



TRANSIT

ADA Complementary Paratransit Service Policy and Procedure Manual

Adopted July 1, 2025

Resolution #: 194-25

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INTRODUCTION:

Bettendorf Transit provides ADA complementary paratransit services for individuals whose disabilities prevent them from independently using the fixed route system. This is a demand response service that is equivalent to the fixed route service in terms of service characteristics as described under **49 CFR Part 37, Subpart F.**

Bettendorf Transit currently contracts out the operations of our paratransit services to River Bend Transit. River Bend Transit is responsible for scheduling and providing the trips, while Bettendorf Transit is responsible for the certification process.

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Section 1: Eligibility

1.1: ELIGIBILITY DETERMINATION PROCESS

To be eligible to use the ADA complementary paratransit service, applicants must complete an ADA complementary paratransit eligibility determination process. Eligible individuals will receive documentation of ADA complementary paratransit eligibility, which can be used in other areas.

1.2: ELIGIBILITY CRITERIA:

The certification process strictly limits ADA complementary paratransit eligibility to the regulatory definition of eligibility. Only those persons who meet the regulatory definition will be given documentation indicating that they are “ADA Paratransit Eligible.” A person will be considered eligible for ADA complementary paratransit if:

- ***The individual is unable, as the result of a physical or mental impairment (including a vision impairment), and without assistance of another individual (except the operator of a wheelchair lift/ramp or other boarding assistance device), to board, ride, or disembark from any vehicle on the system which is readily accessible to and usable by individuals with disabilities.***
- ***The individual with a disability is capable of using the system with the assistance of a wheelchair lift/ramp but the route they want to use is not sufficiently ADA accessible for the individual to use it.***
- ***The individual with a disability has a specific impairment-related condition, which prevents such individual from traveling to a fixed route boarding location or from a disembarking location.***

Temporary eligibility for ADA complementary paratransit service will be allowed for those with a disability that is only temporary in nature. Temporary eligibility is established during the certification process.

In addition, if individuals who are determined to be ADA complementary paratransit eligible can use fixed route service under certain conditions (for example, trips for which they have been trained to navigate or under variable conditions that affect an individual's disability), the eligibility will be considered "Conditional" and documentation which they are given will indicate the limitations/condition of their eligibility.

1.3: APPLICATION FORM

A copy of the application form used for Bettendorf Transit ADA complementary paratransit service is provided in Appendix A. Large print, audio, electronic, and other accessible formats are available upon request, as well as in Spanish.

1.4: REVIEW PROCESS AND TIME FRAME

Upon receipt of a completed application, Bettendorf Transit will review the application and determine the individual's eligibility within 21 days of receipt. This responsibility has been assigned to the Transit Operations Manager. If a determination is not made within 21 days, the applicant is treated as eligible and will receive service until such time as a determination of eligibility is made.

1.5: NOTIFICATION OF ELIGIBILITY

Each applicant will be notified in writing by mail of their status within 21 days of submitting a properly completed application. If determined eligible, this

letter will also include the issued paratransit card and instructions on how to schedule trips.

Those persons determined to be ineligible will be provided with specific information as to why their application was rejected and instructions on how they can appeal the decision (described below).

Accessible formats of these notifications are available upon request.

1.6: DOCUMENTATION

Upon request, Bettendorf Transit can provide certified individuals with documentation that can be used as identification for reciprocal eligibility for ADA complementary paratransit service in other areas of the communities in the United States. This documentation will include the following information:

- Name of eligible individual
- Name of certifying transit provider – Bettendorf Transit
- Telephone number of the Transit Operations Manager for Bettendorf Transit
- Whether or not the rider requires use of a lift or ramp
- Expiration date
- Any conditions or limitations on eligibility
- Whether person travels with a PCA
- Information on the appeal process if the individual is denied eligibility or has conditions placed on eligibility.

1.7: TERM OF ELIGIBILITY

Once determined eligible, a person maintains eligibility for **3 years**.

Recertification is required every **3 years**. Persons given temporary eligibility

remain eligible for the duration of time of the temporary disability, as determined through the certification process and indicated in the documentation that is to be provided to the applicant.

1.8: APPEALS PROCESS

The appeals process will be explained to all applicants who are rejected or permitted only partial (conditional or temporary) service. The applicant has 60 days to file an appeal with Bettendorf Transit, with the decision to be made by the City Attorney. The notification of intent to appeal may be submitted in person, by telephone, or in writing. Written appeals may not be required, but riders may have that option. The applicant will be afforded an opportunity to be heard and to present information and arguments in person. The City Attorney has 30 days from the date of the appeal to render a decision concerning the appeal. If a decision is not reached within 30 days, the applicant will be presumed eligible until a decision has been reached. The ADA regulations require that the person who makes a determination on an appeal must not be involved in the initial determination of the individual's eligibility

1.9: ADA COMPLEMENTARY PARATRANSIT SERVICE FOR VISITORS

ADA complementary paratransit eligible individuals visiting from other localities outside of the system's service area will also be served when eligible trips are requested. The visiting individual's local certification will be honored by Bettendorf Transit. If a visitor does not have ADA complementary paratransit certification from another jurisdiction, but makes a claim of eligibility, that claim will be honored as required by the ADA. However, in such cases, Bettendorf Transit reserves the right to require proof that the individual is not a local resident, and if the individual has a disability which is not apparent. Service to visitors is limited to 21 days during any 365-day period beginning with the visitor's first use of the service during that period. Visitors

who anticipate requiring service for more than 21 days in a 365-day period must apply for eligibility.

1.10: PERSONAL CARE ATTENDANTS

Bettendorf Transit will provide ADA complementary paratransit service for a personal care attendant (PCA) traveling with the eligible rider. The need to travel with a PCA will be determined by the applicant and noted as part of the eligibility determination process. It is important to note that the PCA may not directly be needed for transportation but may be needed at the individual's trip destination (for example, to assist with grocery shopping) and thus need for a PCA will not be limited to those individuals who require assistance in traveling. An individual who is certified as needing a PCA cannot be denied service if they chose to travel without a PCA, and may not be required to travel with the same PCA for every trip.

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Section 2: Service Characteristics and Operating Policies

ADA complementary paratransit is comparable to Bettendorf Transit’s fixed route system based on the following service characteristics and operating policies. Paratransit service is provided via contracted services with River Bend Transit.

2.1: GEOGRAPHIC SERVICE AREA

ADA complementary paratransit is provided within a three-quarter mile radius corridor surrounding each fixed route, plus relatively small areas enclosed by fixed routes. A map of the service area is included in Appendix B.

2.2: DAYS AND HOURS OF SERVICE:

ADA complementary paratransit is provided within the same days and hours as the fixed route services. Current hours of operation are:

Monday – Friday:	5:45am to 7:00pm
Saturday:	8:30am to 5:30pm
Sunday:	No Services

2.3: FARES

The one-way trip charge for ADA complementary paratransit is \$2.00. The fare charged for ADA complementary paratransit will not exceed twice the regular general public cash fare for the equivalent trip on the fixed route service. In the event that the regular public cash fare is increased the transit system may increase the ADA complementary paratransit fare accordingly. The current Bettendorf Transit Fare structure is attached as Appendix C.

If the ADA complementary paratransit-eligible individual travels with a PCA, the PCA will not be charged a fare for ADA complementary paratransit.

2.4: TRIP PURPOSE

ADA complementary paratransit is provided for trips of any purpose; no priorities are placed on specific types of trips.

2.5: TRIP SCHEDULING AND RESPONSE TIME

Reservations are accepted for ADA complementary paratransit trips on a next-day basis, until regular close-of-business hours. Riders may schedule trips by calling the River Bend Transit office Monday through Friday from 6:00a.m. to 4:30p.m. and Saturday from 7:00a.m. to 4:00p.m. to schedule trips for the next service day, or for any trip reservations up to 2 weeks in advance. For trips on Monday and service days following holidays, reservations are accepted on Sundays and holidays via a detailed voicemail left with the dispatch department prior to 4:30pm.

2.6: SERVICE CAPACITY AND SCHEDULING FLEXIBILITY

As required, River Bend Transit will provide adequate capacity to meet all demand for eligible ADA complementary paratransit trips. In some cases, it may be necessary to negotiate trip times with the rider; however, in no case will any trip be scheduled to arrive to the destination past the time requested by the rider. A 30-minute pickup window will be provided that accommodates the trip and allows the rider to arrive to their destination on time. (For example, if a rider needs to be at an appointment no later than 1:00pm, they will be offered a pickup window between 12:00pm and 12:30pm to ensure they arrive to their destination on time).

In order to meet the ADA requirement for ensuring adequate capacity, River Bend Transit will monitor the following indicators of capacity to ensure that no patterns or practices of capacity constraints are found:

- **On-time performance** – River Bend Transit measures on-time performance according to vehicles that arrive within a promised 30 minute “window” of time. A vehicle that arrives within this “window” is considered on-time. River Bend Transit will try to ensure that all trips are on-time but because of the realities of operating conditions (e.g., poor weather, road construction), not all trips will be on-time. Should on-time performance fall below the national average as reported by the National Transit Database (NTD) actions will be taken to address and improve trip timeliness.
- **Trip denials and missed trips** –River Bend Transit plans to meet all requests for ADA complementary paratransit service based on expected demand and to avoid any trip denials or missed trips. There may be insignificant numbers of trips denied due to unforeseen conditions. There may also be an insignificant number of missed trips, defined as a trip where the vehicle arrives late and the rider either is no longer there or declines the trip due to lateness, because of the realities of operating conditions. Trip denials and missed trips will be monitored to ensure capacity is adequate.
- **Trips with excessive lengths** – River Bend Transit monitors travel times on ADA complementary paratransit to ensure comparability to the same or comparable trip if taken on fixed route

2.7: SUBSCRIPTION TRIPS

As permitted by the ADA regulations, River Bend Transit may provide a portion of its ADA complementary paratransit trips on a subscription basis (also

called standing orders). Unlike other ADA complementary paratransit trips, trip priorities and waiting lists for subscription service may be established.

2.8: COMPANIONS

Companions are in addition to any PCA with which the rider may travel as outlined in section 1.10. An ADA complementary paratransit rider is permitted to travel with at least one companion (and more than one on a space-available basis). Companion passengers pay the same fare as ADA riders. The eligible ADA rider shall reserve space for the companion(s) when the rider reserves the ride. Any companions traveling with the eligible individual must share the same trip origin and destination as the eligible individual.

2.9: ORIGIN-TO-DESTINATION SERVICE AND PASSENGER ASSISTANCE

ADA complementary paratransit services will be provided on a curb-to-curb basis. River Bend Transit drivers will assist ADA complementary paratransit riders with boarding and disembarking from vehicles and in securing their mobility devices. All drivers who operate ADA complementary paratransit services will be proficiently trained in passenger assistance and sensitivity towards individuals with disabilities.

Riders will be required to travel to the curb outside of their trip origin in time for their scheduled pick-up. Riders who require additional assistance in the form of door-to-door service in order to use the ADA complementary paratransit may request a modification of this policy by contacting River Bend Transit. In such case, the driver will provide assistance on a door-to-door basis. This ensures that River Bend Transit meets the ADA requirement to provide service on an "origin to destination" basis. While limited assistance in guiding a passenger from their door to the curb may be provided on a case-

by-case base, this must be prearranged and indicated when the trip is scheduled.

The staff of River Bend Transit will not lift a passenger, leave a vehicle unattended or out of visual observation for a lengthy period of time, enter a rider's home, care for service animals, operate a power wheelchair, provide personal care attendant (PCA) service, or take actions that would be clearly unsafe. If more extensive assistance is needed by the individual than River Bend Transit can provide as a provider of public transportation, the individual will be responsible for arranging personal assistance. Staff of River Bend Transit will work with the individual and/or the rider's caregiver/social worker to clarify parameters of the assistance provided by the driver and formally document this in a letter sent to the individual.

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Section 3: No-Show Policy

Bettendorf Transit understands that because ADA Complementary Paratransit service requires trips to be scheduled in advance, riders may sometimes miss scheduled rides or forget to cancel rides they no longer need. Bettendorf Transit also understands that riders may sometimes miss scheduled trips or be unable to cancel trips in a timely way for reasons that are beyond their control. However, repeatedly missing scheduled trips (or failing to cancel trips in a timely way), can adversely affect the efficiency and effectiveness of schedules and significantly add to the cost of providing ADA complementary paratransit service. To encourage responsible trip scheduling and paratransit service use, Bettendorf Transit has established the following No Show Policy.

3.1: DEFINITIONS: NO SHOW, PICKUP WINDOW, LATE CANCELLATION

No-show

A no-show occurs when a rider fails to appear to board the vehicle for a scheduled trip. This presumes the vehicle arrives at the scheduled pickup location within the pickup window and the driver waits at least 5 minutes.

Pickup Window

A 30-minute pickup window will be provided that accommodates the trip and allows the rider to arrive to their destination on time. Riders must be ready to board a vehicle that arrives within the pickup window. The driver will wait for a maximum of 5 minutes within the pickup window for the rider to appear.

Late Cancellation

A late cancellation is defined as either: a cancellation made less than 1 hour before the scheduled pickup time or as a cancellation made at the door or a refusal to board a vehicle that has arrived within the pickup window. A late cancellation will be considered a no-show for purposes of this policy.

3.2: DEFINITIONS: NO-SHOWS DUE TO OPERATOR ERROR OR TO CIRCUMSTANCES BEYOND A RIDERS CONTROL

Bettendorf Transit does not count as no-shows any missed trips due to our error, such as:

- Trips placed on the schedule in error
- Pickups scheduled at the wrong pickup location
- Drivers arriving and departing before the pickup window begins
- Drivers arriving late (after the end of the pickup window)
- Drivers arriving within the pickup window, but departing without waiting the required 5 minutes

Bettendorf Transit does not count as no-shows, situations beyond a rider's control that prevent the rider from notifying us that the trip cannot be taken, such as:

- Medical emergency
- Family emergency
- Sudden illness or change in condition
- Appointment that runs unexpectedly late without sufficient notice

Riders should contact the River Bend Transit operations center when experiencing no-shows due to circumstances beyond their control.

3.3: POLICY FOR HANDLING SUBSEQUENT TRIPS FOLLOWING NO-SHOWS

When a rider is a no-show for one trip, all subsequent trips on that day are automatically canceled by the scheduling software. To remain on the schedule for any subsequent trips that day, the rider must call the River Bend Transit dispatch department and those trips will be honored.

3.4: SUSPENSION POLICIES FOR A PATTERN OR PRACTICE OF EXCESSIVE NO-SHOWS

Bettendorf Transit reviews all recorded no-shows to ensure accuracy before recording them in a rider's account.

Each verified no-show consistent with the above definitions counts as 1 penalty point. Riders will be subject to suspension after they meet one of the following conditions:

- Accumulate 10 penalty points in one calendar month, or
- Have no-showed 40% of scheduled trips in a calendar month.

All suspension notices include a copy of this policy, information on disputing no-shows, and how to appeal suspensions. Suspensions begin on the date specified in the suspension notice.

The first violation triggers a warning letter but no suspension. Subsequent violations result in the following suspensions:

- Second violation: 2-day suspension
- Third violation: 5-day suspension
- Fourth violation: 10-day suspension
- Fifth and subsequent violations: 30-day suspension

The violations cover a 12-month period starting on the date specified in the suspension notice.

3.5: POLICY FOR DISPUTING SPECIFIC NO-SHOWS

Riders wishing to dispute specific no-shows must do so within 5 business days of receiving suspension letters. Riders should contact the Bettendorf Transit operations center at 563-344-4085, Monday through Friday from 7:00 a.m. to 5:00 p.m. to explain the circumstance, and request the removal of the no-show or late cancellation.

3.6: POLICY FOR APPEALING PROPOSED SUSPENSIONS

Riders wishing to appeal suspensions under this policy have the right to file an appeal request, which can be in person, by telephone, or in writing. Riders must submit appeal requests within 5 business days of receiving suspension letters. Riders who miss the appeal request deadline will be suspended from using services for the duration outlined in the suspension notice. All suspension appeals follow Bettendorf Transit's appeal policy.

-----**End**-----

Appendix A



Bettendorf Transit Paratransit Program Application

3 Parts | Applicant Pages 1 – 8, Medical Professional 9 – 13, Office Review 14-15

The City of Bettendorf maintains an ADA Paratransit Program to support community members whose disabilities prevent them from using fixed transit services. Individuals interested in the service are highly encouraged to read this introduction and background BEFORE completing the application as there are eligibility requirements.

What is Paratransit Service?

Under the Americans with Disabilities Act (ADA), paratransit service functions as a “safety net” for persons whose disabilities prevent them from using the regular fixed route transit system. Paratransit service is by nature a shared-ride service. The standard of service is not intended to resemble that of a taxi service, which typically transports passengers directly to their destination. Paratransit service is not intended to provide a comprehensive level of mobility that meets all of the travel needs of all persons with disabilities at all times. As such, the service criteria are intended to mirror the level of service provided by the fixed route system. A paratransit trip should be comparable in length to an identical trip on the fixed route system, including the time necessary to travel to the bus stop, wait for the bus, actual riding time, transfers, and travel from the final stop to the person’s ultimate destination.

What Paratransit Service is Not

Paratransit service is not intended for individual use because it is easier or cheaper than the fixed route service.

What is the Service Area for Paratransit Service?

The paratransit service is only provided for pickup and drop-off locations within 3/4 miles of an existing bus route.

How does Paratransit Service work?

All transportation under the paratransit program is by appointment only. Eligible individuals must call River Bend Transit at the number provided to make a reservation and obtain trip information (TDD equipped). Reservations may be made up to fourteen (14) days in advance, but no later than one (1) day before desired trip date. Service is provided during Bettendorf Transit hours of approximately 6:00 a.m. to 7:00 p.m. Monday through Friday, and Saturdays from 8:30 a.m. to 5:30 p.m.

Be mindful, all reservations are within a 60-minute window. When making your reservation, eligible individuals provide the location and time they need to be at a location, along with the location to be picked up from. Operators will generally advise the best window to make that appointment, and ask additional questions to schedule the round trip.

When scheduling, give yourself ample time and prepare to wait. Example scenarios.

- Individual has an appointment at 10:00 a.m. It takes roughly 30 minutes to get from the pickup location to the drop off location. The paratransit reservation will likely be for pickup between 9:00 a.m. and 9:30 a.m. Individuals must be ready to board; the bus will not wait longer than 5 minutes.
- Individual scheduled pickup from an appointment during the window of 1:00 p.m. to 1:30 p.m. The appointment was complete at 12:30 p.m. Pickup cannot be rescheduled to an earlier time. If the appointment runs late, the individual would call River Bend Transit to reschedule pickup which will be the next available pickup window. This could be a half hour later or three hours later depending on existing reservations and routes.

The cost for the paratransit service is \$2.00 for a one-way trip and \$4.00 for a round trip. One personal care attendant may ride with the individual for free.

Other passengers may be picked up or dropped off during your trip.

What are the Eligibility Requirements for Paratransit Service?

Eligibility for paratransit service is based on an individual's functional ability, specifically whether they are able to use the fixed route transit system independently or not. A person's age, income, inability to drive, travel preference, or inconvenience are not considered qualifying factors. Eligibility for paratransit service is not automatically assumed because of a disability as eligibility is not intended to be based on a medical diagnosis or type of disability, rather an individual's inability to use the fixed route transit system. A detailed explanation of how an individual's disability makes it functionally impossible to use an accessible fixed route bus must be provided in the application and certified as complete and true.

Eligibility criteria and evaluation of an individual's abilities ensures the program meets ADA requirements, Bettendorf Transit's ability to meet basic paratransit service requirements, and supports sustainability of the Paratransit Program for persons whose disabilities prevent them from using the regular fixed route transit system. Without criteria and evaluation, the program and its ability to meet basic service requirements for persons whose disabilities prevent them from using the regular fixed route transit system would be at risk due to overuse/oversubscription.

Individuals who are eligible to use Paratransit fall into one or more of three categories:

- 1. Eligibility Category 1 - A person with a disability who cannot navigate the transit system without assistance.** An individual under this category is unable, as the result of a disability, and without the assistance of another individual (except the operator of a wheelchair lift or other boarding assistance device), to board, ride, or disembark from any vehicle on the system which is readily accessible to and usable by individuals with disabilities. Examples of individuals who would qualify under this category include those with intellectual, cognitive, vision, or psychiatric disabilities who cannot independently navigate the fixed route system for some or all of their trips.
- 2. Eligibility Category 2 - A person with a disability who requires an accessible vehicle when one is not available.** An individual under this category needs the assistance of a wheelchair lift or other boarding assistance device and is able to use accessible fixed route service, but the available fixed route service is not accessible. Eligibility under this category is necessary when accessible vehicles are not being used to provide service on the fixed bus route the individual wishes to use, or if a boarding or disembarking location (i.e., bus stop) is inaccessible and the lift or ramp cannot be deployed there. All buses the City of Bettendorf procures are ADA-accessible. Therefore, City staff will reach out to individuals who include themselves in this category for further information.
- 3. Eligibility Category 3 - A person with a disability who is unable to reach the transit stop.** An individual under this category has a specific impairment-related condition which prevents the individual from traveling to or from a bus stop in the fixed route system. The individual's specific impairment-related condition is a key

factor. For example, for an individual who uses a wheelchair, a lack of sidewalks or barriers along the sidewalk (such as lack of curb ramps, or an object constraining the width of a sidewalk so as to be impassable) may prevent them from being able to travel to a bus stop. Other examples of individuals who qualify under this category include individuals prevented from traveling to a bus stop during extreme temperatures because their disability makes them unable to be outside in temperature extremes, and individuals with a vision disability who may be unable to cross a complex intersection in order to get to or from a bus stop.

Types of Eligibility

Applications will be reviewed for eligibility and a determination made. If an applicant is approved, eligibility may have limitations. There are three types of eligibility the City may grant based on a completed application. Both the applicant and their medical professional will need to select which type of eligibility category the applicant is in and which type of eligibility is being sought as part of the application process.

1. **Unconditional Eligibility** – An individual who is unable to use fixed route transit services under any circumstances requires unconditional eligibility, allowing the individual to make all trips using paratransit. Individuals with Unconditional Eligibility are required to reapply for paratransit service every three years, the determination is not for an indefinite period of time.
2. **Conditional Eligibility** – An individual may be able to use the fixed route system for some trips. This type of eligibility is for persons whose disability is episodic (flareups) or for whom the disability alone does not warrant eligibility, but when the disability is combined with a condition outside of anyone’s control, i.e. weather/snow on ground, the combination prevents usage of fixed route service. Under conditional eligibility paratransit services would only be available for those trips that the individual cannot make using the fixed route system, based on the conditions of the particular trip. As an example, if a person with a disability is unable to be outside in temperatures below 40 degrees for any length of time, they would be granted eligibility for paratransit in the fall, winter, and early spring, but not the summer.
3. **Temporary Eligibility** – An individual who experiences a temporary loss of functional ability that prevents them from using fixed route service may be granted temporary eligibility. For example, an individual may need to undergo two months of treatment for a health condition, resulting in severe fatigue that prevents use of the fixed route service for the duration of the treatment.

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- Social Security Disability Insurance (SSDI)/ Medicaid Waivers.** If you currently qualify for and receive SSDI benefits and/or have some form of Medicaid waiver such as the Iowa Home and Community Based Services (HCBS) waiver, please check this box, complete the top half of Page 6 through “Applicant and Summary of Disability”, sign the bottom of Page 8 and attach documentation to your application. You do not need to complete Part 2 of the application if you qualify under this section.

Accessibility Features of the Fixed Route Transit System

Be aware of the accessibility services available using the fixed route system. All of Bettendorf Transit's buses are equipped with the following features to promote equal opportunity and access to public transportation

- Wheelchair Securement System
- Deployable ramps. The bus has a ramp that can be automatically raised and lowered for easier access.
- Automated Voice Annunciators that communicate approaching intersections and bus shelters automatically.

Application Introduction

There are two parts to the application for the Paratransit Program. All information provided in the application is kept confidential.

1. ADA TRANSIT PARATRANSIT ELIGIBILITY - APPLICANT INFORMATION, and the
2. MEDICAL/PROFESSIONAL VERIFICATION FOR ADA PARATRANSIT ELIGIBILITY

Partially completed applications will not be processed and may delay approval for use of paratransit service. BOTH THE APPLICANT AND MEDICAL PROFESSIONAL VERIFICATION FORM MUST BE COMPLETED AND SUBMITTED TO BE CONSIDERED; ANY SECTION(S) LEFT BLANK WILL BE RETURNED TO THE APPLICANT TO COMPLETE BEFORE CONSIDERATION CAN BEGIN.

PART 1 | ADA TRANSIT PARATRANSIT ELIGIBILITY - APPLICANT INFORMATION

You or your designee must answer ALL questions. A detailed explanation of how your disability makes it functionally challenging for you to use an accessible bus is required and you must certify that information is complete and correct by signing and dating.

PART 2 | MEDICAL/PROFESSIONAL VERIFICATION FOR ADA PARATRANSIT ELIGIBILITY

This form must be completed by a licensed medical professional (not a relative or friend) that sees you on a professional basis. Examples of a medical/licensed professional include: registered nurse, physician, psychologist, chiropractor, physician's assistant, or nurse practitioner employed by a medical facility. The medical provider must complete your application as thoroughly as possible; incomplete forms will be returned to applicant.

Submit the completed Part 1 and Part 2 in one of four ways. Applicants will not be permitted to schedule any transportation through the Paratransit Program until written approval of the application is provided or the application has been under consideration for at least 21 days.

- By mail to: Bettendorf Transit, 4403 Devils Glen Rd, Bettendorf, IA 52722.
- By hand delivery Monday through Friday, 7:00am to 5:00pm, to Bettendorf Transit, 4403 Devils Glen Rd, Bettendorf, IA 52722.
- By Fax to (563) 344-4075.
- By Email to: transit@bettendorf.org.



Application Processing

All applicants, whether new or renewal, must complete this application form.

A determination of eligibility will be made by Bettendorf Transit staff within 21 days of a completed application. Incomplete applications will be returned to the applicant.

ADA Paratransit Passes

ADA Paratransit Passes are only valid for the timeframe indicated on the card provided, and must be renewed prior to the expiration date; all passes are the property of the City of Bettendorf and are non-transferrable and subject to confiscation if abused or if rules and regulations are not followed.

To Appeal a Determination

If it is determined that you are able to use the fixed-route some, or all of the time, and are denied eligibility or only granted conditional eligibility you may appeal the decision. Written appeals must be received within 60 calendar days of the denial letter. Appeals should state the desire to appeal the decision that was made and why you feel you should be eligible for the ADA Paratransit program. Attach copies of any pertinent information. A decision will be made within 21 calendar days. An appeal decision is a final determination. Individuals may only re-submit an application if their condition changes and makes them unable to use the regular fixed-route transit system.

All appeals must be in writing and submitted:

- By mail to: Bettendorf Transit, 4403 Devils Glen Rd, Bettendorf, IA 52722.
- By hand delivery Monday through Friday, 7:00am to 5:00pm, to Bettendorf Transit, 4403 Devils Glen Rd, Bettendorf, IA 52722.
- By Fax to (563) 344-4075.
- By Email to: transit@bettendorf.org.

Questions & Assistance

- Direct questions about an application to 563-344-4085.
- For assistance completing an application, call 563-344-4085.

Sincerely,

Bettendorf Transit

--- PROCEED TO PAGES 6 THROUGH 8 ---



Bettendorf Transit Paratransit Program Application

3 Parts | Applicant Pages 1 – 8, Medical Professional 9 – 13, Office Review 14-15

PART 1 - ADA TRANSIT PARATRANSIT ELIGIBILITY - APPLICANT INFORMATION

It is important to complete every part of this form completely and as accurately as possible. Applications not fully completed, clearly written, or deemed false will not be considered and returned, delaying the process.

Type of Application. Check One.		<input type="checkbox"/> New Applicant		<input type="checkbox"/> Recertification/Renewal
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Have you ever used the Bettendorf Transit Fixed Route Service?		<input type="checkbox"/> Yes		<input type="checkbox"/> No
--	--	------------------------------	--	-----------------------------

Applicant and Summary of Disability

First Name		Middle Name		Last Name	
------------	--	-------------	--	-----------	--

Date of Birth	____ / ____ /	Phone #	
---------------	---------------	---------	--

Physical Address (3+ Months)	
------------------------------	--

Describe current disability which can be verified by a medical professional.

Is your disability Permanent or Temporary?		<input type="checkbox"/> Permanent		<input type="checkbox"/> Temporary, How Long? _____
--	--	------------------------------------	--	---

Is your disability supported by a mobility aid?		<input type="checkbox"/> Yes		<input type="checkbox"/> No
---	--	------------------------------	--	-----------------------------

If Yes, explain	
-----------------	--

What Functional Abilities are impacted by your disability described above that prevents the use of the Bettendorf Transit fixed-route bus system (all transit buses are equipped with ramps, wheelchair securement systems, and automated voice annunciators)?

Applicant Abilities

Do you now use regular fixed route bus service?		Yes		No		Sometimes
---	--	-----	--	----	--	-----------

If yes, how many times a week?	
--------------------------------	--

If no, please explain.	
------------------------	--

Have you ever received travel training on Bettendorf's fixed-route system?		Yes		No	
--	--	-----	--	----	--

Would you be interested in receiving travel training?		Yes		No	
---	--	-----	--	----	--

Would you like to receive information about the fixed-route system?		Yes		No	
---	--	-----	--	----	--

Do you require a Personal Care Attendant when you travel?		Yes		No		Sometimes
NOTE: This person is not a companion or escort, but someone who will be helping you with mobility assistance, personal care, communication, transportation, sign language interpretation, providing services as a reader, etc., as you make your trip.						

Do you require a service animal when you travel?		Yes		No		Sometimes
--	--	-----	--	----	--	-----------



Bettendorf Transit Paratransit Program Application

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Are you able to board or exit a wheelchair accessible bus independently?		Yes		No		Sometimes					
Are you able to ride a wheelchair accessible bus independently?		Yes		No		Sometimes					
Are you able to cross street(s) independently?		Yes		No		Sometimes					
Are you able to get around in a store or shopping mall by independently?		Yes		No		Sometimes					
Are you able to leave and return to your regular destinations independently?		Yes		No		Sometimes					
Are there obstacles that prevent you from getting to/from a bus stop?		Yes		No		Sometimes					
Are you able to adapt to unexpected changes in routine?		Yes		No		Sometimes					
Are you able to travel on slight inclines?		Yes		No		Sometimes					
Are you able to travel on flat surfaces?		Yes		No		Sometimes					
Is there a physical barrier that combined with your disability prevents travel to and from a bus stop? Example: Stairs, No Sidewalk, No Curb Ramp)		Yes		No		Sometimes					
Is your disability affected by weather/seasonal/lighting conditions?		Yes		No		Sometimes					
Can you provide names, addresses & telephone numbers upon request?		Yes		No		Sometimes					
Are you able to recognize locations and landmarks either visually or if audibly announced?		Yes		No		Sometimes					
Are you able to identify the bus you need?		Yes		No		Sometimes					
Are you able to ask for, understand, and follow directions?		Yes		No		Sometimes					
Are you able to recognize printed information?		Yes		No		Sometimes					
Can you wait alone at a bus stop for 15 minutes if there is a bench or shelter?		Yes		No		Sometimes					
Can you wait alone at a bus stop for 15 minutes if there is NO bench or shelter?		Yes		No		Sometimes					
If you answered "Yes" or "Sometimes" to any of the Applicant Abilities, explain here (Use page 16 for additional room)											
How far is your residence from the nearest bus route?											
	< 1 Block		1 Block		2 Blocks		1/4 Mile		1/2 Mile		3/4 Mile
Under the best conditions, how many blocks can you walk or travel without the help of another person?											
	< 1 Block		1 Block		2 Blocks		1/4 Mile		1/2 Mile		3/4 Mile
Do changes in weather prevent you from getting to or from a bus stop?							Yes		No		Sometimes
If yes, please explain.											



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Is there something that might help you ride the fixed-route bus system? (Check all that apply)

- Yes, if someone taught me to understand the route, schedule, and fare information.
- Yes, if someone were to show me how to ride the bus.
- Yes, if someone showed me how to get on and off the bus.
- Yes, if the bus were to come closer to where I live and need to go.
- No, none of these would help.

Which Eligibility Category(ies) do you feel you fit into? Find additional detail on Page 1 and 2 of this application.

- A person with a disability who cannot navigate the transit system without assistance.
- A person with a disability who requires an accessible vehicle when one is not available.
- A person with a disability who is unable to reach the transit stop.

Which Type of Eligibility are you seeking? Find additional detail on Page 3 of this application.

Unconditional Eligibility	Conditional Eligibility	Temporary Eligibility
---------------------------	-------------------------	-----------------------

If this application is being completed by someone other than the applicant, provide requested information below.

First and Last Name			
Relationship to Applicant			
Phone		Email	

I, the undersigned, certify that the information on this application is true and correct as provided by the applicant or on behalf of the applicant.

Signature of Applicant		Date	
------------------------	--	------	--

Applicant Certification

I, the undersigned applicant, understand the purpose of this application is to determine my eligibility to use Bettendorf Transit's paratransit service.

I hereby authorize my medical/licensed professional to provide information regarding any medical history as it pertains to my ability, and which is needed for ADA paratransit certification.

I agree to notify Bettendorf Transit of any changes in status of my location, contact information, and/or disability that affects my ability to use paratransit service.

I hereby certify that the information in this application is true and correct and understand that falsification of any information may result in denial of service.

I understand all information will be kept confidential and only the information required providing the service I request will be disclosed.

Furthermore, I understand that Bettendorf Transit representatives will not disclose approvals, denials, or medical information to anyone other than the applicant.

Signature of Applicant		Date	
------------------------	--	------	--

PART 2 – MEDICAL/PROFESSIONAL VERIFICATION FOR ADA PARATRANSIT ELIGIBILITY

Dear Health Care Professional:

This is not a request for copies of medical records.

You are being asked by the applicant named in Part 1 to provide information regarding their disability and its impact on their ability to ride Bettendorf Transit’s fixed-route transit system. The Americans with Disabilities Act (ADA) requires public transit systems to provide paratransit service to persons who, due to a disability, are functionally unable to use the fixed-route system. The goal of the ADA paratransit eligibility process is to ensure that only persons who meet the ADA criteria are regarded as eligible and the service is not being provided to persons who simply want an on-demand service. As such, the service criteria are intended to mirror the level of service provided by the fixed-route system. A paratransit trip should be comparable in length to an identical trip on the fixed-route system, including the time necessary to travel to the bus stop, wait for the bus, actual riding time, transfers, and travel from the final stop to the individual’s ultimate destination.

For additional context when completing this form, the Department of Transportation (DOT) Americans with Disabilities Act (ADA) regulations, 49 C.F.R., Appendix D, Section 37.125 explains: “The substantive eligibility process is not aimed at making a medical or diagnostic determination. While evaluation by a physician (or professionals in rehabilitation or other relevant fields) may be used as part of the process, a diagnosis of a disability is not dispositive. What is needed is a determination of whether, as a practical matter, the individual can use fixed-route transit in his or her own circumstances. Transit agencies, with input from the communities they serve, devise the specifics of their individual eligibility processes.”

The information you provide will enable us to make an appropriate determination for this applicant. All information is kept confidential.

What is the Service Area for Paratransit Service?

The paratransit service is only provided for pickup and drop-off locations within 3/4 miles of an existing bus route.

What are the Eligibility Requirements for Paratransit Service?

Eligibility for paratransit service is based on an individual’s functional ability, specifically whether they are able to use the fixed-route transit system independently or not. A person’s age, income, inability to drive, travel preference, or inconvenience are not considered qualifying factors. A determination is made based upon an individual’s physical and mental ability to board, ride, and disembark independently from a fully accessible fixed-route vehicle. It is important for all applicants to realize that this is a transportation decision, not a medical authorization.

Please use full sentences to explain how the applicant’s disability functionally prevents them from using the fixed-route system and how they would not have the same problems with paratransit. Failure to follow these instructions can result in insufficient information being presented to substantiate eligibility for paratransit. Please do not list a patient’s diagnosis as the reason the applicant needs paratransit service. A diagnosis of a disability does not establish eligibility.

Eligibility criteria and evaluation of an individual's abilities ensures the program meets ADA requirements, Bettendorf Transit's ability to meet basic paratransit service requirements, and supports sustainability of the Paratransit Program for persons whose disabilities prevent them from using the regular fixed route transit system. Without criteria and evaluation, the program and its ability to meet basic service requirements for persons whose disabilities prevent them from using the regular fixed route transit system would be at risk due to overuse/oversubscription.

For awareness, all buses are equipped with the following features for use by all riders.

- Wheelchair Securement System
- Deployable ramps. The bus has a ramp that can be automatically raised and lowered for easier access.
- Automated Voice Annunciators that communicate approaching intersections and bus shelters automatically.

Additionally, customer service phone line(s) are available to provide bus schedule information and assist customers with their trip routing, including transfers between bus routes.

Persons who are eligible to use paratransit fall into one, or more, of three categories. You will be asked to select which category(ies) best describe your patient.

- 1. Eligibility Category 1 - A person with a disability who cannot navigate the transit system without assistance.** An individual under this category is unable, as the result of a disability, and without the assistance of another individual (except the operator of a wheelchair lift or other boarding assistance device), to board, ride, or disembark from any vehicle on the system which is readily accessible to and usable by individuals with disabilities. Examples of individuals who would qualify under this category include those with intellectual, cognitive, vision, or psychiatric disabilities who cannot independently navigate the fixed route system for some or all of their trips.
- 2. Eligibility Category 2 - A person with a disability who requires an accessible vehicle when one is not available.** An individual under this category needs the assistance of a wheelchair lift or other boarding assistance device and is able to use accessible fixed route service, but the available fixed route service is not accessible. Eligibility under this category is necessary when accessible vehicles are not being used to provide service on the fixed bus route the individual wishes to use, or if a boarding or disembarking location (i.e., bus stop) is inaccessible and the lift or ramp cannot be deployed there. All buses the City of Bettendorf procures are ADA-accessible. Therefore, City staff will reach out to individuals who include themselves in this category for further information.
- 3. Eligibility Category 3 - A person with a disability who is unable to reach the transit stop.** An individual under this category has a specific impairment-related condition which prevents the individual from traveling to or from a bus stop in the fixed route system. The individual's specific impairment-related condition is a key factor. For example, for an individual who uses a wheelchair, a lack of sidewalks or barriers along the sidewalk (such as lack of curb ramps, or an object constraining the width of a sidewalk so as to be impassable) may prevent them from being able to travel to a bus stop. Other examples of individuals who qualify under this category include individuals prevented from traveling to a bus stop during extreme temperatures because their disability makes them unable to be outside in temperature extremes, and individuals with a vision disability

who may be unable to cross a complex intersection in order to get to or from a bus stop.

Types of Eligibility

Applications will be reviewed for eligibility and a determination made. If an applicant is approved, eligibility may have limitations. There are three types of eligibility the City may grant based on a completed application. Both the applicant and their medical professional will need to select which type of eligibility category the applicant is in and which type of eligibility is being sought as part of the application process.

- 1. Unconditional Eligibility** – An individual who is unable to use fixed route transit services under any circumstances requires unconditional eligibility, allowing the individual to make all trips using paratransit. Individuals with Unconditional Eligibility are required to reapply for paratransit service every three years, the determination is not for an indefinite period of time.
- 2. Conditional Eligibility** – An individual may be able to use the fixed route system for some trips. This type of eligibility is for persons whose disability is episodic (flareups) or for whom the disability alone does not warrant eligibility, but when the disability is combined with a condition outside of anyone’s control, i.e. weather/snow on ground, the combination prevents usage of fixed route service. Under conditional eligibility paratransit services would only be available for those trips that the individual cannot make using the fixed route system, based on the conditions of the particular trip. As an example, if a person with a disability is unable to be outside in temperatures below 40 degrees for any length of time, they would be granted eligibility for paratransit in the fall, winter, and early spring, but not the summer.
- 3. Temporary Eligibility** – An individual who experiences a temporary loss of functional ability that prevents them from using fixed route service may be granted temporary eligibility. For example, an individual may need to undergo two months of treatment for a health condition, resulting in severe fatigue that prevents use of the fixed route service for the duration of the treatment.

The information that you provide will allow Bettendorf Transit to make an appropriate eligibility determination for this applicant. Thank you for your cooperation and assistance.

A determination of eligibility will be made by Bettendorf Transit staff within 21 days of a completed application. Incomplete applications will be returned to the submitter.

Sincerely, BETTENDORF TRANSIT

--- PROCEED TO PAGE 12 ---

It is important to complete every part of the form completely and as accurately as possible. Applications not fully completed, clearly written, or deemed false will not be considered and returned, delaying the process.



Bettendorf Transit Paratransit Program Application

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Patient & Paratransit Service Applicant

First Name		Middle Name		Last Name	
Date of Birth	___ / ___ / ___	Date last seen in office (90 days or less)		___ / ___ / ___	

Medical Professional Acknowledgements

I have read the entirety of Section 1 of the Paratransit Program Application Prepared by the Applicant. Yes No

I have read the instructions for completing Section 2 of the Paratransit Program Application. Yes No

Applicant/Patient Abilities & Impairments

Can the applicant give addresses and phone numbers?		Yes		No		Sometimes
Can the applicant recognize a destination or landmark?		Yes		No		Sometimes
Can the applicant manage or cope with unexpected change(s) in routine?		Yes		No		Sometimes
Can the applicant travel safely/effectively through crowded or complex facilities?		Yes		No		Sometimes
Does the applicant have difficulty walking more than 1 block?		Yes		No		Sometimes
If Yes, how far can the applicant walk independently?						
How far can the applicant travel using a mobility device?						
Does the applicant require use of a Personal Care Attendant*?		Yes		No		Sometimes

*A Personal Care Attendant is not a companion or escort, but someone who will be helping the applicant with mobility assistance, personal care, communication, transportation, sign language interpretation, provide services as a reader, etc., during a trip.

How long can the applicant wait outside, if sitting?						
How long can the applicant wait outside, if standing?						
How long can the applicant wait outside, if using a mobility device?						
Can the applicant travel independently?		Yes		No		Sometimes
Do different weather/seasonal conditions affect the applicant's disability and/or inability to travel independently?		Yes		No		Sometimes

If Yes, how?

Specify which functional limitations (impairments) are associated with the applicant/patient's condition. Check all that apply.

Cognitive impairment. If cognitive, please indicate all that apply below.

<input type="checkbox"/> Cannot be left alone to wait for transportation	<input type="checkbox"/> Inability to read or understand information from signs/symbols	<input type="checkbox"/> Cannot recognize vehicles that he/she should board
--	---	---

Visual impairment (with correction). Please describe visual acuity and/or the individual's inability to distinguish shapes and objects near/far, or other visual impairment that prevents the individual from safely walking to, boarding, or riding a bus with correction.

<input type="checkbox"/> Mobility	<input type="checkbox"/> Respiratory	<input type="checkbox"/> Compromised endurance
<input type="checkbox"/> Total hearing	<input type="checkbox"/> Partial hearing	<input type="checkbox"/> Other



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Other Detail About the Applicant/Patient Disability

Is disability expected to be Permanent or Temporary?		Permanent		Temporary, How Long? _____
--	--	-----------	--	----------------------------

Please explain medical diagnosis, physical or cognitive disability which causes the applicant to be unable to independently use a public transit bus some, or all of the time. Describe how the disability prevents the applicant from using Bettendorf Transit's fixed-route system. Please provide detail in layperson's terminology.

Does applicant/patient use a mobility device?		No		Yes, explain _____
---	--	----	--	--------------------

Does a visual impairment prevent the individual from riding in an accessible bus equipped with PA system that automatically communicates approaching intersections & bus shelters?		Yes		No
--	--	-----	--	----

Does the individual have other medical condition(s) we should be aware of?		No		Yes, explain _____
--	--	----	--	--------------------

In your professional opinion can the applicant ride Bettendorf Transit's fixed-route transit system independently?		Yes		No
--	--	-----	--	----

What Eligibility Category and Type of Eligibility Do You Believe the Applicant Is?

What Eligibility Category do you feel the applicant/patient fits into? Find detail on Page 9 of this application.

- A person with a disability who cannot navigate the transit system without assistance.
- A person with a disability who requires an accessible vehicle when one is not available.
- A person with a disability who is unable to reach the transit stop.

What Type of Eligibility best describes the applicant/patient's situation? Find additional detail on Page 9 and 10 of this application.

- An individual who is unable to use the fixed-route transit services under any circumstances.
- An individual who may be able to use the fixed-route system for some trips.
- An individual who experiences a temporary loss of functional ability that prevents them from using fixed-route service.

Medical/Professional Certification

I certify that the information I have provided herein is a fair representation of this applicant's medical impairment or condition and is accurate to the best of my knowledge. I understand the information provided hereto will be used for the sole purpose of determining the applicant's eligibility for paratransit services. I also agree that Davenport Transit may contact me for clarification of any information I have provided, and I will reply in good faith. I certify that the information contained herein is true and correct to the best of my knowledge and ability.

Medical/Professional Completing Application		Date	
---	--	------	--

Medical License #		Phone #		Fax #	
-------------------	--	---------	--	-------	--

Medical Facility/Medical Practice Name	
--	--

Complete Business Address	
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Bettendorf Transit Paratransit Program Application

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Bettendorf Transit Paratransit Application Review – Office Use Only

Applicant Name			
Date Application Received		Application Received Via	<input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> In-Person <input type="checkbox"/> Mail
Application For: <input type="checkbox"/> Category 1 <input type="checkbox"/> Category 2 <input type="checkbox"/> Category 3		Term: <input type="checkbox"/> Unconditional <input type="checkbox"/> Temporary <input type="checkbox"/> Conditional	

Part A

Do the applicant and medical professional’s descriptions match?		Yes		No
Is the applicant claiming eligibility under Category 2?		Yes		No
Is the application complete?		Yes		No
Is a Personal Care Attendant Required and Confirmed by Medical Professional?		Yes		No
If Yes to the above, determine if the requirement is temporary or permanent.		Temp		Perm
Is fixed-route service inaccessible due to the disability and obstacles, such as geography, lack of infrastructure, ADA connectivity, etc.?		Yes		No
If Yes, explain findings based on GIS review and/or on-site inspection.				
Has the applicant, as supported by the medical professional’s determination, demonstrated eligibility due to lack of ability to board, travel or disembark independently?		Yes		No
Is the applicant a good candidate for training on use of the fixed route system?		Yes		No

Part B - Determination

Indicate Category Applicant is Eligible for.

	Applicant is a person with a disability who cannot navigate the transit system without assistance.
	Applicant is a person whose disability requires an accessible vehicle when one is not available.
	Applicant is a person whose disability prevents them from reaching a fixed route.
	Applicant is not eligible for paratransit services.

Explain your determination.



Bettendorf Transit Paratransit Program Application

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Indicate the Term of Paratransit Service the Applicant is Eligible for. Provide an explanation following selection.

Unconditional Eligibility:

Conditional Eligibility:

Temporary Eligibility:

Approved for: Category 1 Category 2 Category 3 **Term:** Unconditional Temporary Conditional

Denied:

Application returned as incomplete: **Date Returned**

Part C – Execute Determination. Check Action(s) Taken. (See Appendix 38.12 for letter templates)

If approved, issue letter indicating the application is approved, under which category the application is approved, and the conditions of approval.

If denied, and applicable, issue letter to schedule an appointment with the applicant to review the application and provide training/assistance on ways to access the fixed-route transit system.

If denied, issue letter of denial. Document reason(s) for denial in Part B.

If application returned due to being incomplete, issue letter of return. Document reason(s) for return in Part B.

Transit Pass Issued Date		Must Reapply By	
Issued By		Date Issued	

File completed form and a copy of the determination letter in the Bettendorf Transit Staff Drive.

Part D - Appeals

Date Appeal Received		Appeal Received By			
Did the appeal include information or details that would move the decision from denied to approved?			Yes		No

Explain your findings and decision to either approve or deny the appeal. Include evaluation of the application and appeal by others, if applicable.

Approved for: Category 1 Category 2 Category 3 **Term:** Unconditional Temporary Conditional

Denied:

Part E – Execute Determination of Appeal. Check Action(s) Taken. (See Appendix 38.12 for letter templates)

If appeal approved, issue letter indicating the application is approved, under which category the application is approved, and the conditions of approval.

If appeal denied, issue letter of denial. Document reason(s) for denial in Part D.

Transit Pass Issued Date		Must Reapply By	
Issued By		Date Issued	

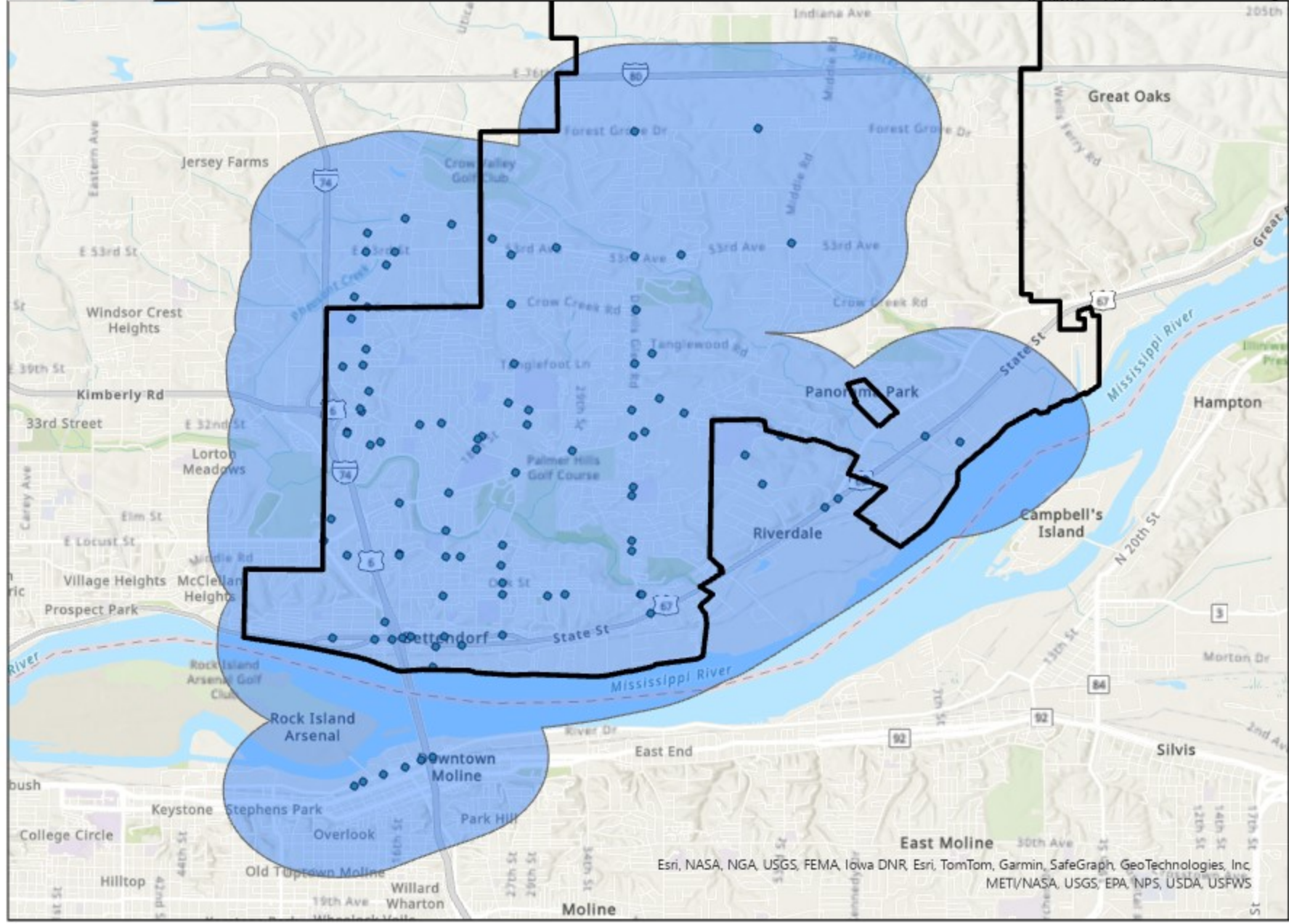
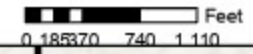
File completed form and a copy of the determination letter in the Bettendorf Transit Staff Drive.

Additional Space for Answers

Appendix B



Paratransit Service Area



Esri, NASA, NGA, USGS, FEMA, Iowa DNR, Esri, TomTom, Garmin, SafeGraph, GeoTechnologies, Inc, METI/NASA, USGS, EPA, NPS, USDA, USFWS



Appendix C

Fares

Fixed Route Schedule	
Adult Cash Fare/ Children Over Age 5	\$1.00
Senior Citizens (60+)/ Individuals with Disabilities (Medicare Card Qualifies)	\$0.50
Children Under Age 5 (with Paid Adult)	Free
K-12 Student Traveling to and from School	Free
College Student (with Valid ID)	Free
Veterans (with Valid VA Card/ State ID with Veteran Stamp)	Free
Paratransit & Dial-A-Bus Fare Schedule	
Individual Cash Fare	\$4.00
Senior Citizens (60+)/ Individuals with Disabilities (Medicare Card Qualifies)	\$2.00
Accompanying Aide	Free
Veterans	Free
Passes	
Full Fare Punch Pass: 13 Trips (Bettendorf Only)	\$10.00
Half Fare Punch Pass: 13 Trips (Bettendorf Only)	\$5.00
QC Monthly Pass (available at the Bettendorf Transit office and from drivers)	\$30.00