



# BUS SVM MOBILITY ENROLLMENT FORM PROCESSING CODE HBM

EMAIL [SVM.mailbox@gm.com](mailto:SVM.mailbox@gm.com)

The bus chassis listed below meets the mobility requirement under the special vehicle manufacturer (SVM) bus mobility program.

VIN #	MODEL #	MY	ORDER #

**NOTE:** The bus manufacturer is required to provide the GM Dealer a bus body floor plan showing the bus is manufactured with eligible bus mobility equipment. The bus body floor plan is to be retained in the GM dealer's deal file.

## BUSES BUILT AS LISTED BELOW ARE ELIGIBLE FOR THIS INCENTIVE.

1. Permanently installed wheel chair lift and wheel chair seating accommodations.
2. Low floor bus with permanently installed wheel access ramp and wheel chair seating accommodations.

## FORM SUBMITTED BY

NAME	_____	CODE	_____
E-MAIL ADDRESS	_____	59-	_____
SVM NAME	_____	56-	_____
DATE	_____		

Upon acceptance by General Motors, this form will be returned to acknowledge application of the bus manufacturer mobility code.

INPUT BY \_\_\_\_\_

DATE \_\_\_\_\_