

Application to withdraw a public transport service

4509 08_2015

Applications need to be received not less than 15 days before the proposed withdrawal date of the service.

OPERATOR INFORMATION

1. Name of licence holder or organisation making this application

(If licence holder, please use name on passenger service licence)

2. Trading name (if different from above)

3. Names of each company/organisation shareholder

Note shareholder names only required for unlisted companies

4. Address for correspondence:

5. Street address: (if different from address for correspondence)

Phone:

Email:

Website (if applicable)

6. Passenger service licence number: (Please attach a copy)

Date of Issue:

*This application form is also available to download,
or submit online at www.waikatoregion.govt.nz*

SERVICE SUMMARY

7. Service registration number

(as allocated by Waikato Regional Council):

8. Proposed withdrawal date of service:

9. Route name or number:

10. Outer terminus:

11. Inner terminus:

12. Full route description:

Please detail all streets used, including details of all "on demand" deviations and route variations

13. Stopping places:

Parts of service having no fixed stopping places:

Use of existing stops on route

YES NO

DECLARATION

I attach a copy of my:

TIMETABLE

ROUTE MAP

FARE SCHEDULE

PASSENGER SERVICE LICENCE

I declare that, to the best of my knowledge, the information I have given is true and correct.

Signed:

Date:

Name:

Position in Business:

Do you have a Certificate of Knowledge of Law and Practice?

YES NO

Please post application to:
Public Transport Registrations
Waikato Regional Council
Private Bag 3038
Waikato Mail Centre
HAMILTON 3240