



## Voluntary Conversion – WAS Fund Eligibility Application to Extend Provisional Approval

**INSTRUCTIONS:** Please submit your completed application by mail to the City of Seattle, Department of Finance and Administrative Services, Attention WAS Fund, 700 5th Ave., Floor 42, P.O. Box 94785, Seattle, WA 98124-4785, OR by email to [consumerprotection@seattle.gov](mailto:consumerprotection@seattle.gov). Please keep a copy of the completed application for your records.

Voluntarily converted Wheelchair Accessible Vehicles (WAVs) must comply with all eligibility requirements in Seattle Municipal Code 6.310, King County Code 6.64, City of Seattle Director’s Rules and King County Public Rules.

***\*\*\*This extension of the provisional approval for the possibility of WAS Fund reimbursement does not guarantee payments from the WAS Fund. There are additional requirements that must be met before any reimbursement from the WAS Fund may happen.\*\*\****

### Vehicle Owner Information:

First name		Last name	
Street address			Apt./Suite
City	State	Zip	
Phone	Email		
		Yes	No
For-Hire Driver’s License/Permit Number		WAT Endorsement? (Circle one)	
Vehicle/Endorsement Number		Taxi Association/For-Hire Vehicle Co./TNC	
<b>Taxi/for-hire medallion vehicles only:</b>			
<b>Check one:</b>			
City medallion only	<input type="checkbox"/>	County medallion only	<input type="checkbox"/>
City and County medallion	<input type="checkbox"/>		<input type="checkbox"/>

**Request for Extension:**

<hr/> <p>Current Expiration Date</p>	<hr/> <p>Requested Expiration Date (max. extension: 90 days)</p>
<p><b>Please describe your reason(s) for requesting an extension and the desired length of the extension below. <i>Be sure to attach any supporting documentation (if any) to this application upon submission to FAS.</i></b></p>	

**Vehicle owner signature:**

<p><b><i>By signing below, I hereby swear or affirm that all information provided in this application, including supporting documentation (if any), is true and correct to the best of my knowledge.</i></b></p>	
<hr/>	
<p>Applicant Name (please print)</p>	
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<p>Signature</p>	<p>Date</p>

**Provisional Approval Extension Granted/Denied (Official Use Only):**

		Date of Application Review: _____
<b>Check One:</b>		
Provisional Approval Extension <b>Granted</b>	<input type="checkbox"/>	Extension Good Through: _____
Provisional Approval Extension <b>Denied</b>	<input type="checkbox"/>	
<b>Manager/Inspector Info:</b>		
<hr/>		
<p>Name (please print)</p>		
<hr/>		
<p>Signature</p>	<p>Date</p>	