Buy One Get One Free Monthly Pass for SolTrans Yellow Line & 80

Am I eligible to apply?

You are eligible to be a participant if you:

- Live or work in Contra Costa County, and
- Are 18 years of age or older, and
- Would otherwise drive alone to/from work if SolTrans Yellow Line or 80 were not available.

What are the promotion rules?

- One (1) free pass per person and per household during promotion period of July 1, 2019 to June 30, 2020 while funding is available.
- SolTrans must serve your home-to-work and/or work-to-home commute.
- We may require verification of the information you provide.
- SolTrans and 511 Contra Costa reserve the right to make any changes or terminate this promotion at any time without prior notification.
- If you have participated in any 511 Contra Costa incentive program during the promotion period, you are not eligible for this BOGO offer.
- You agree to be signed up to receive the 511 Contra Costa email newsletter and agree to complete a post-program survey.

Return with payment to:
Solano County Transit (SolTrans)
311 Sacramento Street
Vallejo, CA 94590
Questions? (707) 648-4666

All stated limitations apply. Completion of this application does not guarantee delivery/receipt of a free pass. Applicants must meet all qualifications listed above and be approved by 511 Contra Costa.

All information is required to apply for free pass. Payment for first pass will be processed upon receipt.

1. **How many days a week do you plan to take the bus for work?** _____

2. **What bus route do you plan to take?** _____

3. **How do you plan to get to the bus stop?**

☐ Drive myself ☐ Carpool ☐ Walk
☐ Get dropped off ☐ Bike ☐ Other (Specify): _____

4. **When you don't use transit to get to work, what mode of transportation do you use most often?**

☐ Drive myself ☐ Walk ☐ Get ride from co-worker or family
☐ Bike ☐ Other : _____ ☐ Get ride from ride sourcing app (Uber, Lyft, Scoop, Carzac, Waze)

5. **Contact Information**

First and Last Name

Daytime Phone | Work Email

Home Address (P.O. Boxes not accepted) | Home City | Home Zip

Mailing Address (if different than above) | Mailing City | Mailing Zip

6. **Employer Information**

Name

Work Site Address (P.O. Boxes not accepted) | City | Zip

7. **Acknowledgment**

I read the eligibility and promotion rules listed and I verify the information submitted is correct. I agree to complete a brief survey from 511 Contra Costa following my participation in this promotion.

Signature | Date

8. **Payment Method** Check payable to **Solano County Transit** • Commuter Benefit Check • Credit Card (Visa/Mastercard)

Credit Card Number: _____ Security Code: _____ Exp. Date: _____

Amount/Ticket: ☐ **$114.00 (Monthly Pass)**

12/2019