$Request\ to\ Designate\ Taxis\ as\ Single\ Shift\ Paired\ Vehicles\ \ {\tt PT\ Board\ Form}$

About this form: Use this form to provide information about your request to designate single shift paired vehicles (e.g. day only and night only vehicles).

A: Applicant
Legal Name:
Trade Name:
PT Licence Number:
B: Data Provision Capability
Section 28(5)(a) to (c) of the <i>Passenger Transportation Act</i> sets out that a taxi licensee must provide to the Registrar any information, including personal information and data, within time periods that the Registrar or the Board may require.
I confirm that I have the capability to meet the data requirements of both the Registrar and the Board. See the <u>Branch website</u> and the <u>Board's Data Requirements</u> .
C: SSPV Request
How many additional vehicles do you require to operate single shift paired vehicles?
Note:
 If you have a maximum fleet size of 10 taxis and you want to operate them as 10 paired vehicles, you would apply for 10 additional vehicles.
• Wheelchair accessible taxis may only be paired with a wheelchair accessible taxi.
 Peak period, weekend taxis are not eligible for operation as SSPV.
D: Shift Change Information
Please specify the start and end times of all shifts that single shift paired vehicles will operate (i.e. start & end times of day shift vehicles and start and end time of night shift vehicles.)

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E: D	Declaration of SSPV Eligibility
I MA	KE THE FOLLOWING DECLARATIONS OF ELIGIBILITY RESPECTING s:
	There are vehicles in my fleet that have been routinely operated for two shifts on the same day.
	The capacity of my fleet to meet public requests for rides is reduced when shift changes occur.
	I understand that SSPV do not increase my taxi fleet size. The SSPV are not in operation at the same time, apart from completion of a trip in process at the end of a shift.
F: P	ublic Need and Sound Economic Conditions
infor wish infor	he purposes of this application process, the Board will consider mation and evidence from the 2018 report by Hara Associates. If you to rely on this report, check the box below. Please include all additional mation and submissions regarding public need and sound economic litions as separate attachments.
	Modernizing Taxi Regulation, Hara Associates, July 2018
	Other (please specify separately):
G: S	ignatures All licensees listed in A must sign. Insert electronic signature or print, sign and scan.
	Name: Title:
Signa	ture: Date: