

Application for Transportation Network Company (TNC) License

HALIFAX

For the purpose of connecting passengers with TNC drivers to provide pre-arranged transportation services

NOTE: A TNC must ensure that its transportation network drivers do not solicit, accept or transport passengers other than through the use of a transportation network (i.e. street hails are not permitted)

Applications can be submitted in person to an HRM Customer Service Centre

Alderney Gate

40 Alderney Drive, 1st Floor
Dartmouth, NS B2Y 2N5
8:30 a.m. to 4:30 p.m. Monday to Friday

Bayers Road Centre

7071 Bayers Road, 2nd Floor - Suite 2005
Halifax, NS B3L 4P3
8:30 a.m. to 4:30 p.m. Monday to Friday

Applications can also be submitted to taxilicenceoffice@halifax.ca

More information about Transportation Network Companies is available on-line at www.halifax.ca/taxi



Transportation Network Company (TNC) Application for a license.

New Application

Renewal

Certificate Number: _____ *for office use only*

Section 1 – Applicant Information

Complete **only one** of the following 1A or 1B with the name(s) that appear or will appear on the name of the Transportation Network Company:

1A Corporation Name as registered with NS Registry of Joint Stocks

(must provide letters of incorporation or other incorporating documents, duly certified by the proper government official or department of the Province of Nova Scotia or the Government of Canada)

Legal Name *(trade name not acceptable):*

1B Individual or Names of members in partnership *(if the applicant is a partnership)*

.....
(Last Name) (First Name) (Address)

.....
(Last Name) (First Name) (Address)

Name under which the partnership intends to carry on business *(if the applicant is a partnership)*

1C Mailing Address

Civic Address

City: Province: Postal Code:

Phone Number: Cell Phone Number: Fax Number:

Email:

1D Principal Place of Business in Halifax *(must be a street address or legal land location, not a post office box. This is where all records required by legislation are retained).*

NOTE: *If the address provided in Section 1D is not in Halifax and a Resident Agent or Representative in Halifax is retaining records on your behalf, please complete Section 1E.*

Street/Legal Land Location:

City: Province: Postal Code:

Phone Number: Cell Phone Number: Fax Number:

1E Representative or Resident Agent Information

Name of the Transportation Network Company's Resident Agent or Representative in Halifax:

.....

(Last Name) (First Name) (Address)

Where Representative is a Corporate/Organization/Society, as registered with NS Registry of Joint Stocks
 Legal Name (trade name not acceptable): _____
 Principal Place of Business (must be a street address or legal land location, not a post office box number)

City:	Province:	Postal Code:
Phone Number:	Cell Phone Number:	Fax Number:
Email:		

Mailing Address (if different from above):

City:	Province:	Postal Code:
Phone Number:	Cell Phone Number:	Fax Number:

Section 2 – Operational Information

2A Trade Name

Does the applicant operate under a trade name? (operating as/doing business as) **Yes No**

Trade Name _____

2B Transportation Network Drivers in Halifax

Provide the approximate number of drivers currently operating for the TNC:

1-10: \$2,000 11-25: \$5,000 26-100: \$15,000 100+ : \$25,000

2C Confirmation of Required Policies

1. I/We confirm that the TNC has written policies implemented to ensure compliance with the requirements of the T-1000 By-law (e.g. Class 4 driver license, criminal record check, driver abstract, child abuse registry check, etc.).	Yes	No
2. I/We, the TNC, have read and understood the requirements of the T-1000 By-law as it relates to the Transportation Network Company regulations.	Yes	No

Section 3 – Insurance Information

The TNC is responsible to ensure that its transportation network drivers and the transportation network automobiles they operate are covered by a motor vehicle liability policy and/or a transportation network automobile insurance policy, at all times that the drivers and the automobiles provide transportation network services.

1. We confirm that a SPF No. 9 - Transportation Network for Nova Scotia Automobile Policy is held by the TNC identified in Section 1, and a copy is provided along with this application (either in hardcopy or electronic format).

Yes

No

Section 4 – Declaration

As the named person(s), corporate entity, organization, or society, as identified as the applicant in Section 1:

I/we acknowledge that an audit or investigation may be conducted on our operations at any time to measure our compliance to regulatory requirements. Should deficiencies be identified during the audit or investigation, I/we understand that intervention action(s) may be taken by the License Administrator.

I/we understand that we must inform the License Administrator of any changes to our operation.

I/we certify that the information disclosed is true and accurate at the time of application. Providing false or misleading information may result in: the refusal of this application; refusal of subsequent renewals; issuance and/or amendment of terms or conditions on your certificate of approval; and/or being charged with an offence(s) or issued an administrative penalty(s).

Where the Certificate of Approval will show a corporate, society, or organization named (as identified in Section 1A), then the declaration must include the name(s) of an owner(s), manager(s), or director(s).

Where the Certificate of Approval will show an individual(s) named (as identified in Section 1B), the name(s) must be included in the declaration (i.e. John Smith or John Smith & Mary Smith).

Where the Certificate of Approval will show more than one name, then all names must be included in the declaration (i.e. John Smith or John and Mary Smith).

Name (<i>Print last, first, middle names</i>):	Position:	Phone:	Email:
Name (<i>Print last, first, middle names</i>):	Position:	Phone:	Email:
Name (<i>Print last, first, middle names</i>):	Position:	Phone:	Email:

Date:

In accordance with Section 485 of the Municipal Government Act (MGA), the personal information collected on this form will only be used by municipal staff and, if necessary, individuals under service contract with the Halifax Regional Municipality for purposes relating to the processing of your application and issuance/management of the Broker or Transportation Network License. If you have any questions about the collection and use of this personal information, please contact the Access and Privacy Office at 902-490-7460 or accessandprivacy@halifax.ca