

**TAXI OWNER FUEL RELIEF GRANT\***

Section 1 <b>APPLICANT INFORMATION</b>					
Name of Registered Owner of Taxi:					
Registered Owner's Address:					
Registered Owner's Identification Card Number:					
Registered Owner Contact Number:					
Registered Owner Email Address:					
Beneficial Owner of Taxi** (if applicable)					
Beneficial Owner's Address:					
Beneficial Owner Contact Number:	Email Address:				
TAXI PARTICULARS					
Taxi Motor Vehicle Registration No:					
Motor Vehicle Inspection Certificate Number for the period <b>January 2019</b> to <b>Present</b> :					
Certified Copy Number for Taxi:					
Section 2 <b>Please identify the TAXI ROUTE operated by the Taxi (in Block Letters)</b>					
Taxi Route Name:					
Taxi registered with an Association? Yes <input type="checkbox"/> No <input type="checkbox"/> Name: _____					
Section 3 <b>Trinidad and Tobago Taxi Drivers Association Certification</b>					
<p>I, ..... President of the ..... Taxi Association do hereby certify that ....., is the owner of Taxi Registration Number ..... - ....., and that the vehicle is a registered Taxi, currently operating the Taxi Route identified in section 2 above.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Association President Name:</td> <td> </td> </tr> <tr> <td>Signature:</td> <td> </td> </tr> </table> <p>Certified by ....., President of the Trinidad and Tobago Taxi Drivers Network Signature ..... Date: .....</p>		Association President Name:		Signature:	
Association President Name:					
Signature:					
<p><b>Please enclose copies of <u>ALL</u> of the following documents with the completed application form:</b></p> <ul style="list-style-type: none"> <li>Copy of Owner's Identification Card;</li> <li>Copy of a Valid Insurance Certificate for the Taxi;</li> <li>Copy of the Inspection Certificate for the period January 2019 to present (A copy of an Inspection receipt will not be accepted); and</li> <li>Copy of the Certified Copy of Vehicle Registration for the Taxi.</li> </ul> <p><b>Please note the amount approved for this Relief Grant is \$750.00</b></p>					
<p><b><u>Declaration of Truth</u></b></p>					
<p>A MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL OF THE TAXI FUEL RELIEF GRANT</p> <p>I, ..... (full name), swear or affirm that I am the registered owner of Taxi Registration number ..... and I have recently experienced a loss/reduction of income due to the Covid 19 pandemic restrictions. I have read and understood all of the questions in this application and that all of the foregoing information and statements submitted in this application and its attachments and supporting documents are true and correct to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information. I recognise that the information submitted in this application is for the purpose of social services support by a government agency. I understand that a government agency may, by means it deems appropriate, determine the accuracy and truth of the information in this application, and I authorise such agency to contact any certifying agencies for the purpose of verifying the information supplied and for determining my eligibility. I acknowledge and agree that any misrepresentations in this application will be grounds for denial or immediate revocation of benefits. I declare, under penalty of perjury, that the information provided in this application and supporting documents are true and correct.</p> <p>Signature: ..... Date: .....</p>					
<p><b>*Notice: Applicants are advised that:</b></p> <p>(1) The deadline to submit your Taxi Owner Fuel Relief Grant Application is <b>Friday 18<sup>th</sup> September, 2020</b>. No applications will be accepted after <b>18<sup>th</sup> September 2020</b>.</p> <p>(2) Taxis Routes and the associated Taxis operating those routes, as well as independent Taxis, which have increased the taxi fares for commuters during the period of the Covid 19 pandemic restrictions imposed in accordance with the Public Health [2019 Novel Coronavirus (2019-nCoV)] Regulations, are automatically deemed ineligible and disqualified to apply for this grant.</p> <p>**Beneficial Owner of Taxi refers to the circumstances wherein a vehicle registered as a taxi is the subject of a contractual arrangement between the registered owner of the said taxi and a Beneficial Owner who is the purchaser and/or operator of the taxi. The taxi is in the possession of the Beneficial Owner, who is seeking to become the registered owner by making periodic instalment payments, whether monthly or otherwise, for the purchase of the taxi.</p>					

**FOR OFFICIAL USE ONLY**

**VERIFICATION** (Ministry of Works and Transport, Transport Division)

To: Transport Commissioner

The details of the application submitted by the person listed hereunder have been verified. The application is forwarded for consideration for a grant by your Ministry.

Applicant's Name: -----

Identification/Passport/Driver's Permit Number.-----

Taxi Registration No.-----

Verification Endorsed

Verification not Endorsed

Officer Name:

Official Position:

Signature of Officer:

Date:

**FINAL RECOMMENDATION OF TRANSPORT COMMISSIONER**

Recommended

Not Recommended

Signature: .....

Date: .....