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4390 – Mobility Van Transportation Policy

City of Humboldt

Policy Title		Adopted By:	Policy Number	
Mobility Van Transportation Policy		City Council	4390	
Origin/Authority	Jurisdiction		Effective Date	Page
Administration			Jan 1, 2014	
Reviewed By:	City of H	${f umboldt}$	Amended:	1 (4)
Corporate Services			December 25,2013	
Committee			December 14, 2015	
			June 1, 2018	

1.0 Purpose

This transportation service is provided by the City of Humboldt in an effort to provide adequate transportation to disabled people.

2.0 Scope

All disabled persons living in Humboldt and district are eligible to make use of this transportation service. For the purpose of definition, a disabled person is:

"Any person who is unable to use a conventional transportation system with comfort and dignity. This will include the local taxi business and the Humboldt Ambulance Service."

Inquiries regarding eligibility can be forwarded to City Hall at 682-2525.

3.0 Responsibility

The City Clerk is responsible for the maintenance of this policy.

4.0 Procedure

An application form will be given to each person on their initial request for transportation. Application forms can be obtained from City Hall at 715 Main Street. This form is to be completed and returned to City Hall as soon as possible in order to determine eligibility.

Operation

The mobility van service is operated much like a taxi service, as the customer is required to call in prior to each trip.

It is requested that persons using the van provide as much notice as possible (24 hours is suggested) although this is not a requirement. If the exact time slot requested is filled, an alternate time will be suggested.

Essential appointments (work, medical, etc.) will be given priority and other travel that is flexible as regards to exact time will be scheduled around essential travel.





Appointments for pickups must be made Monday to Friday between 8:00 a.m. to 5 p.m. Call 306-320-7051 and give the following information to the dispatcher.

- 1. Name
- 2. Where you wish to be picked up.
- 3. Destination
- 4. Time you want to be at your destination.
- 5. Time for return trip if required.

Operating Hours

The service operates five days a week Monday thru Friday from 8:00 a.m. to 5:00 p.m.

Fare Structure

1. Within City Limits

- \$4.50 per passenger for a one-way trip
- \$9.00 per passenger for a two-way trip

2. Outside City Limits

- \$22.00 per passenger
- \$0.80 per kilometre (The mileage charge is cost shared by the group or sponsors of the group.)
- 3. If the Mobility Van operator is requested to wait for a passenger at an appointment or function, a standby charge of \$22.00 per hour will be charged.

Area of Operation

The van operates in the area within a 50 kilometre radius of Humboldt but will travel outside the radius for medical appointments.

Service Standards

Every effort will be made by the driver to arrive at the scheduled pickup time, but passengers should expect the van to be at the point of pickup 15 minutes either way of the appointed time. Passengers should be ready and waiting for the van as the driver cannot wait more than five minutes.

It is requested that passengers keep their steps, ramps or lifts at their home free of snow and ice. Drivers may refuse to remove a passenger from a dwelling if, in the driver's opinion, it is dangerous to do so.

^{**} Note: Passengers are required to pay the driver when boarding the van.



People requiring assistance may be accompanied by one other person, at no charge, when travelling from the same address. Escorts picked up at a different address will be charged the full fare.

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Passenger Responsibilities

- 1. Appointments for pick up shall be made Monday thru Friday between the hours of 8 a.m. to 5 p.m.
- 2. Be ready several minutes prior to the specified pickup time.
- 3. Have the required fare ready when boarding the van.
- 4. Passengers are required to use seat belts at all times.
- 5. Keep walks and steps clear of ice and snow.
- 6. Passengers are required to phone in their cancellations.
- 7. Smoking is not allowed in the vehicle.

Operator Responsibilities

- 1. The operator is required to maintain a detailed log of van use.
- 2. The operator is responsible to collect fares and provide a financial accounting to City Hall each month.
- 3. The operator is responsible for the general upkeep of the van (washing, checking oil, cleaning interior, etc.)
- 4. The operator is responsible for advising City Hall when van malfunctions occur and require repair (oil changes, fluids, etc.)
- 5. The operator is responsible for reporting any accidents or incidents involving clients and/or the van.

4.0 Strategic Value Alignment



This policy supports the City of Humboldt Values of Welcoming and Connected as the policy connects our residents to services, destinations and each other and ensures access and mobility options for community members in need.







MOBILITY VAN TRANSPORTATION APPLICATION FORM

	Application:			
Personal Information:				
Name:	Date of Birth:			
Box Number:	Date of Birth: City/Town:			
Street Address:	Phone:			
Medical Information:				
Disability (Please Specify):				
Please check the following equipm		/v)·		
wheelchair		cane walker		
Wilecianan		_ cane wanter		
Do you transfer easily? \square yes	□ no			
List any possible problems or eme	rgencies the driver should be av	ware of:		
You are opting for this transportat	 tion service:			
Temporary (due to lack of taxis		est due to lack of taxi convices)		
Temporary (due to lack of taxis	services) — indefinitely (in	of due to lack of taxi services;		
Dilling Information.				
Billing Information:				
Name:				
Mailing Address:				
Phone:				
(Home/Office)	(Cell Phone)	(Other)		
The state of the second second				
Next of Kin Information:	2 alakia n			
Name:				
Mailing Address:				
Phone:				
(Home/Office)	(Cell Phone)	(Other)		
Form Completed By (can be the ap	oplicant or someone on behalf o	of the applicant):		
(Please Print)	(S	Signature)		
Phone:				
(Home/Office)	(Cell Phone)	(Other)		
Please note: Once approved, plea	ıse call (306) 320-7051 to book i	the Mobility Van, when required.		
Approved by:				
(City of Humboldt Autho	arized Renresentative)	(Date)		