



Pomona Valley
Transportation Authority

Service Type

Pomona Group	<input type="checkbox"/>
Claremont Group	<input type="checkbox"/>
Get About	<input type="checkbox"/>
Other	<input type="checkbox"/>

Point of Contact

First and Last Name of POC	Phone Number of POC

Ride Information

Requested Trip Date			Requested Pick-up Time		
Origination Address			Destination Address		
City	State	Zip	City	State	Zip
Origination Notes: _____			Destination Notes: _____		
Round Trip Requested?	<input type="checkbox"/>	Requested Return Trip Time			

Trip Details

Total # of Passengers	# Mobility Devices (Wheelchair/ Scooter)	# Mobility Aids (Walker/ Cane)
Trip Purpose: _____		
Additional Notes: _____		

Payment Method:	<input type="checkbox"/> Send Invoice (Prior Approval Required)
	<input type="checkbox"/> Cash/Tickets upon boarding