



**Standing Order Request Form**

**1. Passenger Information (Please Type or Print)**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

**2. Days of the Week:** Please circle the day(s) of the week that you would like a standing order:

Sunday      Monday      Tuesday      Wednesday      Thursday      Friday      Saturday

**3. Go Ride: Trip Information**

**Pickup:** Address: \_\_\_\_\_ Unit/Apt: \_\_\_\_\_

City: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_

Requested Pickup Time: \_\_\_\_\_ AM / PM

**Drop Off:** Address: \_\_\_\_\_ Unit/Apt: \_\_\_\_\_

City: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_

Requested Appointment Time: \_\_\_\_\_ AM / PM

**4. Return Ride: Trip Information**

**Pickup:** Address: \_\_\_\_\_ Unit/Apt: \_\_\_\_\_

City: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_

Requested Pickup Time: \_\_\_\_\_ AM / PM

**Drop Off:** Address: \_\_\_\_\_ Unit/Apt: \_\_\_\_\_

City: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_

**5. Contact Information: The person to contact with questions regarding this request.**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**RETURN FORM via mail or Fax to the service provider in your county**

Anoka/NW Ramsey  
Anoka County Transit  
2100 Third Avenue RM 216  
Anoka, MN 55303  
763-323-5556

Dakota County  
DARTS  
1645 Marthaler Lane  
West St. Paul 55118  
651-234-2284

Carver/Scott  
200 4<sup>th</sup> Avenue West  
Shakopee, MN 55379  
952-496-1842

Midwest Paratransit  
11785 Justen Circle  
Hassan Township, MN 55369  
763-515-5220  
(Serving Hennepin/Washington/SE Ramsey)



## **This form should be used for standing orders only.**

**A standing order is a trip that goes from the same pickup address to the same drop-off address at the same time, on the same days each week.**

**You must use the Transit Link service for 3 consecutive weeks prior to becoming a standing order. Use this form if you are requesting a new standing order or to make changes to an existing one.**

### **INSTRUCTIONS**

1. **Passenger Information:** Please fill out all of the information listed in this section.
2. **Days of the Week.** Circle the days of the week that the standing order is needed. The standing order must be used for the same days every week.
3. **Trip information: Go Ride.** Provide the complete address and telephone numbers for both the pickup and drop off locations. Requested Time: This is the time you would like to get picked up. If you have a time which you must arrive at your destination by, please enter it as an appointment time. (Example: Work start time or doctors appointment.)

**NOTE:** An appointment time means we will do our best to ensure that you arrive at your destination NO LATER than that time. Please allow yourself time to get from the front door to your final destination within the building.

4. **Return Ride.** Please complete this portion with complete address and telephone numbers. The requested time is the time that you wish to be picked up at your destination.

**NOTE:** When filling your standing order request Transit Link providers may negotiate with you to establish a pickup time that may be 30 minutes later than your requested time. This will be done to accommodate appointment times and other riders needs on our shared ride service.

**If you have questions about completing the Standing Order Request Form, contact the service provider in your county at 651-602-5465.**