Surplus ParaTransit Bus Application

Pursuant to Chapter 131, Section131.41, of the Laws of Westchester County

Once you have typed the information into the form, print and then sign it before submitting either by scanning and e-mailing it to nsm3@westchestergov.com or by faxing it to (914) 995-4479. Handwritten forms will not be accepted.

Applicant Inf	Cormation				
Municipality					
Address					
Contact Name					
Phone Number		E-mail			
Description of Please state the Westchester C	e municipality's need	for the ParaTransit	bus(es) and how this	s will benefit the citiz	zens of
lottery, the nan Westchester wl	rictions t bus(es) subject to res ned municipality acknow hich will include a cer at it will hold the cour	owledges that it will tification that the m	ll enter into an agree	ement with the County	y of
Name					
INGITIC					
Title					
Phone Number					

Signature