



**In the Matter of the Motor Carrier Act
Application for a Commercial Van License**

Subsection 42B(2) of the Board Public Passenger Motor Carrier Act Regulation

To the Nova Scotia Regulatory and Appeals Board, 1601 Lower Water Street, Suite 300, or Postal Unit M, P.O. Box 1692, Halifax, Nova Scotia B3J 3S3.

1. Applicant's (company) name: _____

2. Contact person(s): _____ Title _____

_____ Title _____

3. Contact information: Telephone _____ Cell _____

Fax _____ Email _____

4. Applicant's mailing address: _____

5. Applicant's operation address: _____

6. The applicant is an ☐ individual, ☐ partnership or ☐ corporation: (Check applicable box.)

7. Attached hereto and marked "A" is

Note: If applicant is an individual, Section 7 is not applicable. If applicant is a partnership, a copy of the declaration of partnership filed in the office of the Registrar of Partnerships must be attached. **If the applicant is a corporation, a copy of its certificate of incorporation must be attached.**

8. Listing of the commercial vans requested to be licensed, indicating which commercial vans are rental vans:

Year	Make	Model	Serial Number	Seating Capacity (excluding driver)

9. General description of the service to be offered, including which communities are to be served, the **general routing**, and the days and frequency of service. Also indicate whether the service is **regularly scheduled** or it is a **charter or tour service**, and if the service is to/from another province.

10. The applicant agrees to comply with the following requirements prior to the issuance of a commercial van license:

- (a) to obtain a motor vehicle liability policy of insurance satisfactory to the Board in such sums as are prescribed by the *Board of Public Passenger Motor Carrier Act Regulations*;
- (b) to file with the Board a certificate of the insurer certifying that the required insurance has been placed or effected in respect to each commercial van;
- (c) to have each commercial van listed under Schedule 8, other than any rental vans, inspected for mechanical fitness by a certified mechanic who is appointed as inspector under the *Motor Carrier Act*, who is a certified Bus/Truck and Transport Mechanic;
- (d) to file copies of all rental van lease agreements with the Board; and
- (e) to submit with this application a fee of \$100.00 for each of the vehicles listed under Section 8.

11. The applicant also agrees to:

- (a) comply with all the requirements of the *Motor Carrier Act and Regulations* applicable to the operation of a commercial van;
- (b) maintain the required motor vehicle liability insurance, and
- (c) advise the Board of any changes in the approved list of vehicles or to the service being offered at least 15 days prior to the changes coming into effect.

12. The undersigned has received a copy of the *Motor Carrier Act and Regulations*, and other material supplied by the Board, and has read and understands the information therein.

Dated at _____ this _____ day of _____ 20_____

County of _____, Province of _____

Signature of applicant

Declaration

In the matter of the Motor Carrier Act

I, _____ of _____

in the County of _____, Province of _____, make oath and say

a) that I am the _____ and have knowledge of the matters herein set out
Applicant, or agent, officer, or solicitor of the applicant

b) that the statements set out in the foregoing application are true and correct

Sworn to at _____

in the County of _____

Province of _____

this _____ day of _____ A.D. 20____ before me

Notary Public or Commissioner

Signature of Applicant

Submit to:

Completed forms can be securely sent to us through our "Send Files to the Board" feature of our website at **TitanFile Secure Submit**.

Forms can also be printed and sent by regular mail to the following address:

Nova Scotia Regulatory and Appeals Board

1601 Lower Water Street, Suite 300 PO Box 1692, Unit "M"
Halifax, Nova Scotia B3J 3S3

If you require assistance you can contact the board at:

Tel: **902-424-1333**

Fax: **902-424-3919**

Email: **board@novascotia.ca**