

Advance Notice of Request for Accessible Travel

PART I ... REQUEST FOR SERVICE.

To be completed at the time accessible transportation is requested.

Customer (passenger) **must** be provided with a copy of Part I at the time transportation is requested.

BUS/MOTORCOACH SERVICE EQUIVALENT SERVICE

▶ TRANSPORTATION PROVIDER INFORMATION

1. Company Name: _____
2. Company Address: _____
3. Company Phone/FAX: _____

▶ REQUESTING PASSENGER INFORMATION

4. Passenger's Name: _____
5. Passenger's Address: _____
6. Passenger's Phone/FAX: _____

▶ TRAVEL REQUEST INFORMATION

7. Scheduled Date and Time of Trip Departure: _____
8. Date and time of original trip booking: _____
 - a. Was the need for accessible transportation specified at the time this transportation was first booked? YES NO
 - b. If the answer to 8a is "NO," what was the date and time which you were informed of the need for an accessible vehicle? (today's date) _____

PART II ... POST-TRIP SERVICE SUMMARY

To be completed following service. For company and USDOT use and records.
A copy of Part II must be provided to the passenger only if accessible service is denied.

9. Was an accessible vehicle provided for this trip? YES NO
10. Was there a basis recognized by the U.S. Department of Transportation for **not** providing an accessible vehicle for this trip? YES NO

If "YES," please explain: _____

11. If the answers to Items 9 and 10 were both "NO," **attach documentation** showing your resolution of the customer's need.

▶ CUSTOMER CARE AND SERVICE ISSUES

- a. Did the disabled passenger actually travel on this trip? Passenger Traveled Passenger no-show
- b. If the above answer to 9a is "YES," was the accessible vehicle used for this trip:
 in my fleet of vehicles leased from another operator sub-contracted to another carrier
- c. Did the disabled passenger(s) require assistance (other than lift operation)? YES NO
- d. If the answer to the above question is "YES," what was the date and time when you were informed that assistance (other than lift operation) was needed? _____
- e. If assistance (other than lift operation) was provided, who provided that assistance?
 driver/company employee another passenger/companion other
- f. How were passengers using mobility aids (wheelchairs/scooters), accommodated?
 passenger rode in aid using tie-down mobility aid stored/passenger used coach seat
- g. Please use the reverse of this form to record any comments, problems, recommendations for improvements or other observations about this service which you believe are pertinent to future service.

Annual Report
Accessible Transportation Requests Summary
&
Bus & Motorcoach Fleet Accessibility
49 CFR Part 37 §37.213

Date: _____

Company Name _____

USDOT Identification # _____

Company Address, City, State _____

Name of Company/ADA Compliance Contact Person _____

Telephone Number _____

Number of New Buses Purchased in Preceding 12 Months _____

Number of New Accessible Buses Purchased in Preceding 12 Months _____

Number of Used Buses Purchased in Preceding 12 Months _____

Number of Used Accessible Buses Purchased in Preceding 12 Months _____

Number of New Buses Leased in Preceding 12 Months _____

Number of New Accessible Buses Leased in Preceding 12 Months _____

Number of Used Buses Leased in Preceding 12 Months _____

Number of Used Accessible Buses Leased in Preceding 12 Months _____

TOTAL NUMBER OF BUSES/MOTORCOACHES IN THIS COMPANY'S FLEET ON THIS DATE _____

Using information taken from the **Advance Notice of Request for Accessible Travel** forms maintained by your company for the previous 12-month period (October 29 of the previous year until October 28 of this year), please provide the following summaries.

Number of requests for accessible transportation service. _____

Number of times requests for accessible transportation were satisfied. _____

Number of times requests were **not** satisfied (for a cause recognized by the USDOT). _____

Number of times requests were **not** satisfied for other reasons. _____

Describe resolution of unsatisfied requests. _____

COMPLETE AND MAIL BY:
OCTOBER 28 EACH YEAR TO:

Federal Motor Carrier Safety Administration
Office of Information Management - MC-RIS
400 7th Street, SW
Washington, DC 20077-5476

Before mailing this form to BTS, please FAX a copy to UMA at (703) 838-2950.

ADA Reporting Requirements Filing Dates and Forms

With passage of the Americans with Disabilities Act (ADA) in 1990 and publication of the U.S. Department of Transportation's (USDOT) final rule on accessibility for commercial passenger ground transportation providers in 1998, the rules about carrying disabled passengers changed. With the changes came new reporting requirements, as well. This publication from the United Motorcoach Association (UMA) is designed to help you meet your legal requirements.

In brief, the rules called for the installation of lift devices on all vehicles operated in scheduled, fixed-route service by large carriers (annual earnings of \$5 million or more) by the year 2012. Beginning October 2001 for large entities, and October 2002 for small entities, demand-responsive operators must provide an accessible bus to any passenger who requests it 48 hours in advance. Demand-responsive, or charter and tour carriers, are not required to purchase or own lift-equipped vehicles, but must be able to provide one within the 48-hour notice requirement. Refusal to do so will cause the transportation providers to incur penalties which, under the current rules, would be paid to the aggrieved passenger.

Form Instructions.

- **Accessible Transportation Requests Summary & Bus & Motorcoach Fleet Accessibility.** Operators have been required to complete and submit the information at the top of this form (accessible vehicle totals) each year since 1999. Each category is self-explanatory. At the bottom of the form is *summary information* which it will be necessary to submit annually starting *next year*. Because this information is due at the same time as the accessible fleet totals, we have combined both requirements on a single form. The information which will be submitted for this part will come from a compilation of data from the second form, printed on the back page of this packet.

- **Advance Notice Request for Accessible Travel.** *Each time* your company is asked to provide accessible service, the information in Part I of this form must be completed. One copy of the completed Part I **must** be given to the requesting passenger at the time the information is taken. A copy must also be maintained in your records for no less than five (5) years and must be made available for inspection by the USDOT on request. Part II is to be filled out on completion of the travel or the transaction. If accessible service is **not** provided, a copy of Part II must be provided to the passenger at the conclusion of the transaction. Below are further explanations of lines on the form which are not self-explanatory:

- 1) **BUS/MOTORCOACH SERVICE** or **EQUIVALENT SERVICE.** The rule requires that service be provided in an accessible, full-sized coach for large fixed-route carriers, but small fixed-route carriers may meet requirements by the use of "alternative" vehicles (accessible minibus or vans) as long as the service "in terms of time, destination, cost, service availability etc. is parallel to that provided non-disabled passengers." When filling out the form, check only one of these boxes.
- 2) **Line 8 a/b:** The USDOT requires that this form be used to record the time and date when a request for accessible travel is made of your company. UMA has expanded the information request to ensure that the date of the original booking is recorded, as well. Ideally, the request for accessible service will be made at the time of the original contact, If the two dates (booking and notice of accessible needs) are different, however, Line 8 questions a) and b) will accommodate that information.
- 3) **Line 10:** Currently, the USDOT has not provided a convenient list of "recognized basis for not providing an accessible vehicle." The most obvious, of course, would be the passenger's failure to provide 48-hours' notice. A second might be the fact that your accessible vehicle has already reached its capacity of passengers using the mandated two tie-down locations. Watch future editions of *The Docket* for better explanations.
- 4) **Line 11:** The final ADA rule provided for compensation of disabled passengers "whose travel is prevented or disrupted by the operator's inability to provide accessible service." That section of the rule was struck down as the result of a lawsuit. However, denial of service without a "recognized basis" may also result in legal actions against the carrier by the U.S. Department of Justice. If payment of compensation is made under this section of the rule, attach documentation of proof. You should also know that, because this section offers no means of arbitration or dispute resolution, UMA is seeking significant changes through the USDOT and the Congress.
- 5) **Customer Care & Service Issues:** These questions are **not** required by the USDOT but were added to the form by UMA for company and industry records. We believe that these questions address many pertinent additional aspects of disabled traveler service which may be important in the future. You are **not** required to provide summaries of these questions to the USDOT.

Many questions about this rule remain unanswered. Please watch *The Docket* for update. And, as always, feel free to call us at (800) 424-8262 when we can help.

