

## B1(a)- FIXED ROUTE SERVICE REQUEST FORM

CITY OF DURHAM  
TRANSIT DIVISION  
PLANNING SECTION  
224 N. HOOVER ROAD  
DURHAM, NC 27703  
(919) 957-7336 FAX (919) 957-7346

Dear Sir/Madam:

In response to your recent request for bus service in your neighborhood please complete the questionnaire below and mail it back using the address above. The information you are providing below will help the DATA staff in evaluating your request. Thank you.

1. Name & Address

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2. Please name the streets the bus will be traveling on.

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3. List the times of the day that you and most of the people in the community would like to have bus service

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4. Please list all businesses, schools and apartments located with ½ a mile from this neighborhood.

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Please return this form along with the attached petition signed by as many people as possible from the neighborhood. Please ensure that the information provided is complete and accurate

## B1(b) BUS SERVICE REQUEST - PETITION FORM

We the Residents of \_\_\_\_\_ Community, do hereby request DATA to extend/provide bus service to our Community. We have read the rules regarding the provision of new and extended service by DATA and understand that if this request is approved we would need to patronize the service in order to ensure its continuity.

Date \_\_\_\_\_ Signed \_\_\_\_\_

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