



## Florida Car Seat Fitting Station Submission Form

The University of Florida (UF) maintains a list of locations used for fitting car seats in Florida. This information is available to the public online at [flchildseatsafety.com](http://flchildseatsafety.com). To submit your fitting station for inclusion, a nationally certified child passenger safety (CPS) technician or instructor **must** be listed as the contact person. Please provide the following information and sign the certification statement below to include your car seat clinic or fitting station.

\*Indicates a required field.

Type of Request\*  New Fitting Station  Update Fitting Station Information

Agency/Organization\* \_\_\_\_\_

Contact Name\* (this name posted on the website) \_\_\_\_\_

Street Address\* (no PO Boxes) \_\_\_\_\_

City\* \_\_\_\_\_ County \_\_\_\_\_ State FL \_\_\_\_\_ Zip Code\* \_\_\_\_\_

Phone Number\* \_\_\_\_\_ Email\* (posting to public) \_\_\_\_\_

Counties Served\* \_\_\_\_\_

Days of Operation\* \_\_\_\_\_ Hours of Operation\* \_\_\_\_\_

	Y	N
Virtual Assistance Available*	<input type="checkbox"/>	<input type="checkbox"/>
Walk-Ins Welcome*	<input type="checkbox"/>	<input type="checkbox"/>
Appointment Needed*	<input type="checkbox"/>	<input type="checkbox"/>
Donation Requested?*	<input type="checkbox"/>	<input type="checkbox"/>
Hearing Impaired Assistance Available*	<input type="checkbox"/>	<input type="checkbox"/>
Multi-Lingual Services Available*	<input type="checkbox"/>	<input type="checkbox"/>
Safe Travel for All Children (STAC) certification*	<input type="checkbox"/>	<input type="checkbox"/>
Safety on School Buses certification*	<input type="checkbox"/>	<input type="checkbox"/>

➔ Please indicate language(s) \_\_\_\_\_

Notes: \_\_\_\_\_

**Inspection Station Certified Personnel\*** (Please list each CPS technician or instructor by name and include certification number)

\_\_\_\_\_

**Certification Statement:** I certify that all child safety seat checks completed at the fitting station listed above will be conducted by a nationally certified CPS technician or instructor. I will notify my State CPS Coordinator if we discontinue providing car seat fittings and/or are no longer currently certified to conduct such fittings.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return by email to: FloridaOPRC@ce.ufl.edu