



Motor Vehicle Commission

Paratransit Certification

Organizational Information

Organizational Name:

Address:

City/Town:

State:

Zip Code:

This is to certify that the organization listed above operates paratransit vehicles. The organization operates them as part of the county transportation plan as described under New Jersey state statute. Title N.J.S.A. 48:4-1 states that special paratransit vehicle means any motor vehicle used exclusively for the transportation of persons who are at least 60 years of age or who have disabilities or who are the clients of social service agencies, provided that the motor vehicle is used in a service provided by a county either directly or by contract, or provided by a nonprofit organization, and the service is included by a county as part of its county plan required by section 6 of P.L.1983, c.578 (C. 27:25-30), regardless of whether a person is charged or donations are accepted.”

Representative for Organization Name (Print):

Signature:

Title:

Date:

Any intentional materially false statement or omission made in connection with this application may subject the individual completing the application and/or the applicant herein to possible civil and/or criminal penalties in accordance with New Jersey state law.

R-5/14