

2 FOR 1 Solano Express



Buy a Solano Express 31-Day Pass and receive a Clipper Card (\$125 value) good for regional transit service on Solano Express, San Francisco Bay Ferry, and Bay Area Rapid Transit (BART).



Apply for a Clipper Card

Print and complete this form. Return it with a copy of your receipt to the SolTrans or FAST customer service office or mail to:

Solano Mobility
423 Main Street
Suisun City, CA 94585

Once your eligibility is confirmed, the Clipper Card (\$125 cash value) will be sent to you.

You are eligible if you:

- ▶ Live or Work in Solano County, and
- ▶ Are 18 years of age or older

2 FOR 1 Rules

- ▶ One (1) Clipper Card per application and per household from July 1 through June 30 each incentive year while funding is available.
- ▶ We may require verification of the information you provide.
- ▶ Solano Express and Solano Mobility reserve the right to make any changes or terminate this promotion at any time without prior notification.
- ▶ If you have already participated in a Solano Mobility transit incentive program during the same July 1 to June 30 incentive year, you are now eligible for a second 2 FOR 1 offer.
- ▶ You agree to be signed up to receive the Solano Mobility mail newsletter and agree to complete a post-program survey.

QUESTIONS: Call 800-535-6883

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All information is required to apply for a Clipper Card

How many days a week do you take Solano Express? _____

What Solano Express line (Red/Yellow/Blue/Green) do you plan to take? _____

How do you get to the bus stop? _____

☐ Drive myself ☐ Carpool ☐ Walk ☐ Get dropped off

☐ Bike ☐ Other (Specify): _____

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 coworker or family

☐ Bike ☐ Ride sourcing service (i.e. Uber, Lyft, Scoop, Carzac, Waze)

☐ Other (Specify): _____

Contact Information: (all fields are required)

First and Last Name _____

Daytime Phone _____

Email _____

Home Address (P.O. Boxes not accepted) _____

City _____

Zip _____

Acknowledgment:

I read the eligibility and promotion rules listed and I verify the information submitted is correct. I agree to complete a post program survey from Solano Mobility following my participation in this promotion.

Signature _____

Date _____

Pass Amount

31-Day Pass: ☐ Reduced Fare/SDM Blue/Green/Red/Yellow: \$57.00

☐ Out of County Blue/Green/Red/Yellow \$114.00



All stated limitations apply. Completion of this application does not guarantee delivery/receipt of a Clipper Card. Applicants must meet all qualifications listed and be approved by Solano Mobility.