

Kilmore District Health Community Bus

Hire Agreement and Booking Form

Please complete and return this form to communitybus@kilmorehealth.org.au

Booking Information

Group/Organisation Name								
ABN Number								
Applicant Name								
Applicant Email								
Address								
Suburb		Postcode			ode			
Phone		Mobile			е			
Legal and Insurance Status (mandatory requirement)								
Is your Group/Organ	isation Inco	rporated				Yes		□ No
Public Liability Insura	ance Certific	cate of Group	o/Organisati			Copy attacl	hed	
Policy Number				Amo	ount C	Covered:		
Bus Operator Registration – obtained through Transport Safety Victoria (mandatory requirement) (please note, this can take up to 6 weeks to obtain)								
Registered Operator Number						□С	opy of	Registration attached
Date of Certificate								
Commencement								
Nominated Driver Details								
Driver's Name						□ C	opy of	Licence attached
Licence Number		Exp		Ехр	kpiry			
Nominated Emergency Driver Details								
Driver's Name						□ C	opy of	Licence attached
Licence Number				Ехр	iry			
Booking Details								
Purpose of Use*								
Travelling To								
Frequency of Use	□ Once / 0□ Separat	Casual Weekly Fortnightly Monthly te list attached with dates and times						

^{*}KDH reserves the right to not accept the booking form if the purpose of use is deemed inappropriate.

Booking Dates and Times

Date from	Date to	Pick up time*	Drop off time*

^{*}Pick up time and drop off time to be agreed with KDH.

Check list

Before submitting your application, please check to confirm you have:						
☐ Signed the application form						
☐ Signed the terms and conditions of hire						
☐ Are able to pay the \$100 (cash only) security bond						
☐ Attached a copy of your Certificate of Public Liability Insurance						
☐ Attached a copy of your Bus Operator Registration Certificate (obtained through Bus Safety Vic)						
☐ Attached a copy of your driver's licences – main driver and emergency driver						

Agreement of use

The person or persons named as driver/drivers will be picking up, driving the bus, and returning the bus on behalf of the organisation nominated in this form.

The destination is as stated in this form.

I have read and understood the terms and conditions of hire (separate document).

I have read and understand fuelling, cleaning and tolls and that costs incurred through non-compliance will be recovered from the security bond.

Declaration

I state that the information provided in this application is true and correct. I also declare that this form has been submitted with the full support of the applicant group/organisation and I understand that making any false statements can lead to Kilmore District Health rejecting the application.

I declare that I have read the Community Bus Agreement; I am aware of the group/organisation responsibilities when using the Community Bus and costs incurred as a result and will abide by the conditions in the Community Bus Agreement.

Applicant Signature		Date	
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The driver/s acknowledge and agree -

- That they are over 25 years of age, hold a current and valid full Driver's Licence with no restrictions.
- That they have provided copies of Drivers Licence and Operator Registration Certificate from Transport Safety prior to using the bus.
- To comply with all applicable provisions of the Bus Safety Act 2009 (Vic), Bus Safety Regulations 2010 (Vic), Transport Act 1983, Road Safety Act 1986, Road Traffic Act and all their regulations and all other applicable laws, regulations and by-laws relating to the driving of the vehicle.
- To adhere to Victorian Road Laws including the use of mobile and hand held devices.
- That the bus will carry only the designated number of passengers being 11 plus the driver making a total of 12 persons.
- That during the period that the vehicle is under your control you will not use or be under the
 influence of any intoxicating drug or alcohol. A zero alcohol limit applies when driving the bus and
 alcohol will not be consumed in the vehicle.
- That until the vehicle is returned to the designated parking area, no other person shall drive the bus, and you will not contract to hire or part with the care and control of the vehicle to any other person or group.
- To advise Kilmore District Health of any accident causing injury or damage to the vehicle and any mechanical defects noticed in the vehicle at the time of delivery or after use.
- If children are transported then you must use appropriate child restraints (VicRoads laws 9 November 2009).
- That a staff member from Kilmore District Health will undertake an inspection of the vehicle prior to the loan and on its return.
- To return the vehicle and keys at the agreed times, cleaned and with a full tank of unleaded petrol, accompanied with the signed Vehicle Condition Report.

I have read the above conditions and undertake to abide by them.

Driver Signature		
Driver Name	Date	
Emergency Driver Signature		
Emergency Driver Name	Date	

Vehicle Condition Report

Please complete this form before and after use of the community bus -

Vehicle Registration Number	1HG 6YF				
Date of Hire					
Group/Organisation					
Driver Name					
Contact number					
Interior					
Interior		Before Use			After Use
Interior of bus clean and tidy					
Any noticeable Interior damages/defects (please list)					
Exterior	Before Use			After Use	
Exterior of bus clean and tidy					
Mirror / Windows are clean and not	broken				
Forward and rear lights working					
Any noticeable damages / defects	s (please list)			1	
Scratches					
Dents					
Other					
Any Incidents: Yes / No					
Comments:					
Driver Signature		Date			
KDH Signature		Date			