



50 High Tech Road
Richmond Hill, ON. L4B 4N7

Tel 905 762 1282 ext 5601
Fax: 905 762 2964

CUSTOMER BUS CHARTER REQUEST FORM

Charter Rates

	York Region Transit Conventional Service	York Region Transit Mobility Plus Service
Regular Charter Rate	\$126 per bus per hour	\$126 per bus per hour
Discount Charter Rate (for Regional Departments, Local Municipalities in York Region and Registered Non-Profit Community Groups, including School Boards)	\$98 per bus per hour	\$85 per bus per hour

- A minimum three-hour charge will be applied.
- Provision of charter services is subject to bus availability.
- No charters will be scheduled on weekdays during peak periods. These hours are to be identified specifically as 6:30 AM to 10:00 AM and 2:00 PM to 7:30 PM.
- No charters will be accepted weekdays during the month of September.
- Due to license requirements, YRT can only operate charter services within York Region's boundaries.
- As of March 1st of each year YRT will annually adjust rates based on terms of YRT's performance based operations and maintenance contract including Statistics Canada's Consumer Price Index, Toronto area, and fuel escalation charges paid to the contractors.

Responsibility of the Applicant:

- Interested applicants will be required to complete a YRT application form not less than 5 working days prior to the charter date.
- Applicant will be obligated to pay the full cost of the charter as set out in this policy. This includes travel time from and back to the contractor's garage.

SECTION A: Customer Information

Name: _____ Company's Name: _____

Address: _____

_____ Postal Code: _____

Phone #: _____ Cell #: _____ E-mail: _____

SECTION B: Charter Information:

Day: _____ Date of Charter: _____ / 2010 # of Passengers: _____

Itinerary:

Trip # 1: Boarding Time: _____ at: _____
 Depart time: _____ Arrive at: _____

Return: Boarding: _____ at: _____
 Depart time: _____ at: _____



SECTION C: Equipment Information:

(a) Static Display	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
(b) Door Open	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
(c) Door Closed	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
(d) Driver Required	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Requested Bus Type:

(a) VIVA 60' (approx. 54 passengers) 40' (approx. 36 passengers)

(b) YRT 40' (approx. 42 passengers)

35' (approx. 31 passengers) Accessible

30' (approx. 24 passengers)

SECTION D: Payment Information:

To be invoiced after the trip. All estimates are strictly estimates and are therefore subject to increase or decrease. To confirm your acceptance of this payment arrangement for this charter service, please sign below and return it to the York Region Transit by fax. Be advised that by signing this form you will personally be responsible for the payment for this service. Our fax number is (905) 762 2964. Thank you.

Name: _____ Phone #: _____

Company's Name: _____ Title: _____

Address: _____

Postal Code: _____

Signature: _____ Dated: _____

Approval: _____ Dated: _____
 YRT Operations Supervisor

Assigned To: _____ Assigned To: _____
 YRT Operation Inspector Contractor

Revised: 01 MAR 2008