#### **Washington Metropolitan Area Transit Authority**



## **Shuttle Operator Application To Serve Metrorail Facilities**

Operator Information	FEIN Number
Company	
Address	
City	State
Zip Code	
Phone	Fax
Operator Contact Person	
First Name	
Last Name	
Phone	Title
Email	

WMATC Number	
Application Submittal Date (MM/DD/YYYY):	

Company	
Address	
City	State
Zip Code	
Phone	Fax
Customer Contact Person	
First Name	
Last Name	
Phone	Title
Email	

#### Vehicle(s) Information to be Used for Proposed Shuttle

License Tag Number	State Registered	Make	Model	Year	Color	VehLength (ft-in)	VehWidth (ft-in)	VehHeight (ft-in)	Gross Veh. Weight (lbs)	Number of Axles	Passenger Capacity (#)

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#### **Service Information / Operational Characteristics**

Station Locations - indicate the station(s) you would like to use in your serv	/ice
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Service Days	Service Headways	Service Hours
M         □         Tu           W         □         Th	<5 ~10 ~30	Please enter time in Military time format (Example: 17:00 for 5:00 PM).  Start
F Sa Su	~40	End

station Locations - maicate the s	tation(s) you would like to use in yo _	our service		_
Addison Road-Seat Pleasant	Deanwood	Grosvenor-Strathmore	Pentagon	Twinbrook <u>West</u>
Anacostia	Dunn Loring-Merrifield	Huntington North	Pentagon City	Tysons Corner <u>Eas</u> t
Archives-Navy Memorial-Penn Quarter	Dupont Circle	Huntington <u>South</u>	Potomac Ave	Tysons Corner West
Arlington Cemetery	East Falls Church	Judiciary Square	Prince George's Plaza	U Street/African-Amer Civil War Memorial/Cardozo
Ballston-MU	Eastern Market	King Street	Rhode Island Ave-Brentwood	Union Station
Benning Road	Eisenhower Avenue	Landover	Rockville <b>East</b>	☐ Van Dorn Street
Bethesda	Farragut North	Largo Town Center	Rockville West	☐ Van Ness-UDC
Braddock Road	Farragut West	L'Enfant Plaza	Ronald Reagan Washington National Airport	☐ Vienna/Fairfax-GMU <b>North</b>
Branch Ave	Federal Center SW	McLean East	Rosslyn	☐ Vienna/Fairfax-GMU <b>South</b>
Brookland-CUA	Federal Triange	McLean West	Shady Grove <b>East</b>	☐ Virginia Square-GMU
Capitol Heights	Foggy Bottom-GWU	McPherson Square	Shady Grove West	☐ Waterfront-SEU
Capitol South	Forest Glen	Medical Center	Shaw-Howard U	West Falls Church-VT/UVA North
Cheverly	Fort Totten	Metro Center	Silver Spring	West Falls Church-VT/UVA South
Clarendon	Franconia-Springfield	Minnesota Ave	Smithsonian	West Hyattsville
Cleveland Park	Friendship Heights	Morgan Boulevard	Southern Avenue	Wheaton
College Park-U of MD <b>East</b>	Gallery Pl-Chinatown	Mt Vernon Sq/7th St-Convention Center	Spring Hill	☐ White Flint
College Park-U of MD West	Georgia Ave-Petworth	Navy Yard	Stadium-Armory	Wiehle-Reston East <b>North</b>
Columbia Heights	Glenmont	Naylor Road	Suitland	Wiehle-Reston East <b>South</b>
Congress Heights	Greenbelt Local Access	New Carrollton <u>East</u>	☐ Takoma	Woodley Park-Zoo/Adams Morgan
Court House	Greenbelt Highway Access	New Carrollton West	Tenleytown-AU	
Crystal City	Greensboro	New York Ave-Florida Ave-Gallaudet U	Twinbrook <u>East</u>	
	Check this box if schedules are attached for approval.		Check this box if route map(s) are provided as an attachment.	

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### Shuttle Operator Application To Serve Metrorail Facilities

# Service Information / Operational Characteristics - Continued

Check this box if the service will be open to the public
This shuttle will serve a
<ul><li>Private Corporation</li></ul>
○ Non Profit Corporation
Public Agency (other than transit operator)

Please provide the purpose of this service.

#### Insurance Information

In order for us to grant you permission for access to Metrorail station facilities, you must provide a cerificate(s) of insurance evidencing the following insurance:

Workers' Compensation Insurance meeting the statutory requirements of the jurisdiction where the work will be performed, including Employer's Liability coverage with minimum limits of \$1,000,000 each accident or disease.	
Commercial General Liability (CGL)insurance with limits of \$1,000,000 per occurrence.	
Automobile Liability (AL)insurance with combined single limits of \$5,000,000 per occurrence.	
WMATA shall be named as an additional insured on the CGL and AL insurance and the additional insured endorsement must be provided with the certificate.	

Note: Approval process may take up to 20 business days. Return the completed form with any attachments and submit via email to <a href="mailto:BusBayApplication@wmata.com">BusBayApplication@wmata.com</a> or print the application materials and mail to:

Shuttle Applications, Office of Bus Planning

Washington Metropolitan Area Transit Authority, 600 Fifth Street, N. W. Washington, D. C. 20001, or by FAX to (202) 962-1277