



# **TRANSIT BENEFIT PROGRAM APPLICATION SYSTEM DOI-BSEE APPLICANT USER GUIDE**



Submitted by

**TRANServe**

A division of the

**Office of Financial Management and Transit Benefit Programs**

**Office of the Secretary of Transportation**

**U.S. Department of Transportation**

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# 1. OVERVIEW

## 1.1 Background

The Department of Transportation, Transportation Services Division (TRANServe), administers the Transit Benefit Program for DOT and as Service Provider to other federal agencies, nation-wide. The Office currently supports federal agencies and sub-agencies, providing timely and efficient transit benefit program services to customers who will use TRANServe's Transit Benefit Application System. Services include purchasing and distributing mass transit fare media.

TRANServe's Electronic Application System serves as the publicly accessible interface for managing Transit Benefit Program Applications. The current application system is available on-line through the internet and is optimized for desktop and mobile devices. Federal government employees can apply for the transit benefit, request information, withdraw from the program and recertify. Agency Program Offices and Approvers are able to view, update, approve, or disapprove applications using the System.

## 1.2 Purpose

The Transit Benefit Application System user guide is designed to provide written instruction on how to use the application effectively and efficiently. Screenshots serve as examples. Field labels may not be Agency specific.

## 1.3 Document Organization

The following typographical conventions are used in this user guide:

- **Courier New Bold** Indicates a button on a page
- *Underline Italic in blue* Indicates a link within the system
- Title Case plus page Indicates a name of a page in the application
- *Italic text* Indicates a note on a page in the application

## 1.4 Points of Contact

The table below provides a list of contact for additional information regarding the Transit Benefit Application process.

| Role             | Name/Phone                | Title            | Email                 |
|------------------|---------------------------|------------------|-----------------------|
| Main Coordinator | Maria Zangos 703-787-1249 | Main Coordinator | Maria.Zangos@bsee.gov |

**PLEASE HAVE YOUR FUND/FUNCTIONAL AREA, COST CENTER CODE AND WBS CODES FROM YOUR SUPERVISOR BEFORE STARTING YOUR APPLICATION**

**ALL TRANSIT SUBSIDY PROGRAM PARTICIPANTS AND THEIR SUPERVISORS MUST COMPLETE THE DOI REQUIRED TRANSIT BENEFIT INTEGRITY AWARENESS TRAINING PRIOR TO THE PARTICIPANT ENROLLING INTO THE PROGRAM.**

**PLEASE VISIT [HTTP://TRANSERVE.DOT.GOV/PARTICIPANTS.HTML](http://transerve.dot.gov/participants.html), UNDER DOI-BSEE FOR LINKS TO THE TRAINING. YOUR TRAINING CERTIFICATES (PARTICIPANT AND SUPERVISOR CERTIFICATE) MUST BE EMAILED TO YOUR PROGRAM LOCAL COORDINATOR PRIOR TO THE APPROVAL OF YOUR APPLICATION.**

**THE LINK TO THE WEBSITE IS LOCATED HERE:**

- 1. ON THE TRANSERVE WEBSITE BELOW DOI-BSEE**
- 2. THIS LINK WILL TAKE YOU TO THE WEBPAGE WHERE YOU AND YOUR SUPERVISOR WILL FIND THE LINKS FOR YOUR REQUIRED TRAINING.**

## 2. ACCESSING THE TRANSIT BENEFIT APPLICATION

### 2.1 Login Screen

Use the following steps to access the application:

- a. Enter the URL: <https://transitapp.ost.dot.gov> . The Transit Benefit Application System home page is displayed.

The screenshot shows the login page of the Transit Benefit Application System. At the top, there is a header with the U.S. Department of Transportation logo on the left and the TRANSERVE logo on the right. Below the header, there is a login form with the following elements:

- A note: "\* Indicates required field."
- A "Login" section with a title bar.
- Two input fields: "\*User Name:" with a placeholder "Government Email Address" and "\*Password:" with a placeholder "Enter password".
- A "Log In" button.
- A "Forgot Password?" link.
- A "Not registered yet?" link with a "Register" button.
- A warning message: "\*\*WARNING\*\*WARNING\*\*WARNING\*\*".
- A paragraph of text: "You are accessing a U.S. Government information system, which includes this computer, the computer network on which it is connected, all other computers connected to this network, and all storage media connected to this computer or other computers on this network. This information system is provided for U.S. Government use only. Unauthorized or improper use of this information may result in disciplinary action, as well as civil and criminal penalties. By using this information system you consent to the following:"
- A numbered list item: "1. You have no reasonable expectation of privacy regarding any communications or data transiting this network or stored in this information system."
- A second warning message: "\*\*WARNING\*\*WARNING\*\*WARNING\*\*".
- A footer with the date: "Friday, January 15, 2016".

**Figure 1: Transit Benefit Application Log In page**

First time users must register. Use the following steps:

- b. Click the **Register** button. The Register Account Information page is displayed.

The screenshot shows the "Register Account Information" page. It contains the following fields and elements:

- A title bar: "Register Account Information".
- Five input fields: "\*User Name:" (placeholder "Government Email Address"), "\*First Name:" (placeholder "First Name"), "Middle Name:" (placeholder "Middle Name"), "\*Last Name:" (placeholder "Last Name"), and "\*Agency/Mode:" (dropdown menu with "VA" selected).
- A note: "Agency options will show once your Government Email Address has been validated".
- A "Phone Number:" input field.
- Three buttons at the bottom: "Register" (blue), "Reset" (orange), and "Cancel" (white).

**Figure 2: Register Account Information page**

**Note:** \* indicates required field.

- c. Enter your official **government email address** in the User Name textbox.
- d. Complete the registration form.

Register Account Information

\*User Name: kimberly.j.gravestest@va.gov

\*First Name: Kimberly

Middle Name: J

\*Last Name: Graves

\*Agency/Mode: VA

Agency options will show once your Government Email Address has been validated

Phone Number: (202) 555-4632

Register Reset Cancel

**Figure 3: Completed Registration page**

**Note:** The agency domain name used in the email for the username will determine the agency choices displayed in the Agency dropdown list.

- e. Click the **Register** button.
- f. The Login page is displayed with the confirmation message at the top of the page.

kimberly.j.gravestest@va.gov is now Registered

Thank you. The Login Password has been sent to kimberly.j.gravestest@va.gov.

**Figure 4: Registration Confirmation**

After the user has registered, an email is sent containing a temporary password. Use the temporary password to log into the application using the following steps:

- g. Enter your official government email address in the User Name textbox.
- h. Enter the temporary password in the Password textbox.

Login

\*User Name: kimberly.j.gravestest@va.gov

\*Password: \*\*\*\*\*

Log In Forgot Password?

Not registered yet? Register

\*\*\*WARNING\*\*\*WARNING\*\*\*WARNING\*\*\*

You are accessing a U.S. Government information system, which includes this computer, the computer network on which it is connected, all other computers connected to this network, and all storage media connected to this computer or other computers on this network. This information system is provided for U.S. Government use only. Unauthorized or improper use of this information may result in disciplinary action, as well as civil and criminal penalties. By using this information system you consent to the following:

1. You have no reasonable expectation of privacy regarding any communications or data transiting this network or stored in this information system.

\*\*\*WARNING\*\*\*WARNING\*\*\*WARNING\*\*\*

**Figure 5: Log In page**

- i. Click the **Log In** button.
- j. The Change Password page displays. Registered

## 2.2 Change Password

After logging into the application for the first time, you are required to change the password to something that you will easily remember.

1. Enter the temporary password in the Current Password textbox.

Change Password **Password Expired**

\*Current Password:

\*Create New Password:

\*Confirm New Password:

\*Create a Hint:

A hint is a meaningful personal association to help you remember your password.

Password must be at least 12 characters long  
No password character may be repeated more than 1 time(s) in sequence  
Password must contain characters from at least 4 of the following categories.

- Uppercase characters (A through Z)
- Lowercase characters (a through z)
- Base 10 digits (0 through 9)
- Non-alphabetic characters (for example, !, \$, %)

Password will expire 60 days after being set  
Passwords cannot be reused within the last 24 changes.

You will be redirected to the login page and will need to login with your new password

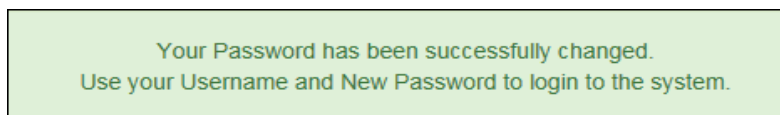
**Submit** **Cancel**

**Figure 6: Change Password page**

- a. Enter your new password in the Create New Password textbox.
- b. Minimum 12 characters
- c. Complexity: minimum of 1 uppercase, 1 lowercase, 1 number, 1 special character
- d. Do use two characters consecutively. Ex: password, 22, ##
- e. Reenter your new password in the Reenter New Password textbox.
- f. Enter a hint to remind you of your password in the Create a Hint textbox.
- g. Click the **Submit** button.

**Note:** \* indicates required field.

The confirmation message is displayed at the top of the Login page.



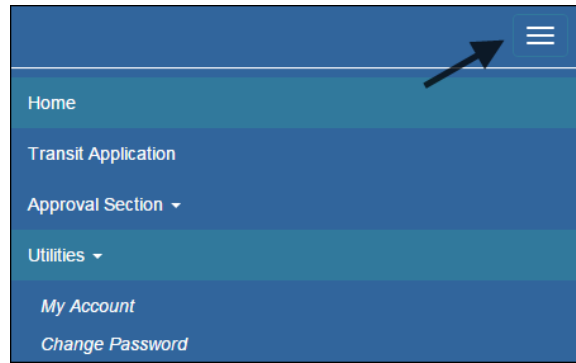
**Figure 7: Change Password Confirmation**

**Note:** Ensure that your password meets the system requirements when changing your login credentials. These requirements are displayed at the bottom of the Change Password page.

**Note:** The Password Expired label is only displayed when the password needs to be changed.

**Note:** You can change your password at any time by using the above steps after clicking the **Change Password** button on the Home page. The Change Password page can also be accessed from the Utilities dropdown menu located on the Menu bar at the top of the Home page.

**Note:** To access the additional Utilities menu options from a mobile device; click the additional menus button at the top of the page. Click the Utilities dropdown arrow to display the sub-menus.



**Figure 8: Utilities Menu Options**

## 2.3 Password Recovery

Use the following steps to recover your password.

1. From the Login page; click the [Forgot Password?](#) link. The Forgot Password page displays.

**Figure 9: Forgot Password page**

- a. The Show Hint section allows the user to view the Hint entered when the password was last changed. Enter the username and click the **Show Hint** button.
- ♦ The Forgot Password page is redisplayed with the Hint and allows the user to log in from this page.

**Figure 10: Show Hint**

- b. Send It By Email allows the user to retrieve a temporary password through email. The password is sent to the email address entered when the account was created. Enter your username and click the **Submit** button.

**Note:** \* indicates required field.

- ♦ The Login page displays. Enter the username and the retrieved password. Follow the instructions in **Section 2.2 Change Password** to change the password.

## 2.4 My Account

My Account allows the user to update personal information.

1. From the Home page; click the **My Account** button. The Update My Account Information page displays.

Update My Account Information

\*User Name:

\*First Name:  Middle Name:  \*Last Name:

\*Agency/Mode:  Agency options will show once your Government Email Address has been validated

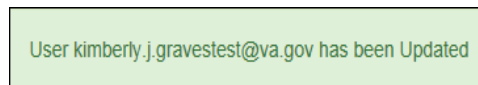
Phone Number:

Role: Applicant

**Figure 11: Update My Account page**

The information entered when the account was registered is pre-populated in the fields. Update the information as needed.

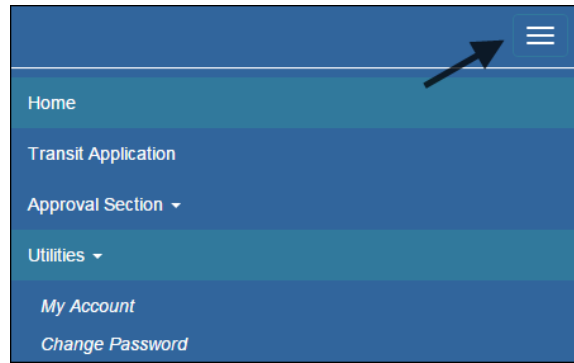
- a. Click the **Update** button to save the changes. The account information is updated and the Home page is displayed with a confirmation message at the top of the page.



**Figure 12: Update My Account Confirmation**

**Note:** You can update your account information at any time by using the above steps after clicking the **My Account** button on the Home page. The My Account page can also be accessed from the Utilities dropdown menu located on the Menu bar at the top of the Home page.

**Note:** To access the additional Utilities menu options from a mobile device; click the additional menus button at the top of the page. Click the Utilities dropdown arrow to display the sub-menus.



**Figure 13: Utilities Menu Options**

## 2.5 Session Time Out

If your session is inactive (i.e., you have not typed data into an existing page, requested a new page, submitted data, etc.) for 45 minutes, you will be automatically logged out.

## 2.6 Exit

- To exit the system from a desktop, click the **Logout** button on the home page.
- To exit the system from a mobile device, click the additional menu button  at the top of page. Click the Logout button. The Login page is displayed.

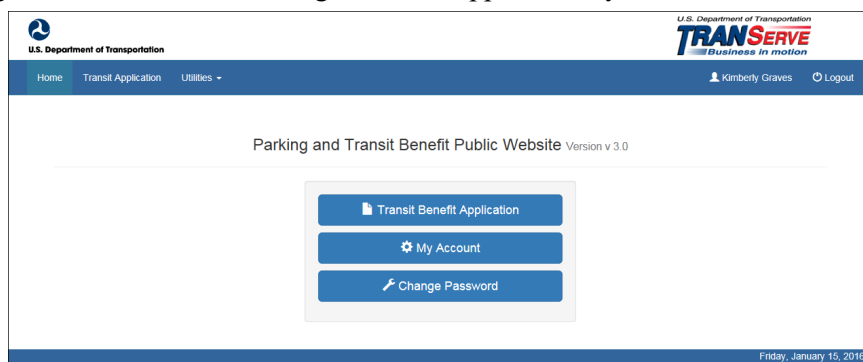
## 3. OVERVIEW OF THE HOME PAGE

The tabs and links available to you on the home page are determined by your assigned user role. User roles are assigned by TRANServe and the Agency Program Office.

The home page is divided into two sections:

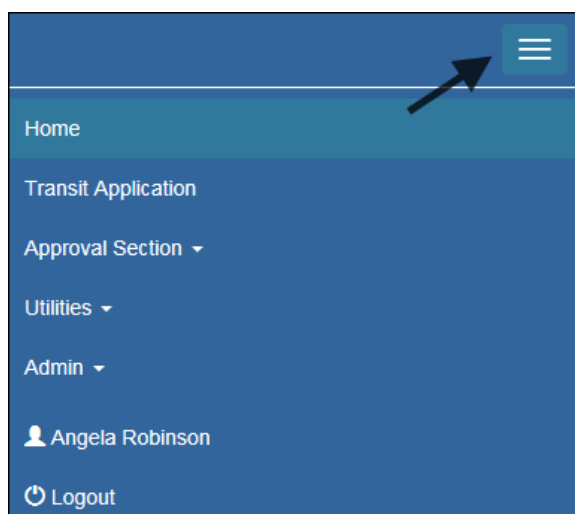
- The menu bar displays at the top of the page and displays the following:
  - ♦ Home – Click this tab to display the home page.
  - ♦ Transit Benefit Application – Click this tab to display the Select An Action To Continue page.
  - ♦ Utilities – Click this tab to display My Account and Change Password sub-menu options.
  - ♦ Admin – This functionality is only available for administrators. Click this tab to display User Admin and/or Role Admin sub-menu options.
  - ♦ Logout – Click this tab to logout of the application.
- The main section of the home page displays buttons representing functions you can execute within the application.

- ♦ Transit Benefit Application – Click this button to display the Select An Action To Continue page.
- ♦ My Account – Click this button to display the My Account page.
- ♦ Change Password – Click this button to display the Change Password page.
- ♦ Log Out – Click this link to log out of the application system.



**Figure 14: Website Home page**

**Note:** To access the additional menu options from a mobile device; click the additional menus button at the top of the page. The additional menu options are displayed. Applicants do not see all sections



**Figure 15: Additional Menu Options**

### 3.1 Transit Benefit Application

The Transit Benefit Application option allows the applicant to request information, withdraw from the program, make address and SmarTrip® changes, and to certify/enroll in the transit benefit program.

1. From the Home page; click the **Transit Benefit Application** button. The Select An Action To Continue page displays.

**Figure 16: Select An Action To Continue page**

### 3.1.1 Request Information

The applicant can request information from their DOI-BSEE Point of Contact by submitting questions regarding the transit benefit program or a submitted application through the Point of Contact (POC).

1. The Request Information radio button is selected by default when the page is displayed. Click the **Continue** button to display the Request Information page.

**Figure 17: Request Information page**

- a. If a POC has been selected it will pre-populate in the Point of Contact textbox. To select a POC, click the **Select** button to display the available POCs in a separate window.
- b. Select a POC from the list.
- c. Enter the question or concern in the Question textbox and click the **Send Request** button.
- d. An email is sent to the selected POC. The Home page is displayed with a confirmation message at the top of the page.

Thank you, your request has been sent.

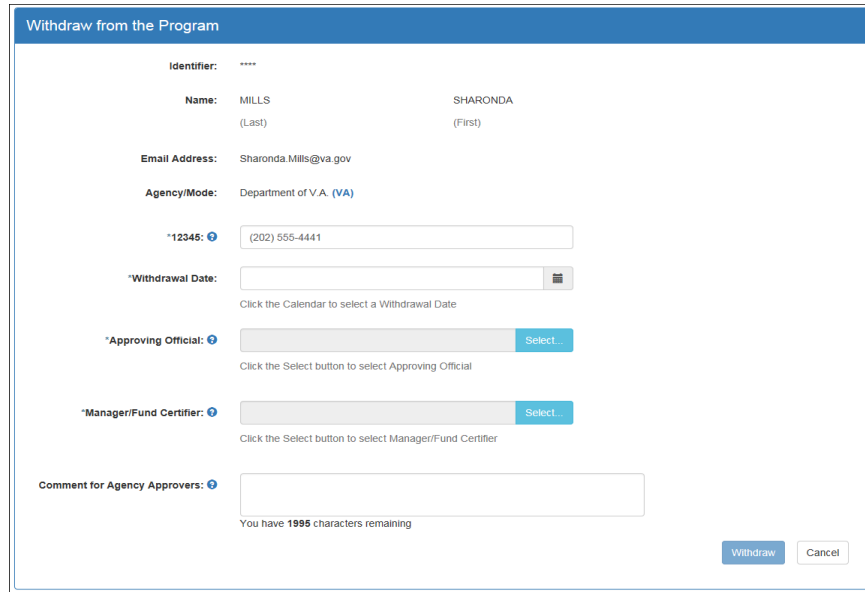
**Figure 18: Request Information Confirmation**

### 3.1.2 Withdraw from the Program

The applicant can submit a request to withdraw from the program at any time.

1. Select the Withdraw from the Program radio button.

- a. Click the **Continue** button. The Withdraw From The Program page is displayed.

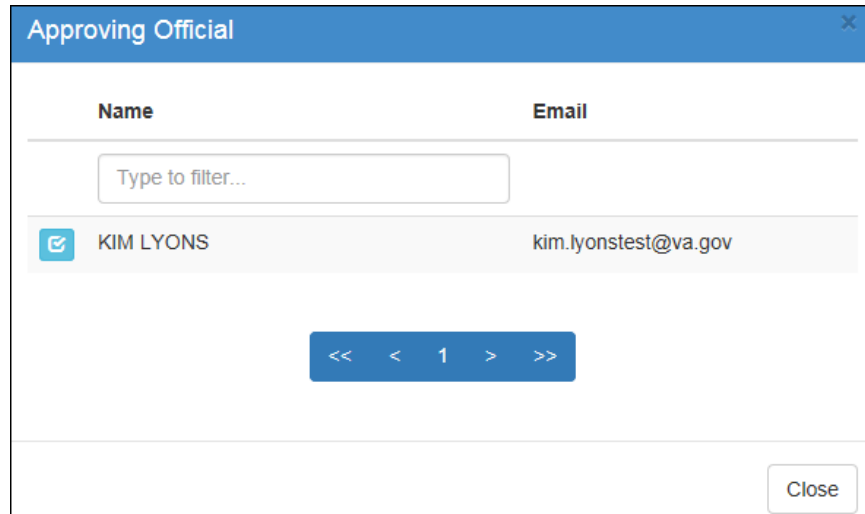


The 'Withdraw from the Program' form contains the following fields and controls:

- Identifier:** \*\*\*\*
- Name:** MILLS (Last) and SHARONDA (First)
- Email Address:** Sharonda.Mills@va.gov
- Agency/Mode:** Department of V.A. (VA)
- \*12345:** (202) 555-4441
- \*Withdrawal Date:** A date picker with a calendar icon and the instruction 'Click the Calendar to select a Withdrawal Date'.
- \*Approving Official:** A dropdown menu with a 'Select...' button and the instruction 'Click the Select button to select Approving Official'.
- \*Manager/Fund Certifier:** A dropdown menu with a 'Select...' button and the instruction 'Click the Select button to select Manager/Fund Certifier'.
- Comment for Agency Approvers:** A text area with a character count 'You have 1995 characters remaining'.
- Buttons:** 'Withdraw' and 'Cancel' at the bottom right.

**Figure 19: Withdraw From The Program page**

- b. Click the pop up calendar to select a withdrawal date.  
Click the **Select** button to display the list of supervisors.



The 'Approving Official' popup displays a list of supervisors with the following details:

| Name                                                                                          | Email                |
|-----------------------------------------------------------------------------------------------|----------------------|
| Type to filter...                                                                             |                      |
|  KIM LYONS | kim.lyonstest@va.gov |

Navigation controls at the bottom include: << < 1 > >> and a 'Close' button.

**Figure 20: Supervisors (1<sup>st</sup> Approver)**

- c. Select your Supervisor. If you do not see your supervisor: please contact your supervisor advise them to register, and contact your agency main coordinator for elevation. Information on page 1-1.
- d. Click the **Select** button to display the list for your agency's Local/Regional Coordinators.

The screenshot shows a window titled "Manager/Fund Certifier" with a close button (X) in the top right corner. Inside the window, there is a table with two columns: "Name" and "Email". Above the table is a search bar with the placeholder text "Type to filter...". The table contains two entries:

| Name            | Email                  |
|-----------------|------------------------|
| GLEN HARPERTEST | glen.harptest@va.gov   |
| JESSICA MARTIN  | jessica.martins@va.gov |

Below the table is a pagination control with buttons: "<<", "<", "1", ">", and ">>". At the bottom right of the window is a "Close" button.

**Figure 21: Local/Regional Coordinators (2<sup>nd</sup> Approver)**

- e. Select your Local/Regional Coordinator.
- f. Enter any information that will assist your Agency Approver with processing your application in the Comment for Agency Approvers textbox.
- g. Click the **Withdraw** button. The request is sent to TRANServe and a confirmation message is displayed at the top of the page.

Thank you, your application to Withdraw from the Program has been submitted.

**Figure 22: Withdraw Confirmation**

**Note:** The applicant must be enrolled in the Transit Benefit Program to withdraw. Registering a username does not mean that the applicant has enrolled in the program.

### 3.1.3 Address/SmarTrip® Change

The applicant can submit a request to update an address or SmarTrip® number (Washington DC-Region only). **DO NOT ENTER DEBIT CARD NUMBER**

1. Select the Address/ SmarTrip® radio button.
  - a. Click the **Continue** button. The Change Address/ SmarTrip® page is displayed.

**Address/Smartrip Change**

**General Information**

\*Identifier:

Name: MARTINS (Last) JESSICA (First)

Email Address: Jessica.martins@treas.gov

Agency: Department of Treasury (TRE-HQ)

Work Phone:

**Work Information**

Work Address:

Work City:  Work State:  Work Zip:

**Residence Information**

Address:

Address 2:

City:  State:  Zip:

**SmartTrip Information**

SmartTrip Card Number:

**Figure 23: Change Address/ SmartTrip® page**

- b. Update the applicable information. Only update the section that needs to be changed. You are not required to complete an entirely new application.
- c. Click the **Submit** button. The request is sent to TRANServe and a confirmation message is displayed at the top of the page.

Thank you, your Address/Smartrip Change Request has been submitted.

**Figure 24: Address/ SmartTrip® Confirmation**

**Note:** The applicant must be enrolled in the Transit Benefit Program to change address/ SmartTrip® information. Registering a username does not mean that the applicant has enrolled in the program.

### 3.1.4 Certify/Enroll

The Certify/Enroll allows the applicant to enroll in the transit benefit program by submitting an application.

1. Select the Certify/Enroll radio button.
  - a. Click the **Continue** button. The Warning page is displayed.

**WARNING !**

This certification concerns a matter within the jurisdiction of an agency of the United States. Making a false, fictitious, or fraudulent certification may constitute criminal violations punishable under Title 18, United States Code, Section 1001, by imprisonment up to five years and fines up to \$10,000 for each offense, and/or agency disciplinary actions up to and including dismissal.

- I certify that I am employed by the U.S. Federal Government..
- I certify that I am not named on a federally subsidized parking permit with any other federal agency.
- I certify that I am eligible for a public transportation fare benefit, will use it for my daily commute to and from work by public transit or vanpool, and will not give, sell, or transfer it to anyone else.
- I certify that in any given month, I will not use the Government-provided transit benefit in excess of the statutory limit. If my commuting costs per month on public transit exceed the month statutory limit, then I will supplement those additional costs with my own funds rather than use a Government-provided transit benefit designated for use in a future month.
- I certify that I will not claim the transit benefit in excess of my actual monthly commuting expense. If at anytime during a given month I am out of work due to sickness, vacation or any other reason, on official travel, or use a private vehicle for commuting, I will claim less and adjust the amount of my transit benefit the following month if appropriate.
- I certify that my parking fees are not included in the computation of the daily, weekly or monthly commuting costs for my transit benefit.

**Figure 25: Warning page**

- b. After reading the message; click the **I Agree** button. The Transit Benefit Application Worksheet is displayed.

**Note:** *If the applicant does not agree, click the **I Do Not Agree** button to display the Select An Action To Continue page.*

Certify/Enroll

☒ Transit Benefit Application Worksheet

All Transit Benefit Program Applicants are required to certify the **"Total Monthly Expense"** of their [Home to Work Mass Transit Commute](#).

**Parking fees are not eligible for the transit benefit and must not be included in "Total Monthly Expense".**

Instructions: To calculate your **"Total Monthly Expense"**

- Select your transportation method(s)
- Enter the following information in the "To Work" and "From Work" row(s) of each transportation method:
  - Name of Company for your method of transportation (Metro, BART, Subway)
  - Daily or Monthly Expense
  - Number of days you routinely work in a month
- If you purchase a Monthly pass, divide the price of the pass by 2, and enter the information in the Monthly Expense column.
- The Total Monthly Expense value automatically populates

Reason for Certification:
CivilianMilitary: CIVILIAN
Work Status: Full Time

☒ Transit Benefit Transportation Methods

Always follow your Agency work schedule policy for specific guidance on the Days per Month entry.

Defined work schedule examples:

- If you work a Basic schedule of 8-hours per day, the average amount of 20 Days can be entered into the Days per Month column
- If you work a Flex Schedule of 9-hours per day, the average amount of 18 Days can be entered into the Days per Month column
- If you work a Compressed schedule of 10-hour days, the average amount of 16 Days can be entered into the Days per Month column
- If you telecommute or work part time, enter the number of days you actually commute to/from work.

\*Select your transportation methods:

Bus
Other Bus
Rail
Other Method
Vanpool

Every Transit Benefit Program Participant is responsible to adjust the amount of their transit benefit each month to reflect the actual cost of their home to work commute.

Total Monthly Expense: \$

☒ Transit Benefit Program Application

Identifier:
Name: SHEPARD (Last) HANK (First) V (Middle)
Email Address: hank.shepardtesl@va.gov
Work Phone: (202) 555-7854
Common Identifier:

Department of V.A.

Select Your Agency: VA
Region:
Admin:
Populates from Select Your Agency
Accounting Code:
Click the Select button to select Accounting Code
Routing Symbol:
Click the Select button to select Routing Symbol
Location/Building:
Click the Select button to select Location/Building

I certify that my usual monthly transit commuting costs are: \$

This field is automatically calculated

Work Information
Work Address:
Work City:
Work State:
Work Zip:

Residence Information
Address:
Address 2:
City:
State:
Zip:

Approver Information
Approving Official:
Click the Select button to select Approving Official
Manager/Fund Certifier:
Click the Select button to select Manager/Fund Certifier
Point of Contact:
Click the Select button to select Point of Contact
Manager Phone:
SmartTrip Card Number:
Comment for Agency Approvers:
You have 1895 characters remaining

Continue
Cancel

**Figure 26: Transit Benefit Application Worksheet**

**Note:** \* indicates required field.

c. Select the reason for certification.

- ♦ Address or SmarTrip® Card Number Change – This selection is only used to make updates to the address or SmarTrip® card number. Do not select this reason if changing transportation amounts. This feature routes the application directly to TRANServe for faster processing.
- ♦ Agency Change
- ♦ Annual Certification/Recertification – This selection requires the applicant to certify to completion of the Transit Benefit Integrity Awareness training.
- ♦ Scan and email IntegrityTraining Certificate to the Local/Regional Coordinator.

Use the blue question mark next to each field for additional assistance. 

- ♦ New Transit Benefit Participant – This selection requires the applicant to certify to completion of the Transit Benefit Integrity training by scanning and emailing IntegrityTraining Certificate to the Local/Regional Coordinator.

Use the blue question mark next to each field for additional assistance. 

- ♦ Rate Change
- ♦ SmarTrip and Rate Change
- ♦ Select Employment Type. (This feature default to Civilian)
- ♦ Select your work status. (This feature defaults to Full Time)
- ♦ Full Time
- ♦ Part time
- ♦ Intern

d. Select your transportation method(s).

- ♦ Bus

|                                                                                                                                                                             |                      |                      |                      |                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|----------------------|--------------------------------|
| Bus to Work:                                                                                                                                                                | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/>           |
|                                                                                                                                                                             | Name of Company      | Daily Expense        | Days per Month       | Monthly Expense                |
| Bus from Work:                                                                                                                                                              | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/>           |
|                                                                                                                                                                             | Name of Company      | Daily Expense        | Days per Month       | Monthly Expense                |
| Other Bus to Work:                                                                                                                                                          | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/>           |
|                                                                                                                                                                             | Name of Company      | Daily Expense        | Days per Month       | Monthly Expense                |
| Other Bus from Work:                                                                                                                                                        | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/>           |
|                                                                                                                                                                             | Name of Company      | Daily Expense        | Days per Month       | Monthly Expense                |
| Every Transit Benefit Program Participant is responsible to adjust the amount of their transit benefit each month to reflect the actual cost of their home to work commute. |                      |                      |                      | Total Monthly Expense: \$ 0.00 |

**Figure 27: Bus Method**

- ♦ Other Bus

|                                                                                                                                                                             |                      |                      |                      |                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|----------------------|--------------------------------|
| Other Bus to Work:                                                                                                                                                          | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/>           |
|                                                                                                                                                                             | Name of Company      | Daily Expense        | Days per Month       | Monthly Expense                |
| Other Bus from Work:                                                                                                                                                        | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/>           |
|                                                                                                                                                                             | Name of Company      | Daily Expense        | Days per Month       | Monthly Expense                |
| Every Transit Benefit Program Participant is responsible to adjust the amount of their transit benefit each month to reflect the actual cost of their home to work commute. |                      |                      |                      | Total Monthly Expense: \$ 0.00 |

**Figure 28: Other Bus Method**

♦ Rail

|                                                                                                                                                                             |                      |                         |                      |                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------|----------------------|--------------------------------|
| Rail to Work:                                                                                                                                                               | <input type="text"/> | \$ <input type="text"/> | <input type="text"/> | \$ <input type="text"/>        |
|                                                                                                                                                                             | Name of Company      | Daily Expense           | Days per Month       | Monthly Expense                |
| Rail from Work:                                                                                                                                                             | <input type="text"/> | \$ <input type="text"/> | <input type="text"/> | \$ <input type="text"/>        |
|                                                                                                                                                                             | Name of Company      | Daily Expense           | Days per Month       | Monthly Expense                |
| Every Transit Benefit Program Participant is responsible to adjust the amount of their transit benefit each month to reflect the actual cost of their home to work commute. |                      |                         |                      | Total Monthly Expense: \$ 0.00 |

**Figure 29: Rail Method**

♦ Other Method

|                                                                                                                                                                             |                      |                         |                      |                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------|----------------------|--------------------------------|
| Other Method to Work                                                                                                                                                        | <input type="text"/> | \$ <input type="text"/> | <input type="text"/> | \$ <input type="text"/>        |
|                                                                                                                                                                             | Name of Company      | Daily Expense           | Days per Month       | Monthly Expense                |
| Other Method from Work                                                                                                                                                      | <input type="text"/> | \$ <input type="text"/> | <input type="text"/> | \$ <input type="text"/>        |
|                                                                                                                                                                             | Name of Company      | Daily Expense           | Days per Month       | Monthly Expense                |
| Every Transit Benefit Program Participant is responsible to adjust the amount of their transit benefit each month to reflect the actual cost of their home to work commute. |                      |                         |                      | Total Monthly Expense: \$ 0.00 |

**Figure 30: Other Method**

♦ Vanpool

|                                                                                                                                                                             |                      |                         |                      |                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------|----------------------|--------------------------------|
| Vanpool:                                                                                                                                                                    | <input type="text"/> | \$ <input type="text"/> | <input type="text"/> | \$ <input type="text"/>        |
|                                                                                                                                                                             | Name of Company      | Daily Expense           | Days per Month       | Monthly Expense                |
| Every Transit Benefit Program Participant is responsible to adjust the amount of their transit benefit each month to reflect the actual cost of their home to work commute. |                      |                         |                      | Total Monthly Expense: \$ 0.00 |

**Figure 31: Vanpool Method**

**Note:** If all of the methods of transportation are selected, all of the methods will display in one table.

**Note:** When filling out the method of transportation table, be sure to follow your Agency's work schedule policies.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Always follow your Agency work schedule policy for specific guidance on the Days per Month entry.                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Defined work schedule examples:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <ul style="list-style-type: none"><li>• If you work a Basic schedule of 8-hours per day, the average amount of 20 Days can be entered into the Days per Month column</li><li>• If you work a Flex Schedule of 9-hours per day, the average amount of 18 Days can be entered into the Days per Month column</li><li>• If you work a Compressed schedule of 10-hour days, the average amount of 16 Days can be entered into the Days per Month column</li><li>• If you telecommute or work part time, enter the number of days you actually commute to/from work.</li></ul> |

**Figure 32: Sample Agency Work Schedule Policies**

- Fill out the selected method of transportation table for every method routinely used (i.e. Bus and Rail)
- Enter the name of the Transit Authority-
- If monthly pass is purchased indicate next to name of the Transit Authority- example: RTD Monthly, Marta-Monthly.
- Enter Monthly cost
- Enter number of days per month (max 20) you commute home/work
- If daily pass is purchased enter in daily cost
- Enter number of days per month (max20) you commute home/work

|                                                                                                                                                                                            |                 |               |                |                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------|----------------|-----------------------------------------|
| Rail to Work:                                                                                                                                                                              | BTW             | \$ 3.20       | 16             | \$ 51.20                                |
|                                                                                                                                                                                            | Name of Company | Daily Expense | Days per Month | Monthly Expense                         |
| Rail from Work:                                                                                                                                                                            | BPW             | \$ 3.20       | 16             | \$ 51.20                                |
|                                                                                                                                                                                            | Name of Company | Daily Expense | Days per Month | Monthly Expense                         |
| <small>Every Transit Benefit Program Participant is responsible to adjust the amount of their transit benefit each month to reflect the actual cost of their home to work commute.</small> |                 |               |                | <b>Total Monthly Expense:</b> \$ 102.40 |

**Figure 33: Method of Transportation Table**

**Note:** The Monthly Expense and the Total Monthly Expense is automatically calculated when you enter the Daily Expense and the Days per Month.

- l. Enter the Identifier. This may be the last four digits of your social security number, your employee identification number or another indicator specified by your Agency. If not sure, you may check the help menu.
- m. Enter the Common Identifier. This is information used to activate the TRANServe Card. The card activation key may be a word phrase or number.

Use the blue question mark next to each field for additional assistance. ?

- n. Select the Region associated with your Point of Contact, refer to field below to find your region next to your Point of Contacts name:

**Approver Information**

|                                                    |                    |                                                            |              |
|----------------------------------------------------|--------------------|------------------------------------------------------------|--------------|
| *Supervisor: ?                                     | Select...          | *Local/Region Coordinator: ?                               | Select...    |
| Click the Select button to select Supervisor       |                    | Click the Select button to select Local/Region Coordinator |              |
| *Point of Contact: ?                               | HICKS, / Select... | Manager Phone:                                             | 202-366-6875 |
| Click the Select button to select Point of Contact |                    |                                                            |              |

- o. Admin will auto populate.
- p. Click the **Select** link to display a list of each portion of accounting for your agency, must update each portion.

|                                                     |           |   |
|-----------------------------------------------------|-----------|---|
| Cost Center: ?                                      | Select... | ← |
| Click the Select button to select Cost Center       |           |   |
| Physical Location: ?                                | Select... | ← |
| Click the Select button to select Physical Location |           |   |

Use the blue question mark next to each field for **additional assistance**. ?

- q. Enter your Work Information.
- r. Enter your Residence Information. (The address from which you routinely commute)
- s. Click the **Select** button to display the list of agency Supervisors. Only select your supervisor. Use the blue question mark next to each field for additional assistance. ?

Supervisor

| Name                     | Email                     |
|--------------------------|---------------------------|
| Type to filter...        |                           |
| ANITA PERSONIUS          | anita.personius@bia.gov   |
| ANN MARIE BLEDSOE DOWNES | ann.bledsoedownes@bia.gov |
| ANNA PARDO               | anna.pardo@bia.gov        |
| AUDREY SESSIONS          | audrey.sessions@bia.gov   |
| BRIAN TONIHKA            | brian.tonihka@bia.gov     |

<< < 1 2 3 4 5 > >>

Figure 34: Supervisor

- t. Select your Supervisor, if you do not see your supervisor, click on the blue question mark for directions.
- u. Click the **Select** button to display the list for your agency's Local/Regional Coordinators, if you do not see your Local/Regional Coordinator, click on the blue question mark for directions.

Local/Region Coordinator

| Name              | Email                     |
|-------------------|---------------------------|
| Type to filter... |                           |
| CORAZON DELAVEGA  | corazon.delavega@bia.gov  |
| ECHOHAWK NECONIE  | echo-hawk.neconie@bia.gov |
| EDWARD WERMY      | edward.wermy@bia.gov      |
| GARY HANSON       | gary.hanson@bia.gov       |
| IRA NEWBREAST     | ira.newbreast@bia.gov     |

<< < 1 2 > >>

Figure 35: Local/Regional Coordinator

- v. Select your Local/Regional Coordinator.
- w. Click the **Select** button to display the list for your agency's Points of Contact.

Point of Contact

| Name              | Region          | Email                     |
|-------------------|-----------------|---------------------------|
| Type to filter... |                 |                           |
| CANDACE HEATH     | ALBUQUERQUE     | GLORIA.TULLIE@BIA.GOV     |
| GARY HANSON       | ANCHORAGE, AK   | GARY.HANSON@BIA.GOV       |
| JOEN WHITE        | BILLINGS, MT    | Joen.White@bia.gov        |
| CYNTHIA METZ      | BOISE, ID       | CYNTHIA.METZ@BIA.GOV      |
| ECHOHAWK NECONIE  | CARSON CITY, NV | Echo-hawk.neconie@bia.gov |

<< < 1 2 3 4 > >>

Close

Figure 36: Points of Contact

- x. Select your Point of Contact- the same name as your Local/Regional Coordinator.

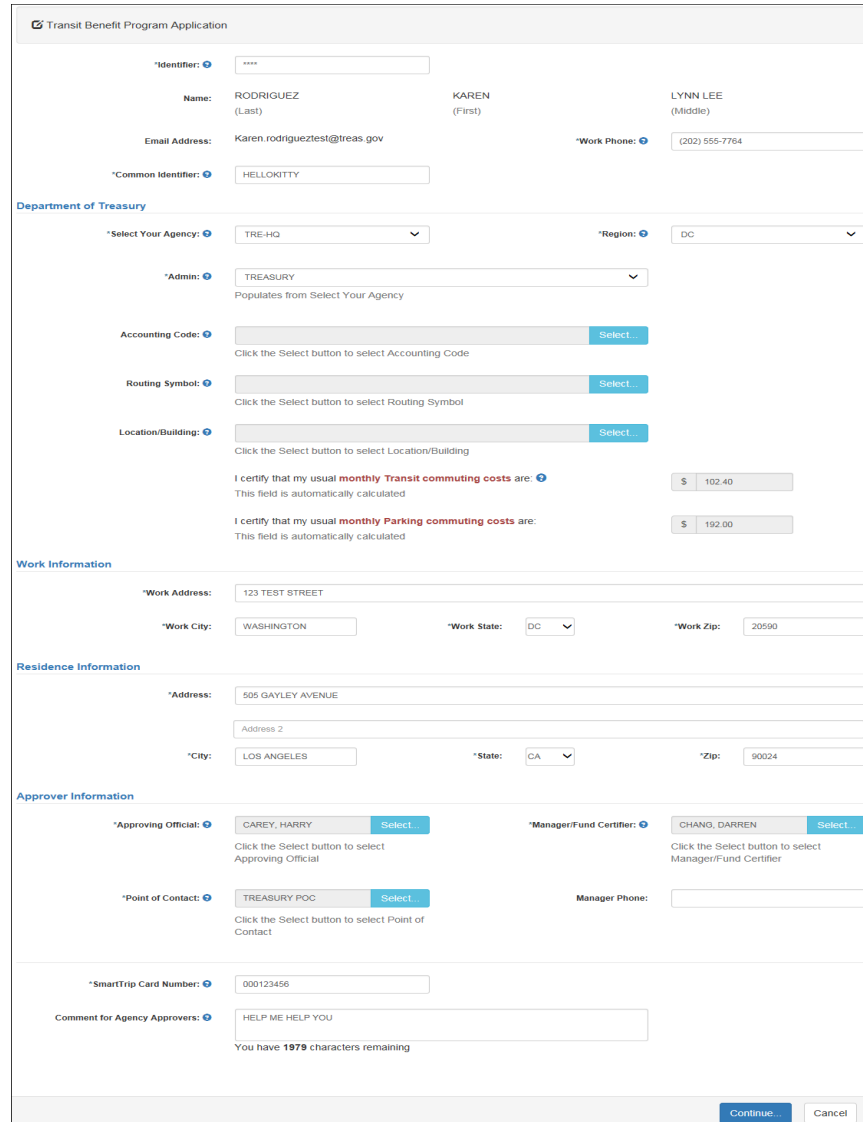
- y. For NCR participants – (Washington DC) enter your Reregistered SmarTrip® card information. Please click on the  to enter the correct format of card number. All Regional or Debit Card participants enter -NA. **DO NOT ENTER DEBIT CARD NUMBER.**

Type #1: 012345678 C3DW803 = **012345678**

Type #2: C3DW017 0020 0001 5644 364 6 = **015644364**

Type #3: GD1137 0167 0693 4564 7992 9601 = **01670693456479929601**

- z. Enter any information that will assist your Agency Approvers with processing your application in the Comment for Agency Approvers textbox.



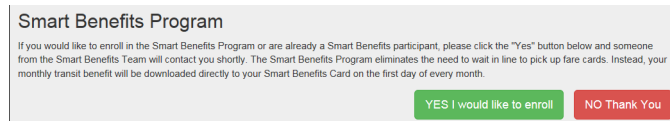
The screenshot displays a web form titled "Transit Benefit Program Application". The form is divided into several sections: "Department of Treasury", "Work Information", "Residence Information", and "Approver Information".

- Department of Treasury:** Includes fields for "Identifier" (with a help icon), "Name" (Last: RODRIGUEZ, First: KAREN, Middle: LYNN LEE), "Email Address" (Karen.rodriqueztest@treas.gov), "Common Identifier" (HELLOKITTY), "Select Your Agency" (TRE-HQ), "Region" (DC), "Admin" (TREASURY), "Accounting Code" (with a "Select..." button), "Routing Symbol" (with a "Select..." button), and "Location/Building" (with a "Select..." button). It also includes two certification fields for monthly commuting costs: "monthly Transit commuting costs" (\$ 102.40) and "monthly Parking commuting costs" (\$ 192.00).
- Work Information:** Includes fields for "Work Address" (123 TEST STREET), "Work City" (WASHINGTON), "Work State" (DC), and "Work Zip" (20590).
- Residence Information:** Includes fields for "Address" (505 GAYLEY AVENUE), "Address 2", "City" (LOS ANGELES), "State" (CA), and "Zip" (90024).
- Approver Information:** Includes fields for "Approving Official" (CAREY, HARRY), "Manager/Fund Certifier" (CHANG, DARREN), "Point of Contact" (TREASURY POC), and "Manager Phone".

At the bottom, there is a "SmartTrip Card Number" field (000123456) and a "Comment for Agency Approvers" text area (HELP ME HELP YOU) with a character count of 1979. The form concludes with "Continue" and "Cancel" buttons.

**Figure 37: Completed Transit Benefit Application**

- aa. Click the **Continue** button. The SmartBenefits® Program page is displayed, if you have selected the box that indicates you are a SmartBenefits Participant.



Smart Benefits Program

If you would like to enroll in the Smart Benefits Program or are already a Smart Benefits participant, please click the "Yes" button below and someone from the Smart Benefits Team will contact you shortly. The Smart Benefits Program eliminates the need to wait in line to pick up fare cards. Instead, your monthly transit benefit will be downloaded directly to your Smart Benefits Card on the first day of every month.

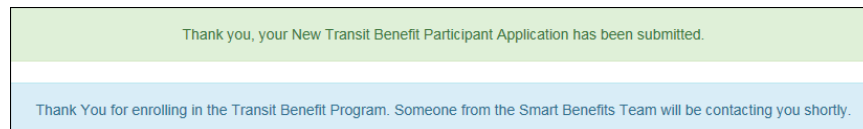
YES I would like to enroll NO Thank You

**Figure 38: SmartBenefits® Program page**

- bb. Click the **YES I would like to enroll** button to join the SmartBenefits® program. By clicking yes, you agree to have your transit benefit downloaded to your SmarTrip® card the first of every month. (Mandatory for methods that accept SmarTrip®)
- cc. Click the **NO Thank You** button if you do not want to join the SmartBenefits® program.

**Note:** Your Name, Email Address, Work Phone, and Agency/Mode are pre-populated with the information you entered when you registered. Verify that the information is correct.

- dd. After clicking the **YES** or **NO** button, a confirmation message is displayed.



Thank you, your New Transit Benefit Participant Application has been submitted.

Thank You for enrolling in the Transit Benefit Program. Someone from the Smart Benefits Team will be contacting you shortly.

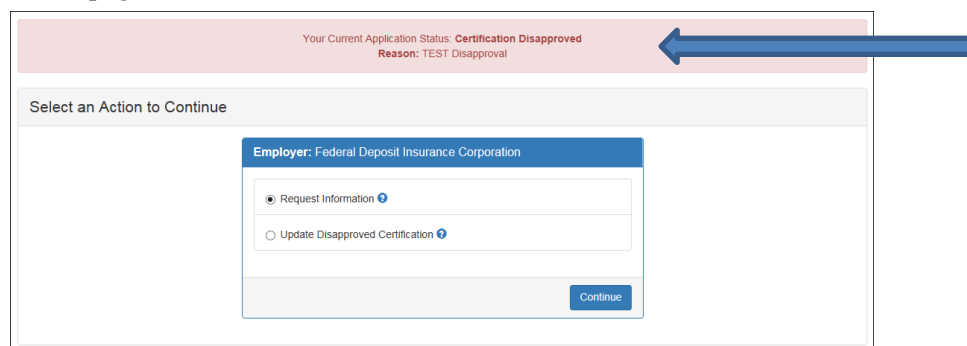
**Figure 39: Transit Benefit Program Confirmation**

**Note:** The SmartBenefits® program confirmation message is only displayed when the applicant enrolls in the SmartBenefits® program.

### 3.1.5 Disapproved Applications

Disapproved Applications are sent back to the applicant. The applicant must make corrections and resubmit the application to continue the application approval process.

1. From the Home page; click the **Transit Benefit Application** button. The Select An Action To Continue page displays. The reason the application was disapproved is displayed at the top of the page.



Your Current Application Status: **Certification Disapproved**  
Reason: TEST Disapproval

Select an Action to Continue

Employer: Federal Deposit Insurance Corporation

☒ Request Information ⓘ

☐ Update Disapproved Certification ⓘ

Continue

**Figure 40: Select An Action To Continue page**

- a. Select the Update Disapproved Application radio button.
- b. Click the **Continue** button. The Warning page is displayed.

**WARNING !**

This certification concerns a matter within the jurisdiction of an agency of the United States. Making a false, fictitious, or fraudulent certification may constitute criminal violations punishable under Title 18, United States Code, Section 1001, by imprisonment up to five years and fines up to \$10,000 for each offense, and/or agency disciplinary actions up to and including dismissal.

- I certify that I am employed by the U.S. Federal Government...
- I certify that I am not named on a federally subsidized parking permit with any other federal agency.
- I certify that I am eligible for a public transportation fare benefit, will use it for my daily commute to and from work by public transit or vanpool, and will not give, sell, or transfer it to anyone else.
- I certify that in any given month, I will not use the Government-provided transit benefit in excess of the statutory limit. If my commuting costs per month on public transit exceed the month statutory limit, then I will supplement those additional costs with my own funds rather than use a Government-provided transit benefit designated for use in a future month.
- I certify that I will not claim the transit benefit in excess of my actual monthly commuting expense. If at anytime during a given month I am out of work due to sickness, vacation or any other reason, on official travel, or use a private vehicle for commuting, I will claim less and adjust the amount of my transit benefit the following month if appropriate.
- I certify that my parking fees are not included in the computation of the daily, weekly or monthly commuting costs for my transit benefit.

**Figure 41: Warning page**

- c. After reading the message; click the **I Agree** button. The disapproved Transit Benefit Application Worksheet is displayed.
- Note:** *If the applicant does not agree, click the **I Do Not Agree** button to return to the Select An Action To Continue page.*

Delete Application and Start Over

**Disapproved Reason:** trace

\* Indicates required field

**Certify/Enroll**   Status: Certification Disapproved

**Transit Benefit Application Worksheet**

All Transit Benefit Program Applicants are required to certify the **"Total Monthly Expense"** of their **Home to Work Mass Transit Commute**.

**Parking fees are not eligible for the transit benefit and must not be included in "Total Monthly Expense".**

Instructions: To calculate your **"Total Monthly Expense"**

- Select your transportation method(s)
- Enter the following information in the "To Work" and "From Work" row(s) of each transportation method:
  - Name of Company for your method of transportation (Metro, BART, Subway)
  - Daily or Monthly Expense
  - Number of days you routinely work in a month
- If you purchase a Monthly pass, divide the price of the pass by 2, and enter the information in the Monthly Expense column.
- The Total Monthly Expense value automatically populates

\*Reason for Certification: Rate Change

Civilian/Military: CIVILIAN

Work Status: Full Time

**Transit Benefit Transportation Methods**

Always follow your Agency work schedule policy for specific guidance on the Days per Month entry.

Defined work schedule examples:

- If you work a basic schedule of 8-hours per day, the average amount of 20 Days can be entered into the Days per Month column
- If you work a Flex Schedule of 8-hours per day, the average amount of 10 Days can be entered into the Days per Month column
- If you work a Compressed schedule of 10-hour days, the average amount of 16 Days can be entered into the Days per Month column
- If you telecommute or work part time, enter the number of days you actually commute to/from work.

\*Select your transportation method:

Bus
Other Bus
Rail
Other Method
Vanpool

|                       |                                                                |                                |                                                                    |                              |                                                               |                               |                                                                     |                                |
|-----------------------|----------------------------------------------------------------|--------------------------------|--------------------------------------------------------------------|------------------------------|---------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------|--------------------------------|
| <b>Bus to Work:</b>   | <span style="border: 1px solid #ccc; padding: 2px;">BFW</span> | <small>Name of Company</small> | <span style="border: 1px solid #ccc; padding: 2px;">\$ 4.50</span> | <small>Daily Expense</small> | <span style="border: 1px solid #ccc; padding: 2px;">16</span> | <small>Days per Month</small> | <span style="border: 1px solid #ccc; padding: 2px;">\$ 72.00</span> | <small>Monthly Expense</small> |
|                       |                                                                |                                |                                                                    |                              |                                                               |                               |                                                                     |                                |
| <b>Bus from Work:</b> | <span style="border: 1px solid #ccc; padding: 2px;">BFW</span> | <small>Name of Company</small> | <span style="border: 1px solid #ccc; padding: 2px;">\$ 4.50</span> | <small>Daily Expense</small> | <span style="border: 1px solid #ccc; padding: 2px;">16</span> | <small>Days per Month</small> | <span style="border: 1px solid #ccc; padding: 2px;">\$ 72.00</span> | <small>Monthly Expense</small> |
|                       |                                                                |                                |                                                                    |                              |                                                               |                               |                                                                     |                                |

**Every Transit Benefit Program Participant is responsible to adjust the amount of their transit benefit each month to reflect the actual cost of their home to work commute.**

**Total Monthly Expense:** \$ 144.00

**Transit Benefit Program Application**

**Disapproved Reason:** trace

\*Identifier: ----

Name: TESTON (Last) TRACEY (First)

Email Address: Tracey.Teston@fdic.gov \*Work Phone: (410) 555-4654

\*Common Identifier: 3435DFBD

**Federal Deposit Insurance Corporation**

\*Select Your Agency: FDIC \*Region: DC

\*Admin: DC Populates from Select Your Agency

Accounting Code:  Select

Click the Select button to select Accounting Code

I certify that my usual **monthly transit commuting costs** are: \$ 144.00

This field is automatically calculated

☐ I acknowledge my commuting costs are above the current \$150.00 tax free limit and fully understand I will be responsible for paying taxes on the amount I use that exceeds the current tax free limit.

☐ I do not want my monthly funded commuting benefit to exceed the current Transit statutory tax free limit.

**Work Information**

\*Work Address: 854 MERIDETH COURT

\*Work City: WASHINGTON \*Work State: DC \*Work Zip: 52047

**Residence Information**

\*Address: BREAKFAST CLUB DRIVE

Address 2:

\*City: HYATTSVILLE \*State: MD \*Zip: 20855

**Approver Information**

\*Approving Official: MATTHEW PALMERTON Select

Click the Select button to select Approving Official

\*Point of Contact: WILLIAM JEFFERSON Select

Click the Select button to select Point of Contact

\*Manager/Fund Certifier: JASPER KENDALL Select

Click the Select button to select Manager/Fund Certifier

Manager Phone:

\*SmartTrip Card Number: NA

Comment for Agency Approver:

You have 1996 characters remaining

Continue
Cancel

**Figure 42: Disapproved Transit Benefit Application Worksheet**

- ♦ The reason the application was disapproved is displayed at the top of the Transit Benefit Application Worksheet and the Transit Benefit Program Application.
- ♦ The information the applicant entered when the application was submitted is displayed. Make the required corrections and resubmit the application by clicking the **Continue** button.

Click the **Delete Application and Start Over** button to delete the existing application. Doing this will revert the application back to the last submitted application. If this is your first application using this system, only the Profile information will display.

## APPENDIX A: SMARTRIP CARD INSTRUCTIONS

For SmartBenefit Participants: Purchase and Register a SmarTrip® card

SmarTrip® card usage is mandatory for all participants in the National Capital Region.

1. Purchase a SmarTrip® Card – This is a reloadable electronic fare card. Using a reloadable card supports government initiatives to support and improve the environment through more sustainable practices.
  - ♦ a. You can purchase at a Metro Sales Store, Station Kiosk (these are located in Stations where parking is available, a Commuter Store and many retail establishments.

**Note:** Look here for more information on locations: <http://www.wmata.com/fares/purchase/where.cfm>

- ♦ You can also purchase a SmarTrip® Card on line: <http://www.wmata.com/fares/purchase/>

**Note:** An online order requires you to provide a shipping address which must match the billing address on line with your credit card provider.

- a. Create a Personal Account to register your SmarTrip® Card. You must register your SmarTrip® card with WMATA in order to receive your transit benefit electronically. Registration may take up to 48 hours to be reflected in the WMATA system. An additional benefit of registering your card is to protect the funds on the card. If lost or stolen you may cancel the card. After you replace your SmarTrip® card, you can transfer the funds to the new card.
- ♦ Register your SmarTrip® card here: <https://SmarTrip.wmata.com/Registration/Register.aspx>
  - ♦ You must indicate the type of card by matching the serial number on the back with the pattern that is circled below:

Type #1: 012345678 C3DW803 = **012345678**

Type #2: C3DW017 0020 0001 5644 364 6 = **015644364**

Type #3: GD1137 0167 0693 4564 7992 9601 = **01670693456479929601**

TIP 1: Enlarge the number on a Xerox machine and attach to your application

TIP 2: If your SmarTrip® (or CharmCard) serial number is fewer than nine (9) digits, you need to add zero(s) to the front to make it nine (9) digits.