

FORM A-1
(BTR-F_NML-V00)

Land Transport Authority

10 Sin Ming Drive

Singapore 575701

Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

**LIST OF NAMES AND ADDRESSES OF SCHOOL CHILDREN / STAFF AND
TIME-TABLE OF THEIR CONVEYANCE**

Bus Operator Information		
Name of Bus Operator / Owner:	NRIC No.:	
Address:	Tel.:	(O) (HP)
	Email Address:	
Bus Information	Bus Attendant Information (if required*)	
Bus Registration No.:	Name of Bus Attendant:	
Licensed Seating Capacity:	NRIC No.:	
Conveyance Details		
Name of School:		
	Pick up time	Set down time
Forward Trip		
Return Trip		
Declaration	Verification by School Principal	
I declare that all details provided are true and correct.	Name: _____	
	School Stamp:	
_____ Signature	_____ Date	_____ Signature
	_____ Date	_____ Date

* A bus attendant is required if the bus is used to convey children of any child care centre or kindergarten, or if the licensed capacity of the bus exceeds 30 children.

FORM A-2

Details of Children / Staff

Bus Registration Number: _____

No.	Name of Student / Staff	Date of Birth	Class	Home Address