

NOTA Special Event Trip Request Form

Special Event Trip Agreement:

Special Event Trips are not part of NOTA's normal route system. They are event trips for a group which will "rent" the use of a NOTA vehicle for their own use. These trips are requested via dispatch with as much notice as possible. Special Event trips are posted for our drivers to voluntarily sign up for to earn extra money and there is no guarantee of a driver's availability which is why advance notice is needed. All special event trips must stay within the metro Detroit area (Oakland, Macomb, Wayne, Livingston and Washtenaw Counties) but they can go outside of our normal service areas.

You are responsible to instruct the driver where you would like them to be during the event. Please be as specific as possible (for example, where to park or if you are purchasing a ticket for driver to join event). The driver and the party will exchange phone numbers so that communication can be made during the event time.

The cost of the special event trips is shown below and will be billed after the trip is completed based on how many hours and miles the trip incurred. Payment is expected within 30 days made payable to NOTA.

Cost of Special Event Trips:

\$25.50/hr for the driver's salary per each vehicle (OT rate plus taxes)

Mileage: \$.58 per mile

Bus Rental Fee: \$50 (waived if you are a community event)

Please fill in the detailed information concerning the trip below. If there are any changes, notify dispatch (248) 693-7100 ASAP. Trips can be cancelled up to the day of the event without penalty. However, if you cancel a scheduled trip on the same day, you will still be responsible for a \$50 cancellation fee.

All of the rider guidelines still apply to special event trips. Please see our guidelines on our website: www.ridenota.org.

If you agree to the terms and conditions above, please fill in the information below and either fax to (248) 693-7270 or email dispatchers@ridenota.org and sign below:

I agree to the terms and conditions above and wish to reserve a special event trip with NOTA:

Name

Date

Current Date: _____

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Date of Trip Request: _____ M T W TH FR SA SU

Billing Contact Person: _____

Billing Address: _____

Departure Time: _____

Return time: _____

ITINERARY:

Location (1): PICK UP or DROP OFF – TIME: _____

Location (2): PICK UP or DROP OFF – TIME: _____

Location (3): PICK UP or DROP OFF – TIME: _____

Location (4): PICK UP or DROP OFF – TIME: _____

Number of Vehicles Requested: _____

Number of total passengers: _____ Number of wheelchairs included in total: _____

**Driver Name: _____ Driver Phone Number: _____

**Event Contact Name: _____ Phone Number: _____

Special Instructions: _____

