

*Clinton County Public Transit (CCPT)*

**Paratransit Scheduling Proxy Form**

BE IT KNOWN, that I, \_\_\_\_\_(please print full name), a CCPT paratransit client, hereby constitute and appoint the following people (please provide each person's name, relationship to paratransit customer and phone number):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

as my true and lawful agent for me and in my name, place and stead, to schedule and cancel appointments as my proxy with Clinton County Public Transit (CCPT) Dispatch, beginning \_\_\_\_\_ (Date), for the transaction of any related correspondence and business which may come as a result of being a paratransit client, and for me and in my name, to act as fully as I could do if personally able; and I herewith revoke any other proxy heretofore given.

WITNESS my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signed: \_\_\_\_\_

Please remit to:        Clinton County Planning Department  
                                  c/o James Bosley, CCPT  
                                  135 Margaret Street, Suite 124  
                                  Plattsburgh, NY 12901

Questions, please call (518) 565-4713.