# U. S. Department of Defense
# United States Air Force
# Transportation Incentive Program Application
# Outside the National Capital Region
**(Upon completion, provide a copy to installation Point of Contact/POC)**

PURPOSE: Executive Order 13150 requires Federal agencies to establish transportation incentive program in order to reduce Federal employees' contribution to traffic congestion and air pollution and to expand their commuting alternatives. The purpose of the program is to encourage commuting by mass transportation and provide financial incentives to members/employees.

A. **Applicant Information:** Please print clearly or type. Application must be filled out completely. Incomplete or illegible applications will not be processed.

Application (please circle one): New Change Withdraw

Name as it appears in payroll records or on paycheck:
Last Name: _____ First Name: _____ MI: _____ SSN (Last Four): _____

City (Residence): _____State: _____ Zip Code: _____

Air Force Installation/MAJCOM:_____
Duty Location (City): _____ Office Telephone Number (Commercial): (___)_____

Please circle one:

Air Force Active Duty Air National Guard Active Duty Air Force Reserve Active Duty
Air Force Civilian Employee Air National Guard Civilian Employee Air Force Reserve Civilian Employee

Name of the transportation system/company used: _____
What type of pass/ticket do you use: _____

Mode(s) of Transportation to be used to and from workplace (Please circle)

Commuter Bus Commuter Train Subway/Light Rail Vanpool Other: _____

If you are a van pool member, please complete the supplemental application. The supplemental application must list each van pool member (Vehicle must have the seating capacity for at least six adults (not including the driver) and must be used 80 percent for commercial van pool)

**B. Employee Certification:**

**WARNING**: This certification concerns a matter with the jurisdiction of an agency of the United States and making a false, fictitious, or fraudulent certification may render the maker subject to criminal prosecution under Title 18, United States Code, Section 1001, Civil Penalty Action, providing for administrative recoveries of up to $10,000 per violation, and/or agency disciplinary actions up to and including dismissal.

I certify that I am eligible for a public transportation fare benefit, will use it for my daily commute to and from work, and will not transfer it to anyone else.
I certify that the monthly transit benefit I am receiving does not exceed my monthly commuting costs.
I certify that my usual monthly commuting costs are: $_____
I certify that this information is accurate and agree to notify the installations POC of any change to employee status.
**[Note: The current benefit amount available to Air Force employees is $100 a month ($1,200 a year)]. Please indicate your estimated transportation cost above. Benefits will be paid in the form of transportation vouchers wherever possible. If monthly fare media exceeds $100 per month, Air Force/TRANServe may opt to purchase monthly passes or fare media at the full monthly cost, not to exceed $1,200 annually.**

Employee Signature: _____ Date: _____

**PRIVACY ACT STATEMENT:** This information is solicited under authority of Public Law 101-509. Furnishing the information on this form is voluntary, but failure to do so may result in disapproval of your request for the mass transportation fringe benefit. The purpose of this information is to facilitate timely processing of your request, to ensure your eligibility, and to prevent misuse of the funds involved. This information will be matched with lists at other Federal agencies to ensure that you are not listed as a carpool or vanpool participant or a holder of any other form of vehicle worksite parking permit with DoD or any other Federal agency. Partial social security number (SSN - last four numbers) will be used for record keeping purposes.

As of 01 Jan 02