



Alta California
Regional Center

WWW.ALTAREGIONAL.ORG

LETTER OF INTEREST SUBMISSION CHECKLIST (TRANSPORTATION)

Please be sure to gather all documents prior to submitting a letter of interest through the Provider Directory. This will ensure timely processing.

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|--------------------------|--|
| <input type="checkbox"/> | Proof of operating transportation company at least 1 year (i.e. community contracts, billing/invoices, tax return, etc.) |
| <input type="checkbox"/> | Current Business License |
| <input type="checkbox"/> | Drivers License (for each driver) |
| <input type="checkbox"/> | Special Driver Certification (VDDP) for each driver |
| <input type="checkbox"/> | Department of Transportation (DOT) Medical Certificate - for each driver |
| <input type="checkbox"/> | Program Design - ACRC approved template |
| <input type="checkbox"/> | Fleet List (include make, model, mileage) |
| <input type="checkbox"/> | Organizational Document (i.e. Articles of Incorporation, partnership agreement, etc.) |
| <input type="checkbox"/> | Conflict of Interest |
| <input type="checkbox"/> | DS1891 |

Please upload all documents, noted above, to your Letter of Interest .

If you have any further questions, please reach out to vendorizations@altaregional.org