



State Price Quote Specification
TYPE A—ELECTRIC

Use this document to bid both non-lift and lift buses.

PART I

Vendor: _____

Mfr.: _____

ITEM	STATE-SUPPORTED SPECIFICATIONS Vendor must meet or exceed these specifications. Item bid shall be specified in column to right.	VENDOR SPECIFICALLY IDENTIFY ITEM BID Price of items bid will establish the state cost.
Seating Capacity	Maximum passenger capacity based upon an average center-to-center seat spacing of at least 27.5" with a lap-shoulder belt for each seating position.	Capacity w/o lift _____ Capacity w/lift _____
Axle—Front	Manufacturer's recommendation.	Mfr. _____ Capacity _____
Axle—Rear	Manufacturer's recommendation.	Mfr. _____ Capacity _____
Axle Ratio	Must comply with power and gradeability formula. Refer to Washington State School Bus Specifications Manual.	Mfr. _____ Capacity _____
Back-up Lights	All required backup lights to be LED (Light Emitting Diode). Refer to Washington State School Bus Specification's Manual.	Round: <input type="checkbox"/> Diameter _____ Other: <input type="checkbox"/> Square inches _____
Battery(ies) Low Voltage	535 CCA 12 volt minimum w/o lift. 1070 CCA 12 volt minimum w/lift.	Number of batteries _____ CCA _____
Battery(ies) Propulsion	Battery propulsion must meet a minimum of 80 kWh.	Number of batteries _____ kWh _____

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Brakes	Hydraulic: Drum or Disc. Refer to Washington State School Bus Specifications Manual.	Disc Front <input type="checkbox"/> Rear <input type="checkbox"/> Drum Front <input type="checkbox"/> Rear <input type="checkbox"/> Size Front _____ Rear _____
Doors, Service	Power operated.	<input type="checkbox"/> Air <input type="checkbox"/> Folding <input type="checkbox"/> Electric <input type="checkbox"/> Split, Outward Opening <input type="checkbox"/> Other _____
Heaters	Front—manufacturer's standard. Rear—40,000 B.T.U. minimum.	Front B.T.U. _____ Rear B.T.U. _____ Total B.T.U. _____
Lights	LED (Light Emitting Diode). Includes Clearance Lights, Stop Lights—7", Tail Lights, Turn Signals, Eight-Light System, and Dome-Light System.	Check if as specified <input type="checkbox"/> If not, explain _____
Motor	160 H.P. minimum.	Engine Mfr. _____ Model _____ Net torque _____ @ _____ R.P.M. Net H.P. _____ @ _____ R.P.M.
P.A. System	AM/FM/PA radio with 2 interior and 1 exterior speakers.	Mfr. _____ Model No. _____
Seat Spacing	To permit specified passenger capacity based on an average center-to-center seat spacing of at least 27.5".	Inside measurement from rear of stepwell to appropriate point at rear of passenger seating area: w/o lift _____ w/lift _____ Mfg.'s C/C seat measurement of vehicle (inches): w/o lift _____ w/lift _____

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Steering Wheel	Tilt.	Check if as specified <input type="checkbox"/>
Step Tread	Studded or pebbled top tread covering.	Mfr. _____
Tires	6 first quality, radial ply.	Mfr. _____ Size _____ Load range _____
Toolbox	Exterior, manufacturer standard.	Size (cubic feet) _____
Two-way Communications	45-watt, VHF, mil. spec.	Mfr. _____ Model No. _____
Wheels	6 to be compatible with tire size.	Size _____ Rim width _____
SPECIAL NEEDS REQUIREMENTS—CHASSIS AND BODY		
Wheelchair Lift—Installed	Must meet state specification. Platform shall be a minimum of 32" x 52".	Mfr. _____ Model No. _____
Wheelchair/Occupant Tie-down System—Installed	Must meet state specification.	Mfr. _____ Model No. _____

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ADDITIONAL REQUIREMENTS—CHASSIS AND BODY		
Line Setting Ticket	Legible copy of manufacturer's Line Setting Ticket will be delivered with each vendor's packet at the time of delivery.	Check if as specified <input type="checkbox"/>
Owner's/Operator's Handbook	One copy of the chassis manufacturer's owner's/operator's handbook or manual will be furnished with each bus at delivery.	Check if as specified <input type="checkbox"/>
Repair Manuals	A complete set of chassis, engine, transmission, and body repair manuals, including wiring diagram for all components, will be made available at time of delivery, with instructions available on accessing repair materials.	Check if as specified <input type="checkbox"/>
Service and Cleaning	Cleaning and service by vendor prior to delivery will include: <ul style="list-style-type: none"> • Chassis lubrication. • Check fluid levels: verify all are at recommended full levels. • Cooling system protected at -20°F. • Interior and exterior will be clean (including glass). • All systems (electric, air, hydraulic, mechanical and manual) be inspected to ensure proper operation at time of delivery. • All components and accessories will be installed and operational at time of delivery. 	Check if as specified <input type="checkbox"/>
Warranty	A complete copy of all warranty agreements will be furnished at time of delivery.	Check if as specified <input type="checkbox"/>



Washington Office of Superintendent of
PUBLIC INSTRUCTION
2021-2022

STUDENT TRANSPORTATION
Old Capitol Building
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Olympia, WA 98504-7200
(360) 725-6120 TTY (360) 664-3631

**VEHICLE DATA SHEET AND OFFICIAL PRICE QUOTATION
TYPE A—ELECTRIC**

VENDOR'S COMPANY NAME	REPRESENTATIVE'S NAME	TELEPHONE NUMBER
ADDRESS	Estimated delivery date to school district from time purchase order is received: _____ _____ Firm where engine and chassis can be serviced or repaired and parts obtained: _____ _____ Firm where body can be serviced or repaired and parts obtained: _____ _____	

BODY			
MAKE	Warranty: Years _____ Miles _____	Inside measurement from rear of stepwell to appropriate point at rear of passenger seating area: w/o lift _____ w/lift _____	Equipped seating capacity: w/o lift _____ w/lift _____
MODEL	YEAR	Seat color: _____ Floor color: _____	Overall vehicle length (inches): w/o lift _____ w/lift _____

CHASSIS		MOTOR	
MAKE	Warranty: Years _____ Miles _____	MANUFACTURER	Torque: _____ @ _____ RPM H.P.: _____ @ _____ RPM
MODEL	YEAR	Wheel base: _____	Fuel type: _____

BATTERIES		WARRANTY	
12 Volt	Propulsion	Warranty: Years _____	
Battery type/grp: _____	Number batteries: _____	Miles _____	
Number batteries: _____	Total KWH: _____		
Total CCA: _____			

QUOTED PRICE	
Quoted price is based upon payment within 30 days after delivery to the school district (without sales tax).	
Electric Bid—w/o lift \$ _____	Electric Bid—w/lift \$ _____
VENDOR REPRESENTATIVE'S SIGNATURE <i>David Jones</i>	DATE

State Price Quote Specification
DISTRICT-SUPPORTED OPTIONS
TYPE A

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CHASSIS			
ITEM	Vendor must meet or exceed these specifications. Item bid shall be specified in column to right.	VENDOR SPECIFICALLY IDENTIFY ITEM BID Price of items bid will establish the district cost.	
Small A	Type A bus—10,000 lbs or under GVWR chassis.	Deduct _____	
		Mfr. _____	
		Capacity w/o lift _____	
		Dual Wheel _____	
		Single Wheel _____	
Air Conditioning	To cool passenger compartment as required in the Washington State School Bus Specifications manual.	Mfr. _____ Cost \$ _____	
Back-up Alarm	Must meet state specification.	Mfr. _____ Cost \$ _____	
Color	Exterior white roof.	Cost \$ _____	
Steering Wheel	Tilt and telescoping column.	Cost \$ _____	
Strobe Light	Exterior roof mounted white strobe light.	Mfr. _____ Model No. _____ Cost \$ _____	
Student Protection System—Installed	Electronic system to insure driver post-trip inspection of passenger compartment.	Mfr. _____ Model No. _____ Cost \$ _____	
Toolbox	Interior, manufacturer standard.	Cost \$ _____	Deduct \$ _____

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PART II (cont.)

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ITEM	Vendor must meet or exceed these specifications. Item bid shall be specified in column to right.	VENDOR SPECIFICALLY IDENTIFY ITEM BID Price of items bid will establish the district cost.	
Video Camera Systems—Installed	Digital audio/video system for monitoring the passenger compartment with more than two cameras.	Mfr. _____ Model No. _____ Cost \$ _____ How many cameras _____	
Video Camera Systems—Stop Sign Camera—Installed	Must meet state specification.	Stand Alone System	Added to Interior System
		Mfr. _____ Model No. _____ Cost \$ _____ How many cameras _____	Mfr. _____ Model No. _____ Cost \$ _____ How many cameras _____
Warning Light Monitor	16 light monitoring system.	Incandescent	LED Lights
		Cost \$ _____	Cost \$ _____
Additional Wheelchair/Occupant Tie-down System—Installed	Must meet state specification.	Mfr. _____ Model No. _____ Cost per station \$ _____	
Windows	Laminated passenger-compartment side or rear glass.	Side Cost \$ _____	
		Rear Cost \$ _____	
		Both Cost \$ _____	
Windows	Tinted.	Cost \$ _____	