



Application for Service Areas and Time Exceptions

Applicant Name: _____

Company Name: _____

Principal Address: _____ Phone Number: _____

City _____ Zip Code _____ E-mail Address: _____

Delivery Requirement: The Licensee shall submit a complete written application to the Director of Transportation and Public Works, or his designee and obtain written approval from the Director, or his or her designee, no later than 1:00 p.m. on the City business day before the day of the requested service.

Select One:

Time Exception _____

- Circle Areas requested: Downtown Area, Southside Area, Stockyard Area, 7th Street Area
- List dates that are been requested: _____

Area Exception _____

- List all streets and times that will be used to provide Non-Motorized Vehicles for Hire Service:

All Applicants

- List the number and type of Non-Motorized Vehicles for Hire that will be used:

Date _____

Signature of Applicant

TRANSPORTATION AND PUBLIC WORKS DEPARTMENT
Ground Transportation Office
The City of Fort Worth * 909 Taylor Street * Fort Worth, Texas 76102
817-392-6987 * Fax 817-392-6781

Application must be submitted:

By Mail or in Person:

Ground Transportation Office
Ground Transportation Coordinator
909 Taylor Street
Fort Worth, Texas 76102

By E-Mail: gerald@taylor@fortworthtexas.gov

By Fax: 817-392-6781

(Staff Only)

Circle One:

Approved/Denied

_____ **Date:** _____

Director of Transportation and Public Works

_____ **Date:** _____

Ground Transportation Coordinator

Special Requirements:

Expiration Date: _____

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