



REQUEST FOR PROPOSAL – SERVICES

RFP9-2019

**PROVISION OF TAXI SERVICES FOR NIAGARA FALLS TRANSIT SERVICES TRANS-CAB
AND SUPPLEMENTAL SPECIALIZED TRANSIT FOR
CHAIR-A-VAN**

APPENDIX D – VEHICLE LISTING FORM

Bidding Company Name:	
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Bidder's shall state hereunder the make, model, license plate number and capacity for each vehicle that will be used for Trans-Cab riders. Please note, these vehicles may be required for Specialized Transit purposes as well, dependent upon the transit rider's requirements. All sections of this form must be submitted. Any Proposal submitted not including this form will be rejected.

Vehicle Listing Chippawa Parkway Zone

Make of Vehicle	Model of Vehicle	Year of Vehicle	License Plate #	Capacity	No. of spaces for Wheel Chair or Scooter

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Vehicle Listing Stanley South Zone

Make of Vehicle	Model of Vehicle	Year of Vehicle	License Plate #	Capacity	No. of spaces for Wheel Chair or Scooter

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Vehicle Listing Glenview Zone

Make of Vehicle	Model of Vehicle	Year of Vehicle	License Plate #	Capacity	No. of spaces for Wheel Chair or Scooter

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Vehicle Listing Chair-A-Van – Specialized Transportation

Make of Vehicle	Model of Vehicle	Year of Vehicle	License Plate #	Capacity	No. of spaces for Wheel Chair or Scooter