

APPLICATION TO WITHDRAW A NON-SCHEDULED PASSENGER SERVICE



COMPANY DETAILS

Name of Operator:
(or approved Organisation)

Trading Name:
(if different from above)

Address:
(Postal)

Address:
(Street – if different from above)

Office Phone Number:

Facsimile Number:

Service Summary

(As allocated by Regional Council)

Type of Service:

- Taxi Service (based in Region)
- Taxi Service (to/from Region)
- Other Non-Scheduled Service

Proposed Date of Withdrawal of Service:

Declaration

I declare that, as far as I know, the information I have given is true and correct.

Signed:

Date:

OFFICIAL USE ONLY

Date of Receipt	Action	Applicant Informed
	Accept	Date
Acknowledged	Decline	
	Defer	
Initials	Initials	Initials

Notes

Date Service Entered in Register

Confirmed Service Commencement Date