

**CARSON CITY REGIONAL TRANSPORTATION COMMISSION  
REQUEST FOR COMMISSION ACTION**

**Date Submitted:** October 27, 2009

**Meeting Date:** November 4, 2009

**To:** Regional Transportation Commission

**From:** Patrick Pittenger, Transportation Manager

**Subject Title:** Action to approve the proposed JAC Assist ADA Paratransit Policy.

**Staff Summary:** Staff is proposing the JAC Assist ADA Paratransit Policy to clarify the JAC Assist paratransit service as an origin to destination service, the roles and responsibilities of the drivers and passengers, limit service to within  $\frac{3}{4}$  of a mile of a regular fixed route, and update the application forms. This policy complies with FTA regulations and allows staff to address abuse of service and misconduct.

**Type of Action Requested:** (check one)

- (  ) None – Information Only
- (  ) Formal Action/Motion

**Recommended Commission Action:** I move to approve the proposed JAC Assist ADA Paratransit Policy.

**Explanation for Recommended Commission Action:** The JAC Assist ADA Paratransit Policy clarifies services, area serviced, and the application process. A 60-day public comment period was held. In addition, a public informational meeting was held to allow the general public to review the proposed policy and submit comments to and/or ask questions of staff. If approved, this policy will become in effect December 1, 2009 and existing clients will have six months - until June 1, 2010 - to re-certify with the JAC Assist program.

The policy was reviewed by Federal Transit Administration (FTA) representatives during their site visit, and they only requested one change. The one requested change, which was included in the version proposed for approval, was to clarify the party making initial eligibility determinations.

**Applicable Statue, Code, Rule or Policy:** N/A

**Fiscal Impact:** Potential reduction in paratransit service costs.

**Explanation of Impact:** Reduction to the required service area.

**Funding Source:** FTA 5307 and local funds.

**Alternatives:** Modify proposed policy.

**Supporting Material:** JAC Assist ADA Paratransit Policy.

**Prepared By:** Patrick Pittenger, Transportation Manager

**Commission Action Taken:**

Motion: \_\_\_\_\_ 1) \_\_\_\_\_ Aye/Nay  
2) \_\_\_\_\_ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ (Vote Recorded By)



**JAC Assist**  
**ADA Paratransit Policy & Procedures**

**EFFECTIVE: December 1, 2009**

## TABLE OF CONTENTS

OVERVIEW	1
CERTIFICATION / ELIGIBILITY	1
TYPES OF ELIGIBILITY	2
JAC ASSIST PHOTO IDENTIFICATION CARDS	2
RECERTIFICATION	3
CERTIFICATION APPEALS PROCESS	3
VISITORS WITH DISABILITIES	3
CONDITIONAL USE AND TRIP BY TRIP ELIGIBLE RIDES	4
SERVICE HOURS AND AREA	4
FARES	4
TRIP RESERVATIONS AND CANCELLATIONS	5
HOW TO MAKE A RESERVATION	5
Plan Ahead	5
Plan Your Trip Carefully	5
To Schedule a Ride	6
Children	7
Use of Portable Oxygen	7
Service Animals	8
Pets	8
Please Keep in Mind	8
HOW TO RIDE JAC ASSIST	8
DRIVER ASSISTANCE POLICY	9
WHAT TO DO IF YOU MISS YOUR RIDE	9
HOW CAN JAC ASSIST ACCOMMODATE YOU?	10
HOW TO COMMENT ON JAC ASSIST SERVICE	10
SAFETY	10
CONTAGIOUS ILLNESSES	11
CUSTOMER CODE OF CONDUCT	11
Consequences of Misconduct	11
Consequences of Unintentional Misconduct	12
JAC ASSIST NO-SHOW AND LATE CANCELLATION POLICY	12
JAC ASSIST EXCESSIVE CANCELLATION POLICY	13
ACTIONS RESULTING FROM NO-SHOW, EXCESSIVE CANCELLATION, LATE CANCELLATION	13
APPENDIX A – GLOSSARY	14
APPENDIX B – APPEALS PROCESS	16
APPENDIX C – MAP	18
APPENDIX D – COMPLAINT PROCESS	19
APPENDIX E – DEFINITION OF DISABILITY	20

## **OVERVIEW**

The JAC Assist paratransit service serves the needs of passengers who, because of a disability, are unable to use the JAC Transit System's regular fixed-route system, and who meet the criteria established by the U.S. Department of Transportation under the Americans with Disabilities Act (ADA) of 1990.

Disability alone does not establish paratransit service eligibility; the decision is based solely on the applicant's functional ability to use the regular fixed-route transit service. The JAC Assist paratransit service is for those who do not have the functional abilities to access and ride the regular fixed-route transit service.

JAC Assist paratransit service is an "origin to destination" and shared ride service.

If you need additional information, alternative formats, or have any questions please feel free to contact JAC Assist at (775) 841-7433.

## **CERTIFICATION / ELIGIBILITY**

In order to ride JAC Assist, you must first be certified. To become certified, you must complete a JAC Assist Application form. Application forms are available online at [www.rideJAC.com](http://www.rideJAC.com) or by calling (775) 841-7433. All potential passengers must complete PART A of the application. PART B of the application form must be completed by a qualified professional. Applications that are completed will be reviewed within 21 calendar days of submission. Acceptable qualified professionals are:

- Physician (M.D. or D.O.) or registered nurse
- Physical or occupational therapist
- Psychiatrist, psychologist, or mental health counselor
- Vocational counselor, rehabilitation specialist or independent living skills trainer
- Licensed social worker or case manager
- Orientation and mobility instructor or travel trainer
- Optometrist

Applicants are to use qualified professionals who are familiar with your particular disability and current functional abilities to use regular fixed-route service.

**Initial eligibility determinations will be made by the on-site contract manager of the JAC Transit System. If that person is not available in a timely manner, eligibility determinations will be made by the Operations Manager. Once you are eligible, you must notify the JAC Transit System of any changes in your address, phone number, or disability.**

## **TYPES OF ELIGIBILITY**

Applicants who are determined eligible for JAC Assist paratransit service are assigned an eligibility category. The eligibility category is consistent with the applicant's ability to use the regular fixed-route service. These categories are Unconditional, Conditional, Trip-by-Trip, and Temporary.

**UNCONDITIONAL** – Applicant is not able to use accessible JAC regular fixed-route transit service under any circumstances and is eligible for all trips on JAC Assist paratransit service.

**CONDITIONAL** – Applicant is not able to use accessible JAC regular fixed-route transit service in specific circumstances and is eligible to use JAC Assist paratransit service under limited circumstances identified by the JAC Transit System.

**TRIP-by-TRIP** – Applicant is not able to use accessible JAC regular fixed-route transit service for certain trips due to architectural and/or environmental barriers. The applicant is eligible to use JAC Assist paratransit service for those specific trips identified by JAC Transit System.

**TEMPORARY** – Applicant is not able to use accessible JAC regular fixed-route transit service at this time, however the condition or circumstances leading to eligibility is reasonably expected to change in the future. For a limited period of time, the applicant is typically eligible to use JAC Assist paratransit service for all trips.

Distance to a bus stop or illiteracy by themselves, are not considered disabilities and therefore do not qualify the applicant for JAC Assist paratransit service. Applicants who are blind or visually impaired may be eligible if they cannot use the regular fixed-route JAC Transit System. Applicants with medical conditions, such as epilepsy, kidney disorders, and diabetes, may be eligible depending upon their ability to use the regular fixed-route JAC Transit System.

## **JAC ASSIST PHOTO IDENTIFICATION CARDS**

Once certified, the JAC Transit System will issue a photo identification card. The identification cards may be used on regular fixed-route service to receive a reduced fare or for ADA paratransit service in other U.S. cities.

To obtain a valid JAC Transit System identification card, you must call (775) 841-7433 to schedule an appointment to have your picture taken and a free photo identification card issued. Individuals must bring with them proof of JAC Assist certification and personal identity to have an identification card issued.

Photo identification cards are issued at the JAC Administrative Offices at 3303 Butti Way, Carson City, NV 89701. Office hours are 8:00 A.M. to 5:00 P.M. Monday – Friday, 8:00 A.M. to 4:30 P.M. Saturdays. There is a \$5.00 replacement charge for lost or damaged cards.

### **RECERTIFICATION**

In order to keep the database of certified passengers current passengers will need to recertify eligibility every three (3) years. All current passengers will have until April 1, 2010 to recertify to be eligible for JAC Assist paratransit service. During this process, current passengers will be able to continue to schedule trips and utilize the service. However, those current passengers that do not recertify by April 1, 2010, will no longer be able to utilize JAC Assist paratransit service. JAC Assist will attempt to contact all certified passengers 90 days in advance of the expiration of the certification of eligibility.

Conditional use passengers that are certified for service on a “temporary” basis will be required to recertify at the end of their temporary period of eligibility if they desire to maintain eligibility of service. Passengers must complete a new application and participate in another evaluation by a qualified professional.

Persons with permanent disabilities are required to obtain professional verification of their disability to become initially certified. Thereafter recertification will only require that PART A be completed indicating they still desire to utilize the paratransit service. Professional verification will not be required for recertification.

### **CERTIFICATION APPEALS PROCESS**

Applicants whose requests for certification are denied have the right to appeal. Such appeal must be submitted within sixty (60) days from the date of certification denial. The appeal will be considered by the ADA Eligibility Certification Review Board made up of three (3) persons, one of whom will have a familiarity of the disability in question. For more information, contact JAC Assist at (775) 841-7433, see Appendix B.

### **VISITORS WITH DISABILITIES**

Visitors with disabilities who cannot use the regular fixed-route system are eligible to utilize the JAC Assist paratransit service. If the visitor has been certified as “ADA paratransit eligible” by a public entity, the JAC Transit System will honor the certification and will provide up to 21 days of JAC Assist paratransit service. If visitors have not been certified as eligible by another public entity but claim they are ADA paratransit eligible, they are entitled to “presumptive eligibility” and shall be provided with 21 days of JAC Assist paratransit service. Visitors who are not certified by another transit provider and who claim

presumptive eligibility may be requested to provide certain documentation such as their place of residence and the nature of their disability to the JAC Transit System.

The “21 days” of service that shall be provided to visitors with disabilities are to be calculated as any combination of 21 days during any 365 day period beginning with the visitor’s first use of service. For example, a person may visit two days a week. Eligibility would be extended in this case over the eleven week period of time within which 21 days of JAC Assist paratransit service would be offered.

Visitors who require more than 21 days of service within a 365 day period shall be required to apply for local eligibility through the JAC Assist certification process.

Visitors with disabilities shall be provided the same level of service as certified JAC Assist passengers and are subject to the same service policy requirements.

### **CONDITIONAL USE AND TRIP BY TRIP ELIGIBLE RIDES**

The JAC Transit System schedulers will evaluate the eligibility of trip requests for service by passengers certified as Conditional or Trip by Trip at the time of scheduling according to the conditions listed in their certification. Schedulers will immediately inform the person scheduling the ride if the trip is deemed eligible based on conditions listed in their certification. If the trip is found to not be eligible, schedulers are to inform the passenger about the availability of fixed-route JAC service as a viable option to complete the trip.

### **SERVICE HOURS AND AREA**

The JAC Assist paratransit services are available during regular days and operation of the JAC regular fixed route system, which at the time of the adoption of this policy is Monday through Friday, 6:30 A.M. to 6:30 P.M. and Saturday 8:30 A.M. to 4:30 P.M. No service on Sunday or designated holidays. Service is available for trips beginning and ending within three-quarters (3/4) of mile on each side of each regular fixed-route of the JAC Transit System, see Appendix C. For more information, call (775) 841-7433.

### **FARES**

Fares are no more than 200% of the cost of an adult regular fixed-route fare for each one-way trip. One Personal Care Attendant (PCA) can travel at no additional cost.

Passengers are required to pay exact fare upon boarding a JAC Assist vehicle prior to departure. The fare must be paid in exact cash as the driver does not

carry cash and cannot make change. Checks, ATM or credit cards are not accepted. JAC Assist passes can be used. Non-payment of fares will result in a denial of your trip.

For more information on JAC Assist passes, call (775) 841-7433.

### **TRIP RESERVATIONS AND CANCELLATIONS**

For reservations or cancellations call (775) 841-7433 from 8:00 A.M. to 5:00 P.M. Monday through Saturday. Calls on Sunday or after hours will be taken by voicemail.

Reservations can be made up to two (2) weeks to one (1) day in advance. Requests for next-day service received after 5:00 P.M. and same-day service will be accommodated as space is available.

### **HOW TO MAKE A RESERVATION**

#### **Plan Ahead:**

For the most important trips be sure to make your reservation as early as possible, up to two (2) weeks in advance. The earlier you schedule your ride, the better opportunity to get your requested trip without negotiation. If your requested time is not available you may be offered a negotiated time of up to one hour before or after your request. If an available time within those guidelines is not workable for you, have an alternate plan for other transportation or for rescheduling at another time or day. Refusal of an available negotiated time is not considered a denial of service.

If your pick-up is at an apartment complex, nursing home, or adult program/day care center, it is the responsibility of the passenger to let the scheduler know if there are any special instructions needed, such as, security gated entries, apartment building number, or multiple entries to large institutions. Otherwise JAC Assist drivers will pick-up and drop-off at the main entrance or designated/predetermined locations. If the passenger fails to inform the scheduler of special instructions and the trip is missed as a result, it will be recorded as a "no-show".

#### **Plan Your Trip Carefully:**

Remember to allow up to 45 minutes for time spent picking up and dropping off other passengers before reaching your destination and be prepared for the possibility of delays due to traffic or bad weather. For example, if you must be somewhere at 10:00 A.M., plan your pickup for 9:00 A.M. When scheduling a return trip, please consider any unexpected delays you may encounter. For example, if you expect to be ready at 3:00 P.M., please ask for a 3:45 P.M. return time. At a minimum, if you are sure that no delays will occur when conducting your business, please remember to allow for a 15 minute window and schedule

your pick-up for 3:15 P.M., which means the bus could arrive as early as 3:00 P.M. It is better to wait a few minutes than miss your scheduled ride. The JAC Assist scheduler can help determine the most efficient use of passenger's time.

Allow ample time to finish appointments. This is needed so you will be ready to board the vehicle at your scheduled pick-up time. **Be aware of opening and closing times at your destination to avoid waiting outside the building before or after business hours.**

If you are going to a doctor's office or other medical appointment, let the person who is making your medical appointment know you will be using JAC Assist paratransit service. **Ask the appointment scheduler how much time should be allowed for the appointment**, this will help you to set your return time. Please allow enough time for your appointments. If you miss your ride home because you under-estimated how long the appointment will take, the needs of other paratransit passengers may not allow JAC Assist to make a second trip for pick-up. In this case, you will need to find alternative transportation home. If JAC Assist is able to return a second time, the needs of other customers may require that you wait additional time after you have completed your appointment. In this case, please be patient. **It is your responsibility to determine with your Doctor, how much time to allow for medical appointments.**

#### **To Schedule a Ride:**

JAC Assist may be reached at (775) 841-7433 between 8:00 A.M. to 5:00 P.M. Monday through Saturday. Calls on Sunday or after hours will be taken by voicemail.

- 1) Reservations can be made up to two (2) weeks to one (1) day in advance. Requests for next-day service received after 5:00 P.M. will be accommodated as space is available.
- 2) Same day reservations may be available if space is available.
- 3) When making a reservation, we urge you to schedule a time for your return trip. Waiting until the last minute to schedule a return trip could result in a long wait.
- 4) Staff will try to accommodate changes made to a reservation after 5:00 P.M. the day before your trip, but there is no guarantee.
- 5) When making a reservation, please be ready to provide:
  - Your name;
  - Your pick-up address (exact location of pick-up; for example, apartment building name, which entrance, etc.);
  - Your telephone number;
  - The date on which you wish to ride;
  - The time at which you wish to be picked up at your point of origin. Please allow up to 45 minutes to reach each destination. JAC Assist is a shared-ride system; therefore some trips may take longer;

- Your drop-off address. (Exact location of destination including telephone number if possible.) Certain public locations have specific drop-off and pick-up areas that will have to be observed;
- The time at which you wish to be picked up for your return trip;
- Whether you use a wheelchair or other mobility device;
- Dimensions of a “common wheelchair” is such a device that **does not exceed 30 inches in width and 48 inches in length measured 2 inches above ground, and does not weight more than 600 pounds when occupied.**
- Whether a personal care attendant (PCA) will be riding with you. If you are registered with JAC Assist as needing a PCA, he or she may accompany you at no additional cost, and;
- Whether a companion will be riding with you. Companions are welcome to ride with you for the regular fare per person. For PCAs and companions, please note: personal care attendants and companions **MUST** have the same origin and destination as the customer they are accompanying. JAC Assist requires you to reserve a space for your PCA or companion(s) when scheduling your reservation. If more than one person accompanying you is designated as your PCA, only one will be allowed to ride at no fare. To maximize space available, accommodations for more than one traveling companion are granted on a *space-available* basis. Please remember, the request should be made when scheduling your reservation. To inquire about space availability, call JAC Assist at (775) 841-7433.

### **Children:**

Certified users of all ages must pay the full fare. When an eligible child is traveling with an adult (who is serving as a PCA), a fare must be paid for the child and the adult attendant rides free.

Children accompanying a certified rider are considered traveling companions and a space must be reserved for them when scheduling a trip. Children riding as companions aged five (5) and over must pay the full fare, companions under age 5 can ride free.

An adult accompanying a child on JAC Assist is responsible for the child. Drivers are not permitted to carry children on or off the vehicle. If you will need assistance with the child, please bring someone else along to assist you.

If the child is 5 years of age or younger, or weighs less than 40 pounds, JAC Transit System strongly recommends that the child be secured in a child safety seat. The JAC Transit System does not provide safety seats for children.

### **Use of Portable Oxygen:**

The ADA provides that transportation service must be provided to a rider who needs to bring along an oxygen bottle. **For safety reasons, it is required that**

**the rider must maintain control of the oxygen bottle.** If the rider cannot transport the oxygen bottle or maintain control of the bottle, then the rider shall provide a Personal Care Attendant to perform those functions.

**Service Animals:**

Service animals are permitted to ride on JAC Assist. You must indicate on your Application Form A that you use a service animal. Please fill out a description of the service animal such as type of animal, color, and the name of the service animal. Also when scheduling your trip, if you use a service animal, please let the scheduler know your service animal will be accompanying you on your trip. All service animals must be controlled by the passenger or companion.

**Pets:**

Animals that are not service animals may ride on JAC Assist only if they are properly secured in a cage or kennel. For safety reasons, **drivers are not permitted to carry cages or kennels on or off of the JAC Assist vehicle.** If you need assistance with a pet, please arrange to travel with someone who can help you.

**Please Keep in Mind:**

It is our goal to provide the greatest number of customers with safe, prompt, efficient, and friendly service. Therefore, we are unable to honor specific requests for the following:

- More than six-round trip requests per phone call.
- Specific drivers.
- Specific seats.
- A particular vehicle.
- Specific routes with certain customers.

**HOW TO RIDE JAC ASSIST**

Both JAC and JAC Assist vehicles are ADA compliant and are accessible by wheelchair. Riding JAC Assist is equivalent to riding JAC's regular fixed-route system in that there is a scheduled arrival time and you must be ready when the vehicle arrives. Also, there may be additional stops before reaching your destination.

**Please remember:**

- JAC Assist is an Origin to Destination service.
- JAC Assist is a Shared-Ride service.
- The driver may not make unscheduled stops.
- If other passengers get on or off the vehicle before your stop, you may need to temporarily move to accommodate these passengers.
- No assistance will be provided beyond the entrance of your destination. If you require further assistance, a personal care attendant should accompany you.

- You may ride from any origin in the JAC Assist service area for any purpose as long as a reservation has been made.

The vehicle may arrive 15 minutes before or after your scheduled pick-up time. For example, if your pick-up time is scheduled for 8:00 A.M., the vehicle may arrive any time between 7:45 and 8:15 A.M. The vehicle will wait 5 minutes after arrival at the designated pick-up site. It is the passenger's responsibility to be available to board the vehicle at least 15 minutes prior to your scheduled pick-up time. You (and your PCA/companion) should meet the vehicle when it arrives.

If the vehicle is more than 15 minutes late for your scheduled time, please call JAC Assist at (775) 841-7433 and a dispatcher will check the arrival time.

The driver is required to collect a fare or a JAC Assist pass from you and your companion prior to departure. Please have exact change ready. Checks, ATM or credit cards are not accepted. If your need for a personal care attendant has been registered with JAC Assist, there is no charge for him or her. Non-payment of fares will result in a denial of your trip.

Eating, drinking – including consumption of alcohol, chewing tobacco, smoking, littering or listening to audio devices without earphones will not be permitted. Shirts and shoes (or equivalent) must be worn. Passengers should refrain from engaging in inappropriate/distracting conversation with the driver.

### **DRIVER ASSISTANCE POLICY**

Drivers are not permitted to enter any home or go beyond the threshold of any building. Drivers are required to maintain visual contact with vehicle at all times. Drivers may enter into the main lobby of a business for the exclusive purpose of notifying a patron that the vehicle is available for boarding, provided they are able to maintain line-of-sight contact with the vehicle at all times.

In locations where drivers cannot maintain line-of-sight with their vehicle and go to the door to notify passengers of the arrival of their ride, passengers may request telephone notification of the bus's arrival for that specific location. As this request may require special arrangements with third parties and is subject to review, please contact us at (775) 841-7433 to make the request.

Drivers are not permitted to maneuver a mobility device up or down stairs. Drivers are not permitted to physically lift passengers. Drivers are not permitted to carry objects over 15 pounds. Drivers are not permitted to load or unload passenger's carry-on items. It is the passenger's responsibility to load, unload and control all carry-on items. Passengers needing more assistance than the drivers are allowed to provide are encouraged to make other arrangements for assistance at their pick-up and drop off points. One personal care attendant is allowed to ride with passengers as needed without charge.

## **WHAT TO DO IF YOU MISS YOUR RIDE**

If you miss your scheduled ride, your missed trip will be treated as a “no-show”. Contact JAC Assist, (775) 841-7433, between 8:00 A.M. to 5:00 P.M. to request a new trip to be scheduled on a same day, space available basis. Outside of normal business hours, please call (775) 841-7433 and leave a message.

## **HOW CAN JAC ASSIST ACCOMMODATE YOU?**

In order to provide for the safety of our drivers and passengers, your carry-on items are limited to what can easily be contained and controlled by you and/or your companion(s). Items too large or too numerous to be reasonably controlled, carried or handled by a passenger are prohibited. Generally, packages with a combined weight of no more than 30 pounds are welcome on JAC Assist. All items must be stowed out of the aisle or walkways, may not be placed in unoccupied seats and must remain within the passenger’s immediate control. Shopping carts, etc will not be tied down elsewhere in the vehicle.

- Hazardous materials or firearms are not allowed.
- No additional packages will be transported.
- Customers or PCA/companions are responsible for getting packages to their destination.

Visitors from other cities who are eligible under ADA criteria are welcome to use JAC Assist during their visit to Carson City for up to 21 days. Please call JAC Assist at (775) 841-7433 if you are an out of town visitor wishing to register.

JAC Assist customers should be offered the same ADA service in other cities that provide fixed-route services upon showing rider identification card.

Service animals are allowed to accompany you if such a need was indicated on your JAC Assist application. Please inform JAC Assist when scheduling your trip that a service animal will be accompanying.

## **HOW TO COMMENT ON JAC ASSIST SERVICE**

We can only resolve problems if we are informed, so please do not hesitate to call. Should you have questions or complaints about service, please call JAC Assist at (775) 841-7433. Please review the Complaint Process found in Appendix D.

## **SAFETY**

A customer may be subject to any reasonable accommodation requirement that will ensure the safety for themselves, other customers and drivers. For example,

a customer may be required to ride with a personal care attendant if the passenger is unable to safely board a vehicle.

## **CONTAGIOUS ILLNESSES**

Several steps can be taken to help prevent contagious illnesses. The most important thing you can do to protect yourself and others is to wash your hands. Please be considerate of others and cover your nose and mouth when coughing or sneezing. Always wash your hands after coughing or sneezing. Avoid contact with individuals at risk. Ask people to use a tissue and cover their nose and mouth when coughing or sneezing and to wash their hands afterwards.

## **CUSTOMER CODE OF CONDUCT**

It is JAC Assist's policy to provide the safest and most efficient service to our passengers. Passengers who abuse the following Code of Conduct guidelines can adversely affect the JAC Assist program as a whole. For the safety and comfort of all passengers, JAC Assist has established these policies that address instances when a passenger's conduct may adversely affect others involved with the JAC Assist program. The following identifies the JAC Assist policy on customer misconduct.

- 1) **Electronic Equipment** – Customers may not operate any audio or visual equipment, which infringes upon other passenger's safety, comfort, or impairs the driver's ability to transport passengers safely. Examples include audio/visual devices without headsets, portable video games that have sound effects, etc.
- 2) **Hazardous Conduct** – Any act that creates the potential for injury or death to any customer, driver or the general public.
- 3) **Abusive Conduct** – Any abusive, offensive, or threatening act or behavior that affects the safety or security of the driver and/or the passengers, or invades the privacy rights of others such as touching another person in a rude, insolent or angry manner. Sexual harassment, verbal or physical, will not be tolerated. Examples also include profanity, screaming, hitting, etc.

## **Consequences of Misconduct**

Due to the wide variety and severity of misconduct, Jump Around Carson Transit System reserves the right to determine the consequences ranging from a warning to a suspension in service for up to one-year.

No rider that has been suspended shall lose his or her certificate of eligibility for paratransit services by reason of said suspension. Passengers will be notified in writing before JAC Assist takes any action. An eligible passenger whose service

is to be suspended because of misconduct has a right to request a hearing through an appeals process, see Appendix D.

### **Consequence of Unintentional Misconduct**

Any act that would qualify as misconduct, but is the direct and immediate act of the passenger's disability, such as abusive language that is the consequence of Tourette's syndrome or socially unacceptable behavior brought on by a mental illness, shall be considered Unintentional Misconduct. Consequences of Unintentional Misconduct will be addressed as noted below after counseling with the passenger.

- 1) A passenger may be subject to any reasonable accommodation requirement that will ensure the safety of all passengers and drivers.
  - a. A passenger may be required to ride with a personal care attendant.
  - b. A passenger may be required to attend training or receive additional counseling in proper transit conduct.
- 2) The accommodation requirement may last for a time period sufficient to allow the passenger to learn appropriate behavior.
- 3) The accommodation requirement may be permanent if the conduct is beyond the passenger's control.
- 4) If a passenger commits an act of misconduct that he or she has been trained to know as inappropriate, that act is considered intentional.

No rider whose access to paratransit service has been suspended for any reason shall lose his or her certificate of eligibility for paratransit services by reason of said suspension. Passengers will be notified in writing before JAC Assist takes any of these steps. An eligible passenger whose service is to be suspended because of misconduct has a right to request a hearing through an appeals process, see Appendix B.

### **JAC ASSIST NO-SHOW AND LATE CANCELLATION POLICY**

Because cancellations may cause lost trips and/or rides for other passengers, it is necessary to enforce a no-show and late cancellation policy. This policy is as follows:

Three (3) no-shows and/or late cancellations within a ninety (90) day period will result in **a warning letter**.

Six (6) no-shows and/or late cancellations within a ninety (90) day period will result in **a 14 calendar day suspension from JAC Assist service**.

Nine (9) no-shows and/or late cancellations within a ninety (90) day period will result in **an additional 30 calendar day suspension from JAC Assist service**.

Ten (10) no-shows and/or late cancellations within a ninety (90) day period will result in **an indefinite suspension from JAC Assist service.**

This policy prevents excessive bookings and cancellations of rides that deny other passengers needed transportation services. A cancellation or no-show that is disability related will not be counted, if you notify JAC Assist between 8:00 A.M. – 5:00 P.M. Documentation may be required.

Cancellations should be made at least one hour before the scheduled pick-up time. Cancellations made less than one hour prior to the scheduled pick-up time will be considered a late cancellation. This policy applies to all scheduled trips.

### **JAC ASSIST EXCESSIVE CANCELLATION POLICY**

Even when a trip is cancelled a day in advance or at least one hour before the established pick-up time, a pattern of excessive cancellations causes the paratransit service to not be available at the time other passengers desire service. The policy is as follows:

Passengers canceling 50% or more of their scheduled trips with a minimum of six (6) cancellations within a ninety (90) day period, will be subject to a 30-day suspension from service.

### **ACTIONS RESULTING FROM NO-SHOW, EXCESSIVE CANCELLATION, LATE CANCELLATION**

You will be notified in writing before JAC Assist takes any of these steps. A JAC Assist eligible passenger whose service is to be suspended because of no-shows has a right to request a hearing through an appeals process, see Appendix B. An appeal may be filed at any level of suspension. There will be no loss of service while an appeal is in progress.

## APPENDIX A GLOSSARY

**ADA** – Americans with Disabilities Act signed into law in 1990, making it illegal to discriminate against persons with disabilities regarding employment, public services, public accommodations, and telecommunications. The intent of this law is to provide equal opportunity to person with disabilities, allowing them to fully participate in society and live independently and with economic self-sufficiency.

**CANCELLATION** – To give notice more than one-hour before the scheduled trip, that the trip is not needed.

**COMPANION** – A fare-paying person accompanying the JAC Assist rider.

**CONDITIONAL USE ELIGIBILITY** – Individual is not able to use accessible JAC fixed-route transit in specific circumstances and is eligible to use JAC Assist paratransit service under limited circumstances identified by the Jump Around Carson Transit System.

**DISABILITY** (as defined by ADA, see Appendix E) – A person with a disability is defined as:

- A person with a physical or mental impairment that substantially limits one or more major life activities; or
- A person with a record of such a physical or mental impairment; or
- A person who is regarded as having such impairment.

It should be noted that the ADA definition of disability is not the same as other definitions of disability used in other federal laws and programs such as Social Security, workers compensation, veterans programs, etc.

**FIXED-ROUTE** – A route in which the bus operates along prescribed routes according to fixed schedules.

**JUMP AROUND CARSON (JAC)** – The marketing name for the fixed-route public transportation system in Carson City.

**JAC ASSIST** – The marketing name for the ADA paratransit public transportation service in Carson City.

**JURISDICTION** – The total area within which the provider is authorized to operate.

**LATE CANCELLATION** – Failure to give notice of cancellation within one hour of scheduled pick-up.

**NO-SHOW** – Failure to give notice of cancellation and/or failure to show up at pick-up location.

**ORIGIN TO DESTINATION** – The JAC Assist vehicle will pick up and drop off the passenger at the of the address of their origin and destination.

**PARATRANSIT** – Comparable transportation for individuals, who, because of a physical or mental impairment, cannot use a regular fixed-route system.

**PERSONAL CARE ATTENDANT (PCA)** – An individual, who, accompanies the paratransit eligible individual, who requires more assistance than that provided by the driver. Examples of PCA activities performed on behalf of the passenger may include mobility assistance, personal care, or communication.

**REDUCED FARE** – Only applicable for riding the fixed-route system.

**SERVICE ANIMAL** – Any guide dog, signal dog, service dog, or other animal individually trained to do work or perform tasks for the benefit of an individual with a disability.

**SERVICE AREA** – Area in which JAC Assist will pick-up or drop-off individuals. Currently the Service Area contains three-quarters (3/4) of a mile on each side of each fixed-route.

**TEMPORARY ELIGIBILITY** – Individual is not able to use accessible fixed-route transit at this time, however the condition or circumstance(s) leading to eligibility is reasonably expected to change in the future. For a limited period of time, such as a broken limb that prevents a person to be able to walk to a JAC fixed-route bus stop, the individual is typically eligible to use JAC Assist paratransit service for all trips.

**TRIP-BY-TRIP** – Individual is not able to use accessible JAC fixed-route service for certain trips due to architectural and/or environmental barriers. The individual is eligible to use JAC Assist paratransit service for those specific trips identified by the Jump Around Carson Transit System.

**UNCONDITIONAL USE ELIGIBILITY** – Individual is not able to use accessible JAC fixed-route transit under any circumstances and is eligible for all trips on JAC Assist paratransit service.

**VISITOR** – Someone who does not reside in the jurisdiction served by the Jump Around Carson Transit System.

## **APPENDIX B APPEALS PROCESS**

### **Appeal of Service Suspension and Eligibility Certifications**

#### **REQUESTS FOR HEARING**

A hearing to appeal a decision regarding eligibility or to suspend paratransit (JAC Assist) service will be held only after receipt of a written Request for Hearing, filed with the Transit Coordinator.

- Requests for Hearing must be in writing and must contain the name, address, and telephone number of the person(s) requesting the hearing (requester), and the name of the JAC Assist service user if different from Requester.
- Persons submitting a Request for Hearing are strongly encouraged to include a statement of the reason(s) why they believe the decision of ineligibility or to suspend service is inappropriate.
- Requests for Hearings must be filed within sixty (60) calendar days after a person has received written notice of suspension and will be deemed filed when received by the Transit Coordinator.

#### **RESPONSIBILITIES OF THE TRANSIT COORDINATOR AND REQUESTER**

- The Transit Coordinator will set the time and place of the hearing when the request is filed (received) and will notify the Requester. The time of the hearing will be within 30 days after the time the Request for Hearing was filed (excluding holidays).
- Hearings may be postponed or rescheduled only upon written request to the Transit Coordinator and for good cause.
- A person requesting a hearing may waive personal appearance at the hearing and have the matter determined based on the record, but must do so by filing a written request with the Transit Coordinator before the hearing.
- A person waiving personal appearance may submit to the Transit Coordinator documents and other information to be included with the record and considered in deciding the appeal.
- If the Requester fails to appear at the hearing, and gives no prior notice, the Transit Coordinator may make a determination based on evidence, as appropriate.

#### **CONDUCT OF HEARINGS**

The manner of conducting hearings is under direction, control and discretion of the Transit Coordinator. These guidelines govern issues, evidence, and documents:

- The issues to be decided at the hearing are limited to those set forth in the notice of service suspension and the Request for Hearing.
- Evidence commonly relied upon by reasonable, prudent persons will be heard and considered. Specifically, this includes statements (oral and written), documents and copies of documents, official and business reports, and records not certified as such.
- Irrelevant, immaterial, redundant or unduly repetitious evidence will be excluded.
- A record of the hearing (electronic or otherwise) will be kept, as determined by the Transit Coordinator.

## **DECISIONS**

All decisions will be in writing. Decisions will be rendered at the conclusion of the hearing or as soon thereafter as a decision can be made. The Transit Coordinator will notify the Requester in writing of the decision and the reasons for the decision.

## **GENERAL**

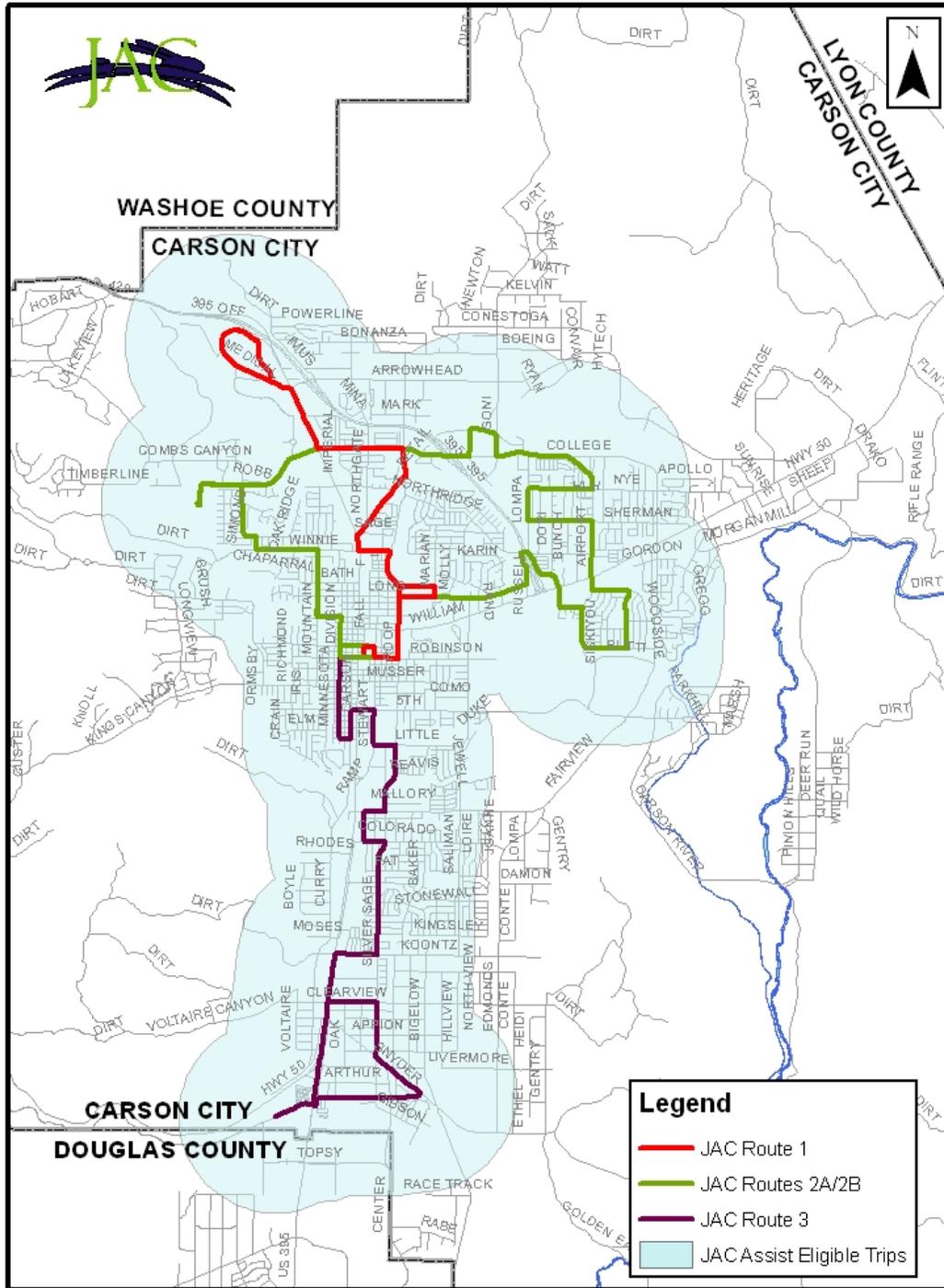
The Transit Coordinator may designate one or more individuals as Acting Hearing Officers, with all the powers and duties of the Transit Coordinator. The Acting Hearing Officers may perform any act or duty performed by the Transit Coordinator.

The Transit Coordinator may modify or waive any of these rules in the interest of fairness or justice for good cause shown.

Eligibility Certification appeals will be considered by the ADA Eligibility Certification Board made up of three (3) persons, the Transit Coordinator of the City or his/her designee, the Transportation Manager of the City or his/her designee, and an individual who is knowledgeable in the limitations of the disability in question.

The Jump Around Carson Transit System is not required to provide ADA paratransit service to the individual for the duration of the certification appeal process unless the decision of the Review Board exceeds the thirty (30) day limit.

# APPENDIX C



**APPENDIX D**  
**COMPLAINT PROCESS**  
**JUMP AROUND CARSON TRANSIT SYSTEM**

The Jump Around Carson Transit System seeks to provide a user-friendly method of resolving your concerns fairly and efficiently. However, we can only resolve problems if we are informed, so please do not hesitate to contact us.

If you have a complaint about service, please call the Jump Around Carson Transit System at (775) 841-7433. Be prepared to provide your name, address, phone number and a detailed explanation of your complaint, e.g., route, time, bus number, etc. This will allow staff to more completely investigate and respond to your complaint.

If a complaint is not resolved to your satisfaction after five (5) working days, please call the Transit Coordinator at (775) 887-2355. Be prepared to again provide the information outlined above plus details of your interaction with the provider.

If the complaint is still not resolved to your satisfaction within five (5) working days, you may submit the complaint in writing to the Transit Coordinator's office at 3505 Butti Way, Carson City, NV 89701 or email at [kpearson@ci.carson-city.nv.us](mailto:kpearson@ci.carson-city.nv.us). Be prepared to again provide the information outlined above plus details of your interaction with the provider and the Transit Coordinator. This request may include to request to meet face to face with the Transit Coordinator to discuss the problem and/or request a written response within ten (10) working days. The Transit Coordinator has discretion to enlist the assistance of other resources, as appropriate, in resolving your problem, e.g., the Transportation Manager, other City staff, the management and staff of contractor, etc. as appropriate.

If the meeting and/or the response are not scheduled/received within ten (10) working days from the date your request is received by the City or if the meeting/response does not resolve the problem to your satisfaction you may seek additional information from the Federal Transit Administration.

## APPENDIX E

*Disability* means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of such individual; a record of such an impairment; or being regarded as having such an impairment.

1. The phrase *physical or mental impairment* means –
  - a. Any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, respiratory including speech organs, cardiovascular, reproductive, digestive, genitor-urinary, hemi and lymphatic, skin, and endocrine;
  - b. Any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities;
  - c. The term *physical or mental impairment* includes, but is not limited to such contagious or non-contagious diseases and conditions as orthopedic, visual, speech, and hearing impairments; cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, mental retardation, emotional illness, specific learning disabilities, HIV disease, tuberculosis, drug addiction, and alcoholism;
  - d. The phrase *physical or mental impairment* does not include homosexuality or bisexuality.
2. The phrase *major life activities* means functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and work.
3. The phrase *has a record of such an impairment* means has a history of, or has been misclassified as having, a mental or physical impairment that substantially limits one or more major life activities.
4. The phrase *is regarded as having such an impairment* means –
  - a. Has a physical or mental impairment that does not substantially limit major life activities, but which is treated by a public or private entity as constituting such a limitation;
  - b. Has a physical or mental impairment that substantially limits a major life activity only as a result of the attitudes of others toward such an impairment; or
  - c. Has none of the impairments defined in paragraph (1) of this definition but is treated by a public or private entity as having such an impairment.
5. The term *disability* does not include –
  - a. Transvestism, transsexualism, pedophilia, exhibitionism, voyeurism, gender identity disorders not resulting from physical impairments, or other sexual behavior disorders;
  - b. Compulsive gambling, kleptomania, or pyromania;
  - c. Psychoactive substance abuse disorders resulting from the current illegal use of drugs.



**JUMP AROUND CARSON TRANSIT SYSTEM**  
**3303 Butti Way**  
**Carson City, NV 89701**  
**Phone: (775) 841-7433 Fax: (775) 887-2324**

**JAC ASSIST PARATRANSIT ELIGIBILITY APPLICATION**

**PART A**  
**Personal/Contact Information**

JAC Assist provides origin-to-destination paratransit service to individuals who cannot use the regular JAC fixed-route transit system. To be eligible for service, the functional limitations of an individual's disability must prevent use of regular fixed-route bus service. Age, distance from a bus stop or inability to drive by themselves, are not taken into consideration in determining eligibility. **To become eligible for service, applicants along with a qualified professional such as: physican (M.D. or D.O.) or registered nurse, physical or occupational therapist, psychiatrist, psychologist, or mental health counselor, vocational counselor, rehabilitation specialist or independent living skills trainer, licensed social worker or case manager, orientation and mobility instructor or travel trainer, or ophthalmologist must complete and submit Part A and Part B for review.** Applicants will also need to complete an Authorization Form for Disclosure of Protected Health Information attached to Part B that will be submitted by the qualified professional.

PLEASE TYPE OR PRINT IN INK TO COMPLETE APPLICATION FORMS.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_  
Address \_\_\_\_\_ Apt. No. \_\_\_\_\_  
City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone : (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_  
TTD/TTY (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ E-Mail address: \_\_\_\_\_

Do you require information in an alternative format?

Braille \_\_\_\_\_ Large Print \_\_\_\_\_ Audio Tape \_\_\_\_\_ Other: \_\_\_\_\_



If someone is helping you with this application, that person **must** complete the following:

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

**Emergency Contact Information:**

Name \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

**INFORMATION ABOUT YOUR ABILITIES**

1. What is the disability or health condition that **prevents** you from using the regular fixed-route **JAC** bus service?

- Certified Legally Blind
- Loss or inability to use one or more limbs
- Severe effects of stroke
- Paralysis affecting mobility, speech, vision or memory
- Severe Arthritis
- Autoimmune Disorders, for example, Lupus or Scleroderma etc.
- Severe cardiac and/or respiratory impairment affecting strength and/or endurance
- Severe emotional disorder (may require an escort)
- Developmental disabilities, for example, mental retardation, cerebral palsy, epilepsy, autism or neurological disorder, etc.
- Hearing loss accompanied by an inability to understand speech with/without a hearing aid

Other (*please explain*):

\_\_\_\_\_

a. Is your disability permanent?  Yes  No

b. If your disability is temporary, how long do you expect it will be until you're better?

# \_\_\_\_\_ Months.

c. Is there a season during the year that your disability/health condition worsens and prevents you from traveling without help? (**Check all that apply**)

Spring  Summer  Fall  Winter



2. Do you use any of the following mobility aids? **Check all that apply.**

- |  |  |
|--|--|
| <input type="checkbox"/> Manual Wheelchair | <input type="checkbox"/> Electric Wheelchair       |
| <input type="checkbox"/> Powered Scooter   | <input type="checkbox"/> Cane                      |
| <input type="checkbox"/> Walker            | <input type="checkbox"/> White Cane                |
| <input type="checkbox"/> Service Animal    | <input type="checkbox"/> Crutches                  |
| <input type="checkbox"/> Oxygen            | <input type="checkbox"/> Other (please list) _____ |

If you checked service animal, please give a description of your service animal.

\_\_\_\_\_

3. Do changes in weather (like extreme heat, cold, wind, rain, snow and/or ice) combined with your disability or health condition **stop** you from using the regular fixed-route **JAC** bus service?  Yes  No

*If yes, explain completely. Use an additional sheet if necessary.*

\_\_\_\_\_

4. Do you require the assistance of a personal care attendant (PCA) when you travel? **(Riders must provide their own PCA)**

Yes  No  Sometimes

5. All Jump Around Carson Transit System vehicles have wheelchair lifts (if you are unable to climb stairs, you can stand on the lift). Would you be able to get onto and off of a regular bus **without the help of another person?** (The driver operates the lift and helps with the securement system. Lifts have handrails.)

Yes  No  Sometimes

If you answered **No or Sometimes**, explain why:

\_\_\_\_\_

6. Does your disability or health condition **stop** you from getting to or from a bus stop without help from another person, for one of the following reasons? **(Check all that apply.)**

- Unable (not just difficult) to travel on rough or hilly terrain
- Extreme sensitivity to certain weather conditions
- Extreme fatigue due to health condition
- Unable to cross busy intersections
- Lack of sidewalks and curb cuts at bus stop
- Unable to locate bus stop due to a visual impairment
- Unable to wait outside for ten (10) minutes or more
- Unable to travel on ice or snow covered surfaces
- Unable to identify correct bus in the daytime when it is light



Unable to identify correct bus in early morning or evening hours when it is dark

Other

Please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. How many blocks is your home to the nearest bus stop? \_\_\_\_\_  
**(A city block is approximately 500 feet long)**
8. Indicate below how far you are able to travel **without** help.  
 Less than 200 feet     ¼ mile (3 blocks)     ½ mile (6 blocks)  
 ¾ mile (9 blocks)     more than ¾ of a mile
9. After arriving at a bus stop, how long can you wait outside (**not sitting**) until the bus arrives?  
 30 minutes or longer     15 minutes     10 minutes  
 Less than 10 minutes  
If you cannot stand while waiting, *why not*?  
\_\_\_\_\_
10. Which of the following functions are you **unable** to perform without assistance from another person: (**check all that apply**)
- Understand and/or process information
  - Ask for, or follow written or oral information, such as schedules including TDD, audio tape or voice?
  - Figure out the correct fare?
  - Follow instructions in an emergency?
  - Recognize your destination while on the bus?
  - Once you get off the bus, locate and reach your destination?
  - Cross a busy intersection?
  - Find your way between familiar locations?
  - Signal the bus driver to get off the bus at a familiar stop and then get off the bus? *Assume the driver calls all stops.*
  - Grasp coins, passes, and handles?
  - Communicate addresses, destinations, and telephone numbers on request?
  - Deal with unexpected situations or unexpected changes in routine e.g., route changed due to road construction, regular bus stop closed?
  - Go up and down steps?
11. If training for riding on the regular **JAC** bus system were available at no charge, do you think that you would benefit from receiving this training?
- Yes     No



I understand that the purpose of completing PART A is the first step to determine if I am eligible for **JAC Assist ADA Paratransit Service**.

Furthermore, I agree to have a **qualified professional** conduct an independent professional assessment of my eligibility by completing PART B of the application process. I understand that failure to participate in this assessment will result in a denial of eligibility for the Jump Around Carson Transit System's JAC Assist paratransit service. I understand that Part A, Part B, and the Authorization Form for Disclosure of Protected Health Information attached to Part B must be submitted to complete the application review. In addition, I authorize the qualified healthcare professional completing Part B on my behalf to release this information to the Jump Around Carson Transit System for their review as well as any supporting or other pertinent information about my health or medical condition to assist Jump Around Carson Transit System assigned staff in determining eligibility for JAC Assist paratransit service. I understand that upon receipt of Part A submitted by me or a representative on my behalf, and Part B by a qualified professional conducting the independent professional assessment, will begin the 21 calendar day application review period by the Jump Around Carson Transit System. Furthermore, I understand that the Jump Around Carson Transit System may need to contact me or a representative on my behalf regarding my application as well as possibly the qualified professional completing Part B to obtain more information.

I certify by my signature that I have been truthful in answering all questions in this application, and that the information I have provided is correct. I understand that providing false information could result in denial of service.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

If you assisted the Applicant to complete this Form, sign below:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**JUMP AROUND CARSON TRANSIT SYSTEM**  
**3303 Butti Way**  
**Carson City, NV 89701**  
**Phone: (775) 841-7433 Fax: (775) 887-2324**

**JAC ASSIST PARATRANSIT ELIGIBILITY APPLICATION**

**PART B**  
**Professional Verification**

Dear Qualified Professional:

The application form below contains questions to assist you in evaluating the applicant to determine their ability or inability to ride Jump Around Carson Transit System regular fixed-route service unassisted. The applicant is currently applying for JAC Assist ADA paratransit service. JAC Assist service is strictly limited for only those persons with disabilities requiring public transportation services in the City of Carson City that are unable to utilize regular fixed-route JAC bus service. JAC Assist is a origin to destination paratransit service where customers call ahead to schedule trips and must be able to meet the vehicle at street level for pickup.

***Please read the following ADA (Americans with Disabilities Act) definition of a person with a disability:***

Any person with a disability who is unable, as a result of a physical or mental impairment to board, ride or disembark from an ADA accessible vehicle independently or complete transfers without the assistance of another individual.

**And/or**

Any person with a disability who has a specific impairment that prevents them from traveling to and from a bus stop on the public bus system. Architectural and environmental barriers such as distance, terrain or weather do not, standing alone, form a basis for eligibility. However, consideration should be given to the interaction of environmental conditions (terrain and weather) with the individual's impairment related condition.





- Loss or inability to use one or more limbs
- Severe effects of stroke
- Paralysis affecting mobility, speech, vision or memory
- Severe Arthritis
- Autoimmune Disorders, for example, Lupus or Scleroderma etc.
- Severe cardiac and/or respiratory impairment affecting strength and/or endurance
- Severe emotional disorder (may require an escort)
- Developmental disabilities, for example, mental retardation, cerebral palsy, epilepsy, autism or neurological disorder, etc.
- Hearing loss accompanied by an inability to understand speech with/without a hearing aid
- Other (**Please explain the medical diagnosis and then describe the disability or health condition/limitation**) **Use other side of page if necessary**

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Date of onset? \_\_\_\_\_

3. Is the applicant's disability:  
 Permanent \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

If temporary how long? \_\_\_\_\_

Is this applicant's disability:  
 Seasonal \_\_\_\_\_ Which season(s)? \_\_\_\_\_

4. What mobility aids does the applicant utilize? **Check all that apply.**

- |                         |                           |
|-------------------------|---------------------------|
| Manual Wheelchair _____ | Electric Wheelchair _____ |
| Powered Scooter _____   | Cane _____                |
| Walker _____            | White Cane _____          |
| Service Animal _____    | Crutches _____            |
| Oxygen _____            | Other (please list) _____ |

5. Does the applicant require a Personal Care Attendant/PCA when traveling on transit vehicles? (**Riders must provide their own PCA**)

Never \_\_\_\_\_ Sometimes \_\_\_\_\_ Always \_\_\_\_\_

If a PCA is needed, explain why.

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6. Which of the following weather conditions impact the applicant's disability or health condition such that it prevents him/her from independently getting to and/or from a bus stop?

Indicate: Heat \_\_\_\_\_ Cold \_\_\_\_\_ Humidity \_\_\_\_\_ Snow \_\_\_\_\_ Ice \_\_\_\_\_  
Pollution/Allergies \_\_\_\_\_ Other \_\_\_\_\_ N/A \_\_\_\_\_

What specific weather condition prevents this person from getting around on his/her own? How so?

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7. Does rough terrain make it hard for the applicant to travel?

Yes \_\_\_\_\_ No \_\_\_\_\_ Sometimes \_\_\_\_\_

If you answered Yes or Sometimes, describe your definition of rough terrain and how that makes it difficult for the applicant to travel.

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8. Is applicant able to: **(Check all that apply)**

- Understand and/or process information
- Ask for, or follow written or oral information, such as schedules including TDD, audio tape or voice?
- Figure out the correct fare?
- Follow instructions in an emergency?
- Recognize his/her destination while on the bus?
- Once he/she gets off the bus, locate and reach his/her destination?
- Cross a busy intersection?
- Find his/her way between familiar locations?
- Signal the bus driver to get off the bus at familiar stop and then get off the bus? *Assume the driver the calls all stops*
- Grasp coins, passes, and handles?
- Communicate addresses, destinations, and telephone numbers on request?
- Deal with unexpected situations or unexpected changes in routine, e.g., route changed due to road construction, regular bus stop closed?
- Go up and down steps?



Your Name and Title:

\_\_\_\_\_

Certificate/Licensure:

\_\_\_\_\_

Office Address:

\_\_\_\_\_  
\_\_\_\_\_

Office Telephone Number:

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Qualified professional** please forward the signed original to Jump Around Carson Transit System at 3303 Butti Way, Building #7, Carson City, NV 89701. You may also fax a copy to (775) 887-2324 to expedite the process, but the signed original must be forwarded to the Jump Around Carson Transit System, Attn: JAC Assist Certification Officer. Thank you for your cooperation.



**Disclosure of Protected Health Information**  
**Authorization Form**

I \_\_\_\_\_ authorize the qualified professional  
(Printed Name of Patient)

\_\_\_\_\_ completing Part B  
(Printed Name and Title of Qualified Professional)

of the JAC Assist Paratransit Eligibility Application on my behalf, to release this information about my disability and abilities to use the accessible regular JAC fixed-route bus service to representatives of the Jump Around Carson Transit System for their review as well as any supporting or other pertinent information about my health or medical condition to assist the Jump Around Carson Transit System solely for the purpose of determining eligibility for JAC Assist ADA paratransit service in the City of Carson City, Nevada. I understand that all medical information about my disability will be kept strictly confidential.

**I understand that I do not have to sign this authorization in order to be considered for services, but I understand that no weight will be given to medical conditions claimed which cannot be verified.** In fact, I have the right to refuse to sign this authorization. When my information is used or disclosed pursuant to this authorization, it may be subject to redisclosure by the recipient and may no longer be protected by the federal HIPAA Privacy Rule. I have the right to revoke this authorization in writing except to the extent that the Jump Around Carson Transit System has acted in reliance upon this authorization. My written revocation must be submitted to the JAC Assist Certification Officer at Jump Around Carson Transit System at 3303 Butti Way, Building #7, Carson City, NV 89701.

\_\_\_\_\_  
Signature of Applicant or Legal Guardian

\_\_\_\_\_  
Date

Legal Guardian's Relationship to Applicant: \_\_\_\_\_

Printed Name of Legal Guardian, if applicable: \_\_\_\_\_

Printed address & telephone number of Legal Guardian:  
\_\_\_\_\_

\_\_\_\_\_  
Applicant / guardian must be provided with a signed copy of this authorization form.



NOTE: If only able to make a “mark” for your signature, simply make your mark and then have someone act as a witness by signing their name above or besides yours. May be signed by a “Legal guardian” or “power of attorney” only if a copy of documentation showing your legal authority to act and sign on applicant’s behalf is also provided. **DOCUMENTATION IS NOT NECESSARY FOR THE PARENT OF A MINOR CHILD.**

Qualified professional please fax a copy of this signed release form to (775) 887-2324, Attention: JAC Assist Certification Officer.