



CUSTOMER BUS CHARTER REQUEST FORM

Charter Rates

Regular Charter Rate	\$146 per bus per hour
Discount Charter Rate (for Regional Departments, Local Municipalities in York Region, Non-Profit Community Groups, and Publicly Funded School Boards)	\$112 per bus per hour

- A minimum three-hour charge will be applied to each chartered vehicle.
- Provision of charter services is subject to bus availability.
- Charters requested during weekday peak periods will be at York Region Transit's discretion. These hours are to be identified specifically as 6:30 AM to 10:00 AM and 2:00 PM to 7:30 PM.
- Rates are adjusted annually based on terms of York Region Transit's performance-based operations and maintenance contract, including Statistics Canada's Consumer Price Index, and Toronto, Ontario area rates.
- Pricing structure is approved and mandated by council and is non-negotiable.
- York Region Transit primarily operates charter services within York Region boundaries and can accommodate requests to operate outside of these boundaries provided the start and/or end location is within the Region.

Responsibilities of the Applicant:

- Interested applicants are required to complete a York Region Transit application form no less than ten business days prior to the charter date.
- Applicant is obligated to pay the full cost of the charter. This includes travel time from and back to the contractor's garage.
- Applicant is responsible for the minimum three-hour charge for any cancellations made less than 48 hours prior to the charter date.



Compliance:

Non-compliance to any of the applicant responsibilities may result in application refusal, and/or additional charges.

SECTION A: Customer Information

Name: _____
Company's Name: _____
Address: _____
Phone #: _____ Cell #: _____ E-mail: _____

SECTION B: Charter Information:

Date of Charter: _____
Number of Passengers: _____

Itinerary:

Pick up:

Boarding Location: _____
Boarding Time: _____
Departure Time: _____
Arrival Time: _____
Destination Location: _____

Return:

Boarding Location: _____
Boarding Time: _____
Departure Time: _____
Arrival Time: _____
Destination Location: _____

If needed, please attach additional details on a separate page

SECTION C:

Requested Bus Type (check box for preference):

- | | | | |
|--|--|------------|--|
| VIVA | | YRT | |
| (a) <input type="checkbox"/> 60' (approx. 54 passengers) | (c) <input type="checkbox"/> 40' (approx. 38 passengers) | | |
| (b) <input type="checkbox"/> 40' (approx. 36 passengers) | (d) <input type="checkbox"/> 30' (approx. 24 passengers) | | |



SECTION D: Billing Information:

All charter estimates are strictly estimates and are therefore subject to change. The total cost of the charter shall be reflected in the invoice in which payment is due upon receipt and remitted within 30 days.

By signing this document I acknowledge that I have read and understand the information provided in the CUSTOMER BUS CHARTER REQUEST FORM.

Please sign below and submit this request form no less than 10 working days prior to the charter date.

Name: _____ Phone #: _____

Company's Name: _____

Address: _____

_____ Postal Code: _____

Signature: _____ Dated: _____

GL Code: _____

(Regional Municipality of York Employee's only)

To submit request form to York Region Transit Operations:

samantha.mcnaught@york.ca

Tel: 1-877-464-9675 ext. 77781