# Village of Hinsdale

## APPLICATION FOR SCHEDULED BUS DROP-OFF

1. The full name, full address, and telephone numbers of the owner, operator, and driver of the motor vehicle. The mobile phone number of the driver of the vehicle shall also be provided.

Owner Name	
Owner Address	
Owner Phone	
Operators Name	
Operators Address	
Operators Phone	
Drivers Name	
Drivers Address	
Home Phone	Mobile Phone
Drivers License #	Drivers License Class
State of Issuance	

2. The full name, full address, mobile and land-line telephone numbers of the entity or individuals that have either directed, paid for, or financed the transport of persons who will disembark in the Village.

Responsible Party Name and Address

Home Phone

Mobile Phone

3. The full name of all persons that are proposed to disembark in the Village along with copies of IDs for said person to the extent such IDs exist or are in the possession of the passengers.

Please complete the table on page 2.

Passenger Name	Passenger Name	Passenger Name

4. The name, address, or location where the applicant proposes to allow passengers to disembark in the Village.

Drop off location

Address

**Contact Phone** 

5. The date and time at which the applicant's passengers will disembark in the Village which shall be from 8:00 a.m. to 4:00 p.m. on a Monday through Friday, excluding any federal, state, or Village holidays.

Drop off Date

Drop off Time

6. The name and address of all locations from which the passengers are being picked-up for transport to the Village. Pick-up Location 1

**Pick-up Address** 

Pick-up Location 2

Pick-up Address

Pick-up Location 3

Pick-up Address

Pick-up Location 4

**Pick-up Address** 

7. The full name, full address, mobile and land-line telephone numbers, and electronic mail addresses of all entities or individuals that shall be present to meet and receive the passengers disembarking in the Village.

Drop off Contact 1	
Address	
Contact Phone	Contact e-mail
Drop off Contact 2	
Address	
Contact Phone	Contact e-mail
Drop off Contact 3	
Address	
Contact Phone	Contact e-mail

8.A detailed plan identifying how the disembarking passengers will be cared for, housed, and fed, upon disembarking in the Village. The plan shall be signed by the entity that agrees to be responsible for providing the actions detailed in the plan.

9. Any additional information the Chief of Police may require provided that such information is related to the purposes of this section.

The person submitting an application shall swear or affirm that to the best of their knowledge and belief the information set forth in such application is true and correct, and such oath or affirmation shall be attested to by a person authorized to administer oaths or witness affirmations within the state or territory where the application is sworn to or affirmed.

Signature

Signed by (Printed Name)

Dated

Attested by: Signature

Attested by: (Printed Name)

Dated