



DISCOUNTED ONE-WAY RIDE PASS PROGRAM

QUALIFICATIONS: To be considered for participation in RFTA's Discounted One-Way Ride Program, your organization or agency must be one of the following:

- Non-Profit 501(c)(3) tax-exempt organization that serves the local community, **OR**
- Governmental Agency, that provides local community/social service assistance to indigent and/or disabled persons.

“Local” is defined as within the current service area of RFTA transit services.

APPLICATION PROCESS: If you qualify and wish to be placed on our eligible list, please submit the following information for consideration:

1. If you are a Non-Profit 501(c)(3) tax-exempt organization, please provide a copy of your 501(c)(3) status letter from the IRS.
2. If you are a Governmental Agency, please provide your FEDERAL I.D. TAX NUMBER.
3. A letter on your organization/agency's letterhead stating the type of service you provide and your intended use of the One-Way Ride Pass Program.
4. A completed and signed **Certification of Organization/Agency Eligibility** form (attached).

Please send complete applications and direct any questions to **Sabrina Harris, Accounting Supervisor**, at:

Email Address: sharris@rfta.com

Mailing Address: RFTA Finance Department, Attn: Sabrina Harris, 0766 Industry Way, Carbondale, CO 81623

Fax Number: 970-384-4943

Phone Number: 970-384-4957

PLEASE ALLOW AT LEAST ONE (1) WEEK FOR PROCESSING OF COMPLETE APPLICATIONS.
INCOMPLETE APPLICATIONS WOULD RESULT IN ADDITIONAL PROCESSING TIME.

PROGRAM RULES:

- For Non-Profit organizations only, One-Way Ride passes can be distributed to volunteer groups assisting in their own events. Distribution is the responsibility of the Non-Profit organization.
- For Governmental Agencies only, One-Way Ride passes are to be distributed to clients who are indigent or disabled. Distribution is the responsibility of the Governmental Agency.
- Discounted One-Way Ride passes shall not be re-sold. Passes shall not be distributed to employees of the Non-Profit organization or Governmental Agency. Unused One-Way Ride passes can be returned for a refund.
- Misuse of passes may result in permanent disqualification from this program.

INSTRUCTIONS AND PROCEDURES FOR APPROVED APPLICANTS:

- **TO PLACE ORDERS:** Contact **Sabrina Harris, Accounting Supervisor**, via email/fax/phone – see contact information above – or mail your order and check payable to “Roaring Fork Transportation Authority”. When ordering, please mention that you are a participant of the RFTA One-Ride pass program. Orders will be processed as soon as possible in order of receipt.
- **PAYMENT DETAILS:** Orders are pre-paid and sent out 1st class mail **OR** picked-up at the Finance Department. Acceptable forms of payment include check, money order, Visa/Master card credit card or cash.
- **COST:** One-Way Ride passes have a value of \$9.00 and a discounted sales price of **\$2.00** each. One-Way Ride passes allows one-way travel for a single rider on transit service between Aspen and Rifle.



Certification of Organization/Agency Eligibility

The individual signing below certifies that the Non-Profit organization or Governmental Agency that he/she represents meets the criteria for eligibility in the **RFTA One-Way Ride Program**:

1. The Non-Profit 501(c)(3) tax-exempt organization serves the local community or the Governmental Agency provides local community/social service assistance to indigent and/or disabled persons.
2. For Non-Profit organizations only, One-Way Ride passes can be distributed to volunteer groups assisting in their own events. Distribution is the responsibility of the Non-Profit organization.
3. For Governmental Agencies only, One-Way Ride passes are to be distributed to clients who are indigent or disabled. Distribution is the responsibility of the Governmental Agency.
4. Discounted One-Way Ride passes shall not be re-sold. Passes shall not be distributed to employees of the Non-Profit organization or Governmental Agency. Unused One-Way Ride passes can be returned for a refund.
5. Misuse of passes may result in permanent disqualification from this program.

Please print or type in the following:

Non-Profit Organization or Governmental Agency Name:

Address: _____

Telephone #: _____ FAX #: _____

Email Address: _____

Geographic Description of Local Area Served by Organization/Agency:

Contact Person: _____ Date: _____

Authorized Agency Signature: _____