



**ISD #152 DEPARTMENT OF TRANSPORTATION
SCHOOL BUS STOP ARM VIOLATION REPORT**
Provide to Moorhead Police Department



Date of incident _____ Time of incident _____ ICR # _____

Location _____

VIOLATOR INFORMATION:

License Plate Number _____ State (if other than MN) _____

Vehicle Color _____ Make _____ Model _____ # of Doors _____

Other Vehicle Features _____

Violator direction of travel _____ ; Passed on what side of bus L or R; Between bus and child Y or N

Description of Driver _____

Number of passengers in vehicle (if any) _____ Comments _____

SCHOOL BUS INFORMATION:

Bus Unit Number _____ Direction of travel for bus _____

Driver's Full Legal Name _____ Date of Birth _____

Home Phone _____ Cell Phone _____

School Bus Owner _____ Phone _____

Were students outside of bus? Y or N LOADING _____ UNLOADING _____ CROSSING _____

8 Way System was Last Checked _____ and Operating Correctly Y or N

Name other known witnesses (if any) _____

Comments _____

****Map: Print map and use to illustrate the violation site indicating street and/or road numbers and exact location of bus unit and vehicle when violation occurred.***

Signature _____

Appendix H