



COUNTY OF RIVERSIDE - COMMUTER SERVICES



COMMUTE MODE REGISTRATION

PLEASE RETURN TO COMMUTER SERVICES OFFICE FOR PROCESSING: icommute@rivco.org or FAX 951/955-1181

Last Name _____ First Name _____ EMPLID # _____
 Home Address _____ City/Zip Code _____
 Work Phone Number _____ Cell/Home Phone Number _____
 Dept/Agency _____ Division _____ Mail Stop # _____
 Work Address _____ City/Zip Code _____
 Work Hours _____ am/pm (circle am or pm) _____ am/pm (circle am or pm) Are you a TAP employee? Yes No
 Do you have access to e-mail? No Yes If yes, provide e-mail address: _____
 Birthday _____ (unique identifier for incentive purposes only)
 On an average, how many days per week will you be using the registered alternative mode of transportation? (Not commuting alone) _____

COMPLETE THE APPROPRIATE SECTIONS BELOW

CARPOOLING

Check appropriate response: I carpool with a county employee(s) I carpool with a non-county employee (must be full-time working adult/s)
 Carpool Partner(s):
 Name _____ Department or Employer _____ Phone _____
 Name _____ Department or Employer _____ Phone _____
 Name _____ Department or Employer _____ Phone _____
 Vehicle Make & Year _____ Model _____ Color _____ License Plate # _____
 Do you? (check one) Share Driving Ride Only Drive Only Are you? (check one) A New Carpool Group Adding to an existing Carpool Group
 Carpool parking spaces are available at my work location, please issue our carpool group a parking permit. (check one) Yes No

CARPOOL PARKING: My signature below acknowledges my agreement to abide by the rules and regulations set forth by Commuter Services as so stated on the back of this form. I agree to relinquish the carpool parking permit and/or parking structure pass card upon termination of employment or upon request from Commuter Services. I acknowledge that falsification of information on any Commuter Services document or misuse of a Carpool Parking Permit or Structure Pass could result in disciplinary action and/or termination from employment. Commuter Services must be notified within five (5) days of any changes occurring within the registered carpool.

BICYCLING/WALKING

I am registering to (check appropriate response) Walk to Work Bicycle to Work
 Total miles I will be bicycling and/or walking to work _____
 Bicycle Color _____ Make _____ Serial Number _____

TRANSIT

Transit Agency (check appropriate response) RTA OMNITRANS SUNLINE OCTA METROLINK
 Route or Line Number(s) _____

ACKNOWLEDGEMENT

Employee Signature _____ Date _____
 Supervisor's Signature _____ Date _____

Supervisor's Name (Please Print) - To the best of my knowledge the above information supplied by this employee is true and correct.

COMMUTER SERVICES USE ONLY

MODE CONFIRMATION (circle one): CP CN R B W T IF CN, ENTER CN# _____
 CP PERMIT: _____ GRH VOUCHER: _____ STR. PASS: _____ DEPT CODE: _____ SITE: _____
 DATE IE COMMUTER LINK EMAILED: _____ REGISTRATION PACKET MAILED TO: _____ on _____ CS REP _____

CARPOOL PARKING RULES AND REGULATIONS

COUNTY OF RIVERSIDE

(ORDINANCE 626.4)

I UNDERSTAND AND AGREE TO ABIDE BY THE FOLLOWING PARKING STRUCTURE PASS/PARKING PERMIT RULES:

- 1) I understand that registered Commuter Services members of our designated carpool group will maintain full responsibility for the permit and/or parking structure pass card. (If available, carpool parking structure passes are issued ONLY to registered carpool groups working in Downtown Riverside.)
- 2) I understand that the permit and/or parking structure pass cards are not transferable and allowing an unregistered individual to use the groups issued parking permit and/or parking structure pass card shall result in the immediate loss of the groups permit and/or parking structure pass.
- 3) I understand that the permit and/or parking structure pass card allows the registered carpool group to park only **ONE** vehicle at a time in any unreserved parking space in the assigned parking lot or parking structure **ONLY** on the days the group carpools.
- 4) I understand that card holders who forget their parking structure pass card or cannot find their parking structure pass card at the time of entry or exit will be subject to pay the hourly fee or a lost ticket fee.
- 5) I understand that while parked in the designated carpool locations or parking structure, we will display our carpool parking permit on the rear-view mirror of our vehicle and our County employee parking permit.
- 6) I understand that I will abide by any and all parking lot and parking structure rules and that our vehicle and personal items be locked and secured. The County of Riverside is not responsible for damage or theft while parking in County facilities. County of Riverside parking ordinance number 626 is strictly enforced in all County of Riverside parking structures and lots.
- 7) I understand that I will notify Commuter Services immediately if our permit and/or parking structure pass card is misplaced/lost or stolen and understand that we are responsible for paying a \$10.00 card fee and an additional \$10.00 replacement/activation fee.
- 8) I understand that I will notify Commuter Services immediately of any changes to our registered carpool group. If the group disbands or if we decide not to park in the reserved carpool parking space and /or in the parking structure, we will immediately return our permit and/or issued parking structure pass card to Commuter Services. If the permit and/or parking structure pass card is misplaced/lost or stolen, we understand that we are responsible for paying a \$10.00 card fee and an additional \$10.00 replacement/activation fee.
- 9) Abuse of any rules or regulations outlined above or in Ordinance 626.4 pertaining to Carpool Parking Permits and the use of, and/or falsification of information in any rideshare document, will result in the revocation of the Carpool Parking Permit and administrative disciplinary action and/or dismissal.

email: icommute@rivco.org

General Office Line: [951/955-1118](tel:9519551118)

Website: rivcocommuter.rc-hr.com