

**UH PTS  
Transportation Request Form**

**Effective Sep 2024 the hourly rate will increase to \$135.00 for UH departments**

Trip Name:	
Contact Name:	
Phone(s):	
Email:	
Number of Passengers:	
Cost Center Code:	
<b>Note:</b> Shuttles have a 36 seat capacity; please state how many shuttles are requested. If more than 36 passengers, please specify if you want one shuttle making multiple trips, or enough shuttles to move all riders at once.	
<b>DEPARTURE</b>	
<b>Pick Up Details</b>	
Departure Date:	
Departure Time:	
Departure Location:	
Departure Address:	
<b>Drop Off Details</b>	
Destination Name:	
Destination Address:	
Notes:	

<b>RETURN</b>	
<b>Pick Up Details</b>	
Departure Date:	
Departure Time:	
Departure Location:	
Departure Address:	
<b>Drop Off Details</b>	
Destination Name:	
Destination Address:	
Notes:	

**Please read the following and sign below:**

Charter rate is \$135.00 per hour with a 4 hour minimum for UH Departments and \$150.00 for non-affiliated customers.

PTS will send you an estimate for the charter and once the service is completed, PTS will send an invoice.

Invoices and charges to be paid by SC Voucher, non-affiliated customers by credit/debit/check.

**Departments agree to pay 50% invoice for charters canceled within 3 working days of the scheduled date**

**100% due for charters canceled day of service.**

NOTE: Additional charges will be incurred if you exceed the estimated time for any reason

and the department agrees to pay the additional hourly charge

All times are calculated for 30 minutes prior and following the charter for federal mandated inspections.

I have read and understand the above. I agree to the charges. All dates and times are correct unless noted.

**ANY AND ALL CHANGES CAN ONLY BE REQUESTED BY EMAIL- PLEASE NO CHANGES BY PHONE OR IN PERSON**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Groome estimated billable hours \_\_\_\_\_

total: \_\_\_\_\_