



INDOT EMERGENCY VEHICLE DESIGNATION – Data Sheet

Policy Department: Traffic Management Division

Created: 26 September 2019

Last updated: 06 January 2020

PLEASE PROVIDE ONE SHEET PER VEHICLE. PLEASE TYPE OR PRINT.

Application Date:	
Request to Activate, Deactivate, or Renew:	
Sponsoring Agency:	
Agency Street:	
Agency City:	
Agency State:	
Agency Zip Code:	
County or County Number of Vehicle Registration:	
Emergency Vehicle Year:	
Emergency Vehicle Make:	
Emergency Vehicle Model:	
Emergency Vehicle Commission or Plate Number:	
Applicant Name:	
Applicant Phone Number:	
Applicant E-Mail:	
Supplemental Statement of Use / Additional Considerations Specific to this Vehicle:	
<p><i>(This is not required unless the Sponsoring Agency needs to make comments specific to this vehicle. Cover letter explanations are typically sufficient.)</i></p>	