



Carpool/Vanpool Application

PRIVACY ACT STATEMENT

Authority: The Federal Property and Administrative Services Act of 1949 (40 U.S.C. § 101 et seq.) and 41 C.F.R. § 102.74.305 (2010).

Purpose: To allocate and provide administrative controls over allocated parking permits in facilities under the jurisdiction of USAID.

Routine Uses: To provide subsidized parking privileges to approved USAID employees. We may share your information to service providers, like parking garage operators, to facilitate various administrative activities, such as processing payments, locating vehicles, reserving spaces in parking structures, etc. The information may also be disclosed for civil or criminal law or regulatory enforcement purposes to another agency or tribunal in response to a written request from that agency's head or an official who has been delegated such authority.

Disclosure: While the form itself is voluntary, your submission indicates that you agree to share the information recorded on the form. Your information may be used to facilitate ride sharing agreements. Those individuals who do not submit a form or fail to supply all of the information requested on this form may delay or prevent approval of their application.

Instructions: USAID Direct Hires and PSC's applying for carpool / vanpool permits must complete this application. Please indicate below whether this is a new application, recertification of a previous application, or adding or changing carpool riders; ensure that the primary applicant and all carpool riders fill out the applicant information, and check all that apply in the "Acknowledgment" sections. Once completed, please submit the application to transitbenefitprogram@usaid.gov. The Bureau for Management, Office of Management Services, Headquarters Management Division (M/MS/HMD) will respond to this request within two business days.

For more detailed information about USAID Carpool/Vanpool, please refer to ADS Chapter 514, Parking Program Administration.

New application

Recertification

Add / change riders

Full Name: _____ Date _____

Work Phone: _____ Work Email: _____

Bureau/Office/Division: _____

USAID building for which you are requesting parking: _____

Please check to acknowledge the following:

I certify that I am not participating in USAID’s Transit Program.

I agree to make payments in pay.gov by the 10th of each month for Ronald Reagan Building (RRB).

I agree to follow the parking vendor’s payment procedures for all other USAID parking facilities.

I understand that if I am delinquent in making payments, my parking will be suspended / revoked.

I agree to comply with ADS 514.

Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____

Carpool Applicant Information (2)

Full name: _____

Work phone: _____ Work email: _____

(USAID employee) Bureau/Office/Division: _____

(Non-USAID employee) Agency / Company employed at: _____

Please check to acknowledge the following:

Yes No

I am a USAID employee.

I am not a USAID employee but a Federal employee who works in a facility co-located with USAID.

I am not a USAID employee but a private industry employee who works in a facility co-located with USAID.

I am not participating in any other transit benefits from USAID or other Federal agencies.

If you are not a USAID employee, you must attach proof that you do not received transit benefits from your employing agency to this application.

Applicant 2 Signature

I certify that my answers are true and complete to the best of my knowledge. (Applicant 2)

Applicant 2 signature: _____

Carpool Applicant Information (3)

Full name: _____

Work phone: _____ Work email: _____

(USAID employee) Bureau/Office/Division: _____

(Non-USAID employee) Agency / Company employed at: _____

Please check to acknowledge the following:

Yes No

I am a USAID employee.

I am not a USAID employee but a Federal employee who works in a facility co-located with USAID.

I am not a USAID employee but a private industry employee who works in a facility co-located with USAID.

I am not participating in any other transit benefits from USAID or other Federal agencies.

If you are not a USAID employee, you must attach proof that you do not received transit benefits from your employing agency to this application.

Applicant 3 Signature

I certify that my answers are true and complete to the best of my knowledge. (Applicant 3)

Applicant 3 signature: _____

Carpool Applicant Information (4)

Full name: _____

Work phone: _____ Work email: _____

(USAID employee) Bureau/Office/Division: _____

(Non-USAID employee) Agency / Company employed at: _____

Please check to acknowledge the following:

Yes No

I am a USAID employee.

I am not a USAID employee but a Federal employee who works in a facility co-located with USAID.

I am not a USAID employee but a private industry employee who works in a facility co-located with USAID.

I am not participating in any other transit benefits from USAID or other Federal agencies.

If you are not a USAID employee, you must attach proof that you do not received transit benefits from your employing agency to this application.

Applicant 4 Signature

I certify that my answers are true and complete to the best of my knowledge. (Applicant 4)

Applicant 4 signature: _____