

# SUMMARY MOTOR VEHICLE REPORT

CO-648B Rev. 07/2024



STATE OF CONNECTICUT  
OFFICE OF THE STATE COMPTROLLER

DEPARTMENT OF ADMINISTRATIVE SERVICES WILL REPORT FOR ALL FLEET VEHICLES. AGENCIES WILL ONLY REPORT FOR AGENCY-OWNED MOTOR VEHICLES AS OF JUNE 30TH. THIS FORM IS DUE TO THE OFFICE OF THE STATE COMPTROLLER, [OSC.ASSETS@CT.GOV](mailto:OSC.ASSETS@CT.GOV), BY SEPTEMBER 30TH.

|  |  |                                       |  |
|--|--|---------------------------------------|--|
| AGENCY NAME  |  | COUNT OF VEHICLES AS OF JUNE 30th, 20 |  |
| AGENCY ADDRESS   |  |                                       |  |
| TYPE OF VEHICLE  |  | NUMBER OF VEHICLES                    |  |
| AIRCRAFT   |  |                                       |  |
| AMBULANCES   |  |                                       |  |
| BOATS  |  |                                       |  |
| BUSES  |  |                                       |  |
| CAMPERS  |  |                                       |  |
| CUSHMAN VEHICLES   |  |                                       |  |
| FORKLIFTS, TRACTORS, PAYLOADERS AND GRADERS                                  |  |                                       |  |
| MOTORCYCLES AND BIKES  |  |                                       |  |
| PASSENGER CARS   |  |                                       |  |
| SNOWMOBILES  |  |                                       |  |
| TRAILERS   |  |                                       |  |
| TRAIN CARS   |  |                                       |  |
| TRUCKS, JEEPS AND VANS   |  |                                       |  |
| OTHER WATERCRAFT   |  |                                       |  |
| MISC. (INDICATE TYPE(S) AND NUMBER(S) IN SPACE BELOW. ENTER TOTAL IN COLUMN) |  |                                       |  |
| MISC 1   |  |                                       |  |
| MISC 2   |  |                                       |  |
| MISC 3   |  |                                       |  |
|  |  | TOTAL                                 |  |
| PREPARED BY NAME:  |  | EMAIL:                                |  |
| PREPARED BY TITLE:   |  | PHONE:                                |  |
| PREPARED BY SIGNATURE:   |  | DATE:                                 |  |
| AUTHORIZED NAME:   |  | EMAIL:                                |  |
| AUTHORIZED TITLE:  |  | PHONE:                                |  |
| AUTHORIZED SIGNATURE:  |  | DATE:                                 |  |