

Shanelle N. Hayes

From: WMATC E-Filing <compliance@wmatc.gov>
Sent: Wednesday, July 31, 2019 8:24 PM
To: WMATC Compliance
Subject: 3313: General Tariff
Attachments: 5d42312acf67f-Johnson Transportation Services LLC Price List 29July2019.docx

**WASHINGTON METROPOLITAN AREA TRANSIT COMMISSION
GENERAL TARIFF COVER**

General Tariff No. GT- 1
Date Filed at WMATC: 08/01/2019
Date Effective: 8/8/2019

1. WMATC Certificate of Authority No.: 3313

2. Carrier Name on Certificate of Authority: Johnson Transportation Services LLC
Street: 6802 Ashleys Crossing Court, Apt./Suite:
City: Temple Hills
State:MD
Zip: 20748
Telephone Number: 3014493063

3. Person authorized to file tariff on behalf of Carrier
Name: Maria Johnson
Title: CEO
Telephone Number: 3014493063

4. Date this tariff actually filed with WMATC: 08/01/2019

5. Date seven (7) calender days after date on Line 4: 08/08/2019

6. Effective Date of this tariff (not earlier than date on line 5):

***Your general tariff was attached to your submission.**

NOTE: SEE COMMISSION REGULATION NOS. 55 AND 56. IF YOU HAVE A QUESTION ABOUT HOW TO COMPLETE THIS FORM, CALL THE COMMISSION AT (301) 588-5260.

Johnson Transportation Services LLC Price List

Regular Service hours are from 6:00 am to 5:00 pm Monday – Friday*

Saturdays Hours are from 7:00 am – 2:00 pm*

| | |
|------------|--------------------|
| Ambulatory | \$70.00 (one way) |
| Round Trip | \$140.00 flat rate |
| Wheelchair | \$80.00 (one way) |
| Round Trip | \$160.00 flat rate |

*The one way and round trip prices are based on door to door service for pick-up and drop-off. For additional trips, there will be a cost of \$35.00. Wait time is based on a 15 minute increment with an additional cost of \$6.25. And a cancellation fee \$70.00 will be charged for no shows and last cancellations.

| | |
|---------------------|--------------------|
| Dialysis** | \$70.00 (one way) |
| Round Trip Rate | \$140.00 flat rate |
| Hospital Drop Off** | \$70.00 (one way) |
| Hospital Pick Up** | \$70.00 (one way) |

**For additional trips, there will be a cost of \$20.00 and a cancellation fee of \$70.00 for no shows and last cancellations.

| | |
|------------------------|--------------------|
| Holiday Ambulatory *** | \$80.00 (one way) |
| Round Trip | \$160.00 flat rate |
| Holiday Wheelchair*** | \$100.00 (one way) |
| Round Trip | \$200.00 flat rate |
| Holiday Dialysis*** | \$80.00 (one way) |
| Round Trip | \$160.00 flat rate |

***Holiday Hours of Operation are based on the Saturday schedule from 7:00 am – 2:00 pm. All trips must be scheduled at least 2 months in advance of the upcoming Holiday.

Holidays
New Year's Day
Martin Luther King, Jr. Day
George Washington's Birthday

Memorial Day
Independence Day
Labor Day
Columbus Day
Veterans Day
Thanksgiving Day
Christmas Day

And a cancellation fee \$100.00 will be charged for last minute cancellations.