

# Application to register a public transport service

4509 08\_2015

Applications need to be received not less than 15 days before the proposed start 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](http://www.waikatoregion.govt.nz)*

## SERVICE SUMMARY

### 7. Proposed start date of service:

### 8. Type of Service: (Please tick)

BUS FERRY SCHEDULED NON-SCHEDULED 

### 9. Route name or number:

Other (give details)

### 10. Outer terminus: 11. Inner terminus: 12. Intended duration of service (if applicable):

### 13. Full route description: Please detail all streets to be used, including details of all "on demand" deviations and route variations

### 14. Stopping places:

#### Parts of service having no fixed stopping places:

Use of existing stops on route

 YES NO

Use of new stops on route

 YES NO

Have new stops been approved by the Territorial Local Authority?

 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