



**Municipal Licensing and Standards**  
 Fiona Chapman  
 Director, Business Licensing and Regulatory  
 Services

**Marcia Stoltz**  
 Manager, Vehicle for Hire

**850 Coxwell Ave 3<sup>rd</sup> Floor**  
**Toronto, Ontario, M4C 5R1**  
 Tel: (416) 392-6700  
 Fax: (416) 392-4515  
 mlsbusinesslicence@toronto.ca  
 www.toronto.ca/licensing

## **ACCESSIBILITY FUND PROGRAM – DECLARATION**

### **Taxicab Owner (2020 Operations)**

Please accurately and clearly complete **all fields** on this form. Incomplete or unclear forms will not be considered and will be rejected. The completed form must be sent electronically to [accessibilityfundprogram@toronto.ca](mailto:accessibilityfundprogram@toronto.ca) or by fax to 416-392-4515 by **4:00 pm on Friday, April 30, 2021** for review and consideration.

#### **Applicant Information**

Date: \_\_\_\_\_

Taxicab Owner Name: \_\_\_\_\_  
 (plate owner first and last name or Corporation)

Officer/Director Name (if corporate owner): \_\_\_\_\_  
 (first and last name)

I, \_\_\_\_\_,  
 (first and last name)  
 my corporation):

1. Did **not** provide service under the Toronto Transit Commission Wheel-Trans Taxicab Service Contract in 2020.
2. MLS Licence Number:        V \_\_\_\_\_ - \_\_\_\_\_
3. MLS Plate Number: \_\_\_\_\_
4. VIN: \_\_\_\_\_
5. Mailing Address: \_\_\_\_\_
- 5a. Contact email and/or phone number: \_\_\_\_\_
6. Type of Conversion (**please select one**): Side-entry or Rear-Entry
7. Drivers who have received accessibility training approved by MLS, and are affiliated with this taxicab:
  - Driver #1;  
 First and Last Name: \_\_\_\_\_
  - MLS Licence No. (D01/D05): \_\_\_\_\_
  - Driver #2;

First and Last Name: \_\_\_\_\_

MLS Licence No. (D01/D05): \_\_\_\_\_

Driver #3;  
First and Last Name: \_\_\_\_\_

MLS Licence No. (D01/D05): \_\_\_\_\_

**Service Standards**

8. Number of hours the taxicab was operating and available for hire:  
\_\_\_\_\_ in 2020

9. I have taxicab operator logs for the past 12 months that may be audited by MLS  
**(please select one):** YES or NO

10. Wireless Point of Sale (POS) machine is available in 2019  
**(please select one):** YES or NO

**Declaration:**

I, (first and last name) \_\_\_\_\_ declare that the information provided in this Form is true, accurate and complete and that, if I am submitting this declaration on behalf of a corporation, I have authority to do so. I am aware that Municipal Licensing and Standards may refuse or cancel funding if the taxicab owner does not meet the eligibility criteria or service standards as set out, if false or misleading information is provided, or if funding was granted due to an technological or clerical error. If funding was granted due to incomplete or inaccurate information or due to a technological or clerical error, then Municipal Licensing and Standards may recover any funds disbursed or require repayment of funds before any licence may be issued or renewed in future. If the taxicab owner was not properly eligible and received funds based on incomplete or inaccurate information provided, **then the taxicab owner will not be eligible to reapply to the Accessibility Fund Program for two years.**

**Signature of Applicant:** \_\_\_\_\_

This form can only be signed by a corporate officer or director. Signing authorities for corporations **cannot** sign this form.

# INSTRUCTION SHEET

## Accessibility Fund Declaration – Taxicab Owner

**NOTE: If you are an owner and driver, you can submit two applications.**

Once completed, the form must be sent electronically to [accessibilityfundprogram@toronto.ca](mailto:accessibilityfundprogram@toronto.ca) or by fax to 416-392-4515 by **4:00 pm on Friday, April 30, 2021** for review and consideration. In any email correspondence with MLS, please indicate the VFH licence number and/or MLS plate number (if applicable) in the subject line for ease of reference. For example: D01-1111111 – 4000.

If you own more than one taxicab licence, one declaration per taxicab is required.

Based on the information provided, the following are the maximum disbursements available to eligible taxicab owners under the Accessibility Fund Program:

### Side Entry Vehicle

Grant – up to \$2,898.21

Incentive – up to \$1,898.21

Total possible disbursement - \$4,796.42

### Rear Entry Vehicle

Grant – up to \$2,312.71

Incentive – up to \$1,312.71

Total possible disbursement - \$3,625.42

### Application information – Grant

1. If your taxicab has been associated with the TTC Wheel-Trans Taxicab Service contract, **you are not eligible to apply**. We will be working with the Toronto Transit Commission to review all applications.

If your taxicab has not been associated with the TTC Wheel-Trans Taxicab Service contract, no action is required for this field.

2. This is the licence number on your 10 digit Taxicab Owner's licence that begins with V00 or V02.

3. This is the number on the plate that is affixed to your taxicab (MLS plate number).

4. This is the 17 digit vehicle identification number (VIN) that can be found on your taxicab ownership documents issued by the Ministry of Transportation.

5. Please indicate your current address. The address provided must match the address on file for your application to be accepted. The by-law mandates that our records be up to date. If you have changed your address, please make efforts to update prior to submitting this application by emailing our office ([vehicleinspection@toronto.ca](mailto:vehicleinspection@toronto.ca)) with your updated Provincial Drivers Licence and Vehicle Ownership. This also applies to a corporate head office, per your business documents.

5a. Please indicate your contact email address and/or your phone number.

6. Please indicate, by circling the entry point for wheelchairs into your taxicab (side or rear of the vehicle). You may be required to submit the conversion document as part of the application review. A wheelchair accessible conversion document will not be requested if your vehicle is a purpose built wheelchair accessible vehicle.

7. Please indicate the Vehicle-for-Hire drivers that have been available and providing wheelchair accessible service for 2020 in this taxicab. Please provide the drivers first and last name, along with their Vehicle-for-Hire drivers licence number, as we will be participating in a matching process with the Vehicle-for-Hire driver declarations.

### Service Standards - Incentive

Service Standards have been defined by the Executive Director as follows:

8. Please indicate the number of hours in 2020 that your accessible vehicle was available for accepting wheelchair accessible service. This is worth 95% of the incentive. This incentive is not pro-rated. Your vehicle must have been available for 324 hours per year, which means approximately 25 hours per week.

9. Please indicate if you have available for audit, operator logs as required by the by-law for our review.

10. Please indicate if a Wireless Point of Sale (POS) machine is available for customers. While POS machines are not mandatory in the By-law, 5% of the incentive portion of the fund will be disbursed for the cost of having this option of payment available for your customers.