



CITY of CALABASAS

**Application for Public Transit Pass - 2011**

Traffic & Transportation Division  
100 Civic Center Way, Calabasas, CA 91302  
(818) 224-1600

Mail completed application to Transportation Division, City of Calabasas, 100 Civic Center Way, Calabasas, CA 91302  
For faster service, deliver in person to Public Counter at 100 Civic Center Way

**Include \$50 Fee with Application**

PLEASE PRINT OR TYPE - <u>ONE PASSENGER PER APPLICATION</u>		OFFICE USE ONLY
APPLICANT	SCHOOL & GRADE	SHUTTLE PASS ID #
LAST            FIRST            MIDDLE		
PARENT/GUARDIAN, if APPLICANT under 18	HOME PHONE	LINE NUMBER
LAST            FIRST            MIDDLE		
ADDRESS - HOUSE NUMBER, STREET, CITY, ZIP CODE	PARENT'S WORK PHONE	ROUTE SPECIFICATION

**Instructions for Completing the Application** - Read these instructions and all attachments in this packet.

**Please print or type all entries.**

1. Make no entries in the *Office Use Only* section of the application.
2. Transit Pass is valid during **the calendar year in which it was purchased.**
3. If shuttle pass is lost, stolen, or broken a **\$25.00** fee will be charged for a replacement.
4. I understand that every rider **must** present a valid pass or ticket to board a transit vehicle, failure to do so **will** result in **refusal** of service.
5. I understand that as a public transit service, the pass does not guarantee a seat; it permits boarding of the transit service - If transit vehicle is full, riders will need to wait for additional transit vehicle to arrive.
6. I certify that the rider has read and understands the public transit rules and regulation; **if a rider violates any of these rules he or she may be dismissed from the bus or suspended from use of the peak hour public transportation service.**
7. Signature acknowledges:
  - a. Understanding and acceptance of conditions and responsibility.
  - b. Understanding that standing riders must hold hand rail at all times

**Parents are advised that the City of Calabasas does not supervise transit stops and that the City of Calabasas is not responsible for conduct of riders at shuttle stops.**

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Signature of Passenger Applying for Peak Hour Shuttle Pass

\_\_\_\_\_  
Date

**INCORRECT OR INCOMPLETE APPLICATIONS WILL BE RETURNED BY MAIL**