IMPORTANT INFORMATION FOR APPLICANTS FOR SOLANO ADA PARATRANSIT SERVICES:

To apply for paratransit eligibility, you must complete a two-part process.

First, you must submit the following:

- The signed **SOLANO CUSTOMER INFORMATION SHEET** (please mark any corrections on enclosed sheet)
- A signed and completed **Application for ADA Paratransit Services** form
- The signed and completed **Release of Information** form
- The signed and completed **SOLANO COUNTY PARATRANSIT EVALUATION CONSENT FORM**
- A photocopy of a form of identification
- A photograph of your head and shoulders (photo will not be returned)

Please submit the above either by email at:

[Solano-Eligibility@paratransit.org](mailto:Solano-Eligibility@paratransit.org)

OR,

Submit by mail to:
Paratransit, Inc.
2501 Florin Rd.
Sacramento, CA 95822

Second, you must complete a telephone interview.

- Call to schedule a personal phone interview at (707) 541-7184
- Please allow a few days for processing your application paperwork before calling
- All of the above must be submitted before scheduling a phone interview
- A phone interview must be conducted to complete the application process

Should you need assistance completing the application process, please call Paratransit Eligibility Customer Service at: **(707) 541-7184.**
SOLANO COUNTY PARATRANSIT EVALUATION CONSENT FORM

I, ______________ certifies that I am a person with disabilities within the meaning of the Americans with Disabilities Act and that all the information I may give during the evaluation process will be correct to the best of my knowledge.

I understand that only persons with disabilities within the meaning of the Americans with Disabilities Act who are functionally unable to ride the fixed route (non-commuter public bus and rail system) may be eligible to ride Solano County Paratransit and that an eligibility evaluation test is required in order to determine and/or retain Solano County Paratransit eligibility.

I understand that the eligibility evaluation test will consist of a transit interview and functional activity testing that simulates the process of using a public bus. The functional activity testing will involve walking/wheeling, sitting/standing activity and transfers, curbs, ramps and uneven surfaces negotiation.

I have requested eligibility or renewal of eligibility to ride Solano County Paratransit System and hereby consent to:

1. The performance of the evaluation mentioned above.
2. The video surveillance and taping of the evaluation process.
3. (If I am found eligible), the use of my name, picture and other personal identifying information on a future Solano County Paratransit ID card that will be issued to me.
4. The use of my picture, name, address, telephone number, disability and functional information in the Solano County Paratransit database for the purpose of facilitating Paratransit Services to me by Solano County Paratransit and its providers, and for the purpose of Solano County Paratransit's record keeping.
5. If I am found eligible, I agree to abide by all Solano County Paratransit rules applicable to riders to the extent that they are not in conflict with applicable law.

Date: ______________________ Signature: ______________________

Date: ______________________ PCA Signature: ______________________

Must be signed by parents, legal guardian or conservator if the participant is underage 18 on the date this Release is signed or if the participant has had a guardian or conservator of the person appointed for him/her.

The undersigned certifies that he/she is the parent or legal guardian or conservator of the participant and, as such, on behalf of myself and the participant, agrees to the terms of this Consent.

Date: ______________________ Signature: ______________________