fax#: (559)324-2853

Driver:

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth:

State:

State:

Milepost:

Origin: N/A

Destination: N/A

Shipper: N/A

Bill of Lading: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	CHAM	2019	CA	1551038	50081	1FVACWFC1KHKE5054	26000		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	1 1/8	1 1/2
Left	1 1/8	1 1/2
Chamber	L-20*	L-30

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 205836; File Code Number: 113866; Fuel Type: D; Passenger Capacity: 30; WC Passenger Capacity: 3; Bus Type: 1; Beat/Sub Area: 05; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 09



TRUCKERS AGAINST TRAFFICKING

If you suspect human trafficking please contact 911 and call the National Human Trafficking Hotline at 1-888-373-7888. Make the call, save lives! Go to <https://truckersagainsttrafficking.org/> to learn more.

Report Prepared By:

D. ORTIZ

ID/Badge #:

A11992

Copy Received By:

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California Highway Patrol
601 N. 7th Street
Sacramento, CA 95811
Phone: (916) 843-3400
Internationally Accredited Agency

Report Number: CAN994001812
Inspection Date: 12/16/2025
Start: 7:00 AM PT End: 7:30 AM PT
Inspection Level: V - Terminal
HM Inspection Type: None

Carrier: CITY OF CLOVIS-PUBLIC TRANSIT

DBA: CLOVIS TRANSIT

155 N SUNYSIDE AVE

CLOVIS, CA, 93611

USDOT: 2808119

MC/MX#:

State#: 43134

Location: CLOVIS

Highway:

County: FRESNO

Email:

Phone#: (559)324-2770

Fax#: (559)324-2853

Driver:

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth:

State:

State:

Milepost:

Shipper: N/A

Origin: N/A

Destination: N/A

Bill of Lading: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	GLAV	2019	CA	1531405	50083	1FDFE4FS7KDC40598	14500		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	N/A	N/A
Left	N/A	N/A
Chamber	HYDR	HYDR

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 25126; File Code Number: 113866; Fuel Type: E; Passenger Capacity: 16; WC Passenger Capacity: 2; Bus Type: 1; Beat/Sub Area: 05; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 9



TRUCKERS AGAINST TRAFFICKING

If you suspect human trafficking please contact 911 and call the National Human Trafficking Hotline at 1-888-373-7888. Make the call, save lives! Go to <https://truckersagainstrafficking.org/> to learn more.

Report Prepared By:

D. ORTIZ

ID/Badge #:

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Copy Received By:

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California Highway Patrol
601 N. 7th Street
Sacramento, CA 95811
Phone: (916) 843-3400
Internationally Accredited Agency

Report Number: CAN994001813
Inspection Date: 12/16/2025
Start: 7:31 AM PT End: 8:05 AM PT
Inspection Level: V - Terminal
HM Inspection Type: None

Carrier: CITY OF CLOVIS-PUBLIC TRANSIT

DBA: CLOVIS TRANSIT

155 N SUNYSIDE AVE

CLOVIS, CA, 93611

USDOT: 2808119

MC/MX#:

State#: 43134

Location: CLOVIS

Highway:

County: FRESNO

Email:

Phone#: (559)324-2770

Fax#: (559)324-2853

Driver:

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth:

Milepost:

Shipper: N/A

Origin: N/A

Destination: N/A

State:

State:

Bill of Lading: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	CHAM	2019	CA	1450679	50030	1FDFE4FS6KDC14090	14500		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	N/A	N/A
Left	N/A	N/A
Chamber	ELEC	ELEC

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 144070; File Code Number: 113866; Fuel Type: G; Passenger Capacity: 15; WC Passenger Capacity: 3; Bus Type: 1; Beat/Sub Area: 05; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 9



TRUCKERS AGAINST TRAFFICKING

If you suspect human trafficking please contact 911 and call the National Human Trafficking Hotline at 1-888-373-7888. Make the call, save lives! Go to <https://truckersagainstrafficking.org/> to learn more.

Report Prepared By:

D. ORTIZ

ID/Badge #:

A11992

Copy Received By:

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California Highway Patrol
601 N. 7th Street
Sacramento, CA 95811
Phone: (916) 843-3400
Internationally Accredited Agency

Report Number: CAN994001814
Inspection Date: 12/16/2025
Start: 8:08 AM PT End: 8:40 AM PT
Inspection Level: V - Terminal
HM Inspection Type: None

Carrier: CITY OF CLOVIS-PUBLIC TRANSIT

DBA: CLOVIS TRANSIT

155 N SUNYSIDE AVE

CLOVIS, CA, 93611

USDOT: 2808119

MC/MX#:

State#: 43134

Location: CLOVIS

Highway:

County: FRESNO

Email:

Phone#: (559)324-2770

Fax#: (559)324-2853

Driver:

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth:

State:

State:

Milepost:

Shipper: N/A

Origin: N/A

Destination: N/A

Bill of Lading: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	GLAV	2008	CA	1314782	50020	1GDE5V1958F418205	19500		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	N/A	N/A
Left	N/A	N/A
Chamber	HYDR	HYDR

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: X eScreen Inspection

State Information:

Odometer: 361209; File Code Number: 113866; Fuel Type: D; Passenger Capacity: 21; WC Passenger Capacity: 3; Bus Type: 1; Beat/Sub Area: 05; Regulated Vehicle: N; Pre-Cleared Vehicle: Y; Veh #1 Type: 09



TRUCKERS AGAINST TRAFFICKING

If you suspect human trafficking please contact 911 and call the National Human Trafficking Hotline at 1-888-373-7888. Make the call, save lives! Go to <https://truckersagainstrafficking.org/> to learn more.

Report Prepared By: ID/Badge #:
D. ORTIZ A11992

Copy Received By:

X

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California Highway Patrol
601 N. 7th Street
Sacramento, CA 95811
Phone: (916) 843-3400
Internationally Accredited Agency

Report Number: CAN994001815
Inspection Date: 12/16/2025
Start: 8:56 AM PT End: 9:36 AM PT
Inspection Level: V - Terminal
HM Inspection Type: None

Carrier: CITY OF CLOVIS-PUBLIC TRANSIT

DBA: CLOVIS TRANSIT

155 N SUNYSIDE AVE

CLOVIS, CA, 93611

USDOT: 2808119

MC/MX#:

State#:

Location: CLOVIS

Highway:

County: FRESNO

Email:

Phone#: (559)324-2770

Fax#: (559)324-2853

Driver:

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth:

State:

State:

Milepost:

Shipper: N/A

Origin: N/A

Destination: N/A

Bill of Lading: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	CHAM	2024	CA	1669311	50087	4UZADRFD9RCVG2456	25850		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	N/A	N/A
Left	N/A	N/A
Chamber	HYDR	HYDR

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 44997; File Code Number: 113866; Fuel Type: D; Passenger Capacity: 29; WC Passenger Capacity: 3; Bus Type: 1; Beat/Sub Area: 05; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 09



TRUCKERS AGAINST TRAFFICKING

If you suspect human trafficking please contact 911 and call the National Human Trafficking Hotline at 1-888-373-7888. Make the call, save lives! Go to <https://truckersagainstrafficking.org/> to learn more.

Report Prepared By: ID/Badge #:
D. ORTIZ A11992

Copy Received By:

X

X





California Highway Patrol
601 N. 7th Street
Sacramento, CA 95811
Phone: (916) 843-3400
Internationally Accredited Agency

Report Number: CAN994001816
Inspection Date: 12/16/2025
Start: 10:20 AM PT End: 11:05 AM PT
Inspection Level: V - Terminal
HM Inspection Type: None

Carrier: CITY OF CLOVIS-PUBLIC TRANSIT

DBA: CLOVIS TRANSIT

155 N SUNYSIDE AVE

CLOVIS, CA, 93611

USDOT: 2808119

MC/MX#:

State#: 43134

Location: CLOVIS

Highway:

County: FRESNO

Email:

Phone#: (559)324-2770

Fax#: (559)324-2853

Driver:

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth:

State:

State:

Milepost:

Shipper: N/A

Origin: N/A

Destination: N/A

Bill of Lading: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	CHAM	2019	CA	1551022	50080	1FVACWFCXKHKE5053	26000		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	1 1/2	1 1/2
Left	1 1/2	1 1/2
Chamber	L-20*	L-30

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 228825; File Code Number: 7495; Fuel Type: D; Passenger Capacity: 29; WC Passenger Capacity: 3; Bus Type: 1; Beat/Sub Area: 05; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 09



TRUCKERS AGAINST TRAFFICKING

If you suspect human trafficking please contact 911 and call the National Human Trafficking Hotline at 1-888-373-7888. Make the call, save lives! Go to <https://truckersagainstrafficking.org/> to learn more.

Report Prepared By:

D. ORTIZ

ID/Badge #:

A11992

Copy Received By:

X

X

