

# FTA

FEDERAL TRANSIT ADMINISTRATION

## TRI Bus Testing



U.S. Department of Transportation  
Federal Transit Administration



# Application Details

Test Link : <http://ftawebtest.fta.dot.gov/BusTesting/Account/Login>

Login details are pre-populated (since this is a test environment)

**NOTE:** Please note that this is a test environment so some of the functionalities are still in development.

# Login

For FTA Discussion Only

 Federal Transit Administration

BT | Bus Testing



Login

[Register](#)

[Forgot Password?](#)

# New User Registration

For FTA Discussion Only

Home / Register

### Register

\*E-mail Address:

\*Password:

\*Confirm Password:

\*Security Question #1:  
-- Select --

\*Answer #1:

\*Security Question #2:  
-- Select --


\*Answer #2:

\*Security Question #3:  
-- Select --

\*Answer #3:

# Dashboard

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**Bus Testing**

## Dashboard

[Create New Bus Testing Form](#)

Form Name	Date Submitted	Assigned To	Application Status	Functions
No data found				

 **U.S. DEPARTMENT OF TRANSPORTATION**  
*Federal Transit Administration*  
1200 NEW JERSEY AVENUE, SE  
WASHINGTON, DC 20590  
202-366-4043



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- ▶ USA.gov

# Create New Bus Testing Form – Introduction with PRA Statement

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## Introduction

This collection of information is required to obtain federal funds for new transit bus models or existing bus models that have been previously tested, but have undergone significant/major changes to their design. The information collected will be used for entry into FTA's Bus Testing Program. Title 49 U.S.C. Section 5318(e) provides that federal funds appropriated or otherwise made available under 49 U.S.C. Chapter 53 may not be obligated or expended for the acquisition of a new bus model unless a bus of that model has been tested for maintainability, reliability, safety, performance (including braking performance), structural integrity, fuel economy, emissions, and noise at a bus testing facility. Public reporting burden is estimated to average 2131 hours, including the time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 49 CFR Part 665.13(b) states that upon completion of testing of a new bus model at the Bus Testing Center, the scored test results and resulting test report will be provided to the bus manufacturer or entity that entered into a contract with the Center. The test report will be available to recipients only after both the bus manufacturer and FTA have approved it for release. If the bus manufacturer declines to release the report, or if the bus did not achieve a passing test score, the vehicle will be ineligible for FTA financial assistance. Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2132-0550. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Transit Administration, 1200 New Jersey Avenue, SE, Washington, DC 20590.

The Bus Testing Form allows users to fill information in the below sections and submit the form to FTA for review

- Contact Information
- TVM Regulatory Compliance
- Vehicle Details
- Determination of Required Testing

Please enter the Bus Testing Form Name and click on Getting started to fill in the details.

**Bus Testing Form Name \***

Getting Started

# Contact Information

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Federal Transit Administration | BT | Bus Testing

Intro | **Contact Info** | Regulatory Compliance | Vehicle Info | Required Testing | Submit

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### Contact Information

**Note:** Fields marked with asterisk "\*" are mandatory

<b>Bus Model *</b>	<b>Other Name(s)/Make(s) this bus model is marketed under</b>	
<input type="text"/>	<input type="text"/>	
<b>Manufacturer Name *</b>	<b>Parent Company Name</b>	
<input type="text"/>	<input type="text"/>	
<b>Street Address *</b>	<b>Address 1</b>	<b>Address 2</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>City *</b>	<b>State *</b>	<b>Zip Code *</b>
<input type="text"/>	-- Select -- <input type="button" value="v"/>	<input type="text"/>
<b>Primary Contact</b>		
<b>Name *</b>	<b>Title *</b>	
<input type="text"/>	<input type="text"/>	
<b>Email *</b>	<b>Phone *</b>	
<input type="text"/>	<input type="text"/>	

# Contact Information (Contd..)

## Alternate Contact

Name

Title

Email

Phone

Is this a request for a Determination of Bus Testing requirements? \*

Yes  No

Is this a request to Authorize this bus to begin Bus Testing? \*

Yes  No

Save

Validate

Cancel

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# TVM Regulatory Compliance

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## TVM Regulatory Compliance

(required if seeking testing authorization)

**Provide evidence of manufacturer/ vehicle compliance with all applicable Federal Motor Vehicle Safety Standards (FMVSS), and NHTSA requirements at 49 CFR Part:**

- 565** - Vehicle Identification Number
- 566** - Manufacturer Identification
- 567** - Certification
- 568** - Vehicle Manufactured in Two or More Stages (if applicable)

[Browse...](#)

Max file size to be 20 MB and file types as pdf, doc, docx, xls, xlsx, ppt, pptx

**Description of File**

[Upload File](#)

Function	Document Name	Description
No data found		

# TVM Regulatory Compliance (Contd..)

For FTA Discussion Only

**Disadvantaged Business Enterprise (DBE) Goals**

If you are listed on the [Eligible Transit Vehicle Manufacturers](#) website, it serves as adequate proof of evidence and this field is not necessary. Otherwise, please provide evidence that Disadvantaged Business Enterprise (DBE) goals have been submitted to FTA pursuant to 49 CFR Part 26.

Max file size to be 20 MB

**Description of File**

Function	Document Name	Description
No data found		

# Vehicle Details

Intro | Contact Info | Regulatory Compliance | **Vehicle Info** | Required Testing | Submit

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## Vehicle Details

Vehicle Identification Number (VIN)

General vehicle configuration/description

Is this bus model a variation of another bus model and/or a previously-tested bus model?

Yes  No

Service life category

-- Select --

Overall length (body-to-body)

Feet  Inches

Width (not including mirrors)

Feet  Inches

Height (clearance height, including solid roof-mounted equipment)

Feet  Inches

Wheelbase (1st to 2nd axle)

Feet  Inches

Wheelbase (2nd to 3rd axle, if applicable)

Feet  Inches

Wheelbase (3rd to 4th axle, if applicable)

Feet  Inches

Curb Weight

Front axle weight rating (GAWR)  Middle axle weight rating (GAWR) ('n/a' if not applicable)

Rear axle weight rating (GAWR)  Gross vehicle weight rating (GAWR)

Articulated bus?

Yes  No

Is this bus built on a chassis produced by another company?

Yes  No

Make/Model of chassis (required if chassis is produced by another company)

Describe any significant chassis modifications, or state 'unmodified'

# Vehicle Details (Contd..)

**Fuel Type/Power Source**  
 -- Select --

**Other Fuel Type/Power Source**  
 [Text Area]

**Hybrid powertrain?**  
 Yes  No

**Additional Information**  
 [Text Area]

**Number of passenger seats (not including driver seat)**  
 [Text Input]

**Number of wheelchair positions**  
 [Text Input]

**Reduction in number of passenger seats when all wheelchair positions are in use (enter '0' if no reduction)**  
 [Text Input]

**Manufacturer-designated standing passenger capacity: (Must match placard installed in bus)**  
 [Text Input]

**Describe any significant differences between the design, components, techniques, tooling, and materials used in the test bus, and those that will be used in production of subsequent buses of this model (or state 'None')**  
 [Text Area]

Identify the country where these major components of the test unit were manufactured: (For each component listed below enter "USA", other country name, or "n/a" if not installed on the bus. Components that are included in a chassis built by another company may be indicated by entering "c")

<b>Chassis</b>	<b>Body Shell</b>	<b>Front Axle</b>	<b>Middle Axle</b>
[Text Input]	[Text Input]	[Text Input]	[Text Input]
<b>Rear Axle</b>	<b>Engine</b>	<b>Fuel Injectors and Manifolds</b>	<b>Fuel Injection ECU</b>
[Text Input]	[Text Input]	[Text Input]	[Text Input]
<b>Transmission</b>	<b>Traction Battery Cells</b>	<b>Traction Batter Pack(s)</b>	<b>Electric Propulsion Motor(s)</b>
[Text Input]	[Text Input]	[Text Input]	[Text Input]
<b>Inverter(s)</b>	<b>Fuel Cell(s)</b>	<b>Fuel Tank(s)</b>	
[Text Input]	[Text Input]	[Text Input]	

You may list other major bus components and their countries of origin here, if desired  
 [Text Area]


**Additional Information or Comments (optional)**  
 [Text Area]

[Save] [Validate] [Cancel]

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# Determination of Required Testing – No Testing

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Intro Contact Info Regulatory Compliance Vehicle Info **Required Testing** Submit

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## Determination of Required Testing


For determination, do you believe you will need Full or Partial Testing?

Full Testing    Partial Testing    No Testing

Save   Validate   Cancel

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# Determination of Required Testing – Full Testing

 Federal Transit Administration BT | Bus Testing

Intro Contact Info Regulatory Compliance Vehicle Info Required Testing Submit

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### Determination of Required Testing

For determination, do you believe you will need Full or Partial Testing?

Full Testing    Partial Testing    No Testing

In the fields below, select Yes or No to the tests you believe are or are not required and provide a concise explanation of your rationale.

**New Bus Model Testing**

Yes    No   Rationale

**All or most tests may result in significantly different data**

Yes    No   Rationale

Save Validate Cancel

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# Determination of Required Testing – Full Testing

Intro | Contact Info | Regulatory Compliance | Vehicle Info | **Required Testing** | Submit

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### Determination of Required Testing

For determination, do you believe you will need Full or Partial Testing?

Full Testing
  Partial Testing
  No Testing

Select which tests you believe are required via the dropdown below and provide a concise explanation of your rationale. Please select as many tests that may apply.

[Bus Testing Procedures](#)

**Replacement and/or repair of selected subsystems** -- Select -- ▼

**Rationale**


[Add](#)

Function	Replacement and/or repair of selected subsystems	Rationale
No data found		

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[Validate](#)
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# Submit Form

 **Federal Transit Administration** **BT** | **Bus Testing**

**Intro****Contact Info****Regulatory Compliance****Vehicle Info****Required Testing****Submit**

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## Submit Form

Form Name	Validated?
Contact Information	Not Validated
TVM Regulatory Compliance	Not Validated
Vehicle Details	Not Validated
Determination of Required Testing	Not Validated


**Additional Comments**

**Time taken to fill out the form**  
**Hours**  **Minutes**



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Show  entries Search:

Form Name	Date Submitted	Assigned To	Application Status	Functions
Test Bus Testing Form	N/A	Not Assigned	In-Progress	 

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