OC Rideshare Program – Commuter Choice Payroll Deduction Authorization Form



	First Name		Initial	Initial Last Name		Employee	ID
Employee Name:							
	Home/Mailing Address			Unit/Apt City		Home Zi	р
Mailing/Home Address:							
	Work Start Time	Work End Time		Work Er	nail	Work Pho	ne
Work Information:					•••		
	Work Address		Work (ity Zip Code		è
All County of Orange and Superior Court employees are eligible to participate in the Commuter Choice Program offered through OC Rideshare and managed by HRS/Employee Benefits. This program allows employees to purchase transit passes or vanpool fare (vouchers) through the convenience of a once-per-month payroll deduction using pre-tax dollars up to the amount established by the IRS. The Commuter Choice Program Guidelines are available online at <u>OC Rideshare Guidelines</u> . Note: Employees must submit this Payroll Deduction Form by the 1st of the month, prior to the actual month that the employee would like to start receiving the pre-tax benefits.							
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Select all that apply:	Metrolink Passes	Passes/Tickets: □ 7-Day (Consecutive) □ Single-Day*		(s) to my existing participation information: CHANGES: (30-day notice required) Change Pass/Ticket Type			
 30-Day – Routes 701, 721, 749 30-Day – Routes 757 or 758 30-Day – Senior (60+) Pass Other TranBen Voucher (Amtrak/Enterprise Vanpool) Per Month Amount to Deduct: \$ (round to nearest dollar) 		□ 5-Day Flex*** □ 10-Day Flex*** Pass Type: □ Senior** □ Adult □ Senior** □ Student/Disabled** * * * not available with Mobile App ** * ** must attach copy of ID (Student or Driver License) *** *** only available with mobile app □ Email: □ Email:		Change Address/Other Info Please Cancel My Participation: TranBen VanpoolVoucher Metrolink/OC Bus Perk Pass Effective Date://			
Authorization: I hereby authorize the County of Orange Auditor-Controller to make a once-per-month payroll deduction of the current prevailing fare amount from <i>one</i> of my bi-weekly payroll checks, and to continue doing so until I notify the OC Rideshare Program Office by submitting a cancellation, or when my employment status is not active. It is understood that if I select the OCTA Perk Pass or Metrolink Single Day Pass(es), the amount may vary each month, and is based on the actual number of trips taken or passes retrieved. I also understand that the Metrolink Pass is reserved for me to retrieve each month with my Metrolink Corporate Quick Card or Metrolink Mobile App is for a specific route/stations. By activating the pass, I understand that I must pay for the entire month even if I do not ride during that time.							
Signature:					[Date:	
I am a County of Orange or Sup to any other person. The amou in disciplinary action up to and harmless Innovative TDM Solut failure to stop, or delay in stop	nt designated above does including dismissal from ions (ITS), the County, its ping the deduction hereb	s not exceed my averag employment and possil officers and employees by requested. I shall ho	e monthi ble persec from an Id ITS, the	y commuting fares. I agro cution for Federal income y liability or damages for county and/or its office.	ee and understand th tax evasion. I hereby failure to make payn rs harmless in any ac	hat false certification may y release and agree to ho ments, or damages for tion which may be broug	result Id
me or by others on my behalf; c	2				,		
Please scan/email the completed application to rideshare@ocgov.com or pony mail to:							