



# Emergency Ride Home Program

If you are currently participating in a non-Measure C commuter vanpool and you worry about how you would get home should there be an unforeseen emergency, Valleyrides may help ease your concerns.

## **What is the Emergency Ride Home program?**

The Emergency Ride Home (ERH) program provides commuters who vanpool to work with up to five rides home or to their automobile from work annually, if an unscheduled or unexpected event occurs. Unused rides are not transferable.

The ERH program will reimburse a participant for a taxi ride or car rental if a situation arises that unexpectedly prohibits that person from using their vanpool to get home.

## **How Do I Use the Emergency Ride Home (ERH) Program?**

To use the ERH Program, you must:

- Submit an eligibility application to your vanpool provider before you need a ride home. After it is reviewed for accuracy and completion, it will be forwarded to the Valleyrides office;
- Once Valleyrides has processed your application, you will be mailed an enrollment letter approving your program participation, a reimbursement form and instructions on the reimbursement process. Please call 559-441-RIDE if you have additional questions.
- Ride to work by vanpooling in an approved van of at least 6 riders and 1 driver;
- Commute to any Fresno County area;
- Experience an unscheduled event which causes you to need the service.

ERH is to be provided for unforeseen emergency trips ONLY. Examples include:

- Employee is unexpectedly required to work late. Unscheduled overtime or late meeting (i.e., no advance warning). Supervisor authorization is required.
- Illness or crisis of employee or immediate family member (i.e. child, spouse, parent)
- Breakdown or accident of vanpool vehicle on way to or from work (i.e., not a vehicle that was planned to be in the shop for several days)

ERH can only be used by approved vanpools who have not been awarded Measure C funding under any vanpool program.

## **Eligibility and Exclusions:**

Participants **must** pre-qualify for the Emergency Ride Home Program using this form. Applicants must use an approved vanpool transportation provider and be a registered vanpool passenger/driver. Current approved vanpool providers include Kings Area Rural Transit (KART), Enterprise, and VPSI. **The Emergency Ride Home can only be used on days that the participants have gone to work using an approved vanpool.** Taxi rides 0-20 miles (at maximum cost of \$51 per trip) or a rental car for more than 20 miles (at an average cost of \$55 per trip) will be reimbursed up to five (5) times per fiscal year (July 1 through June 30), with a maximum of \$275.00 per applicant, while funding is available. **Gratuities will not be reimbursed.**

**ERH service cannot be used for any of the following reason, including but not limited to:**

- A ride to work
- Scheduled overtime or overtime that was not authorized by a supervisor
- Personal errands or pre-planned medical appointments
- Medical emergencies (i.e. when an ambulance is needed)
- Business-related travel
- Termination of employment

- Intermittent stops or non-emergency related side-trips on the way home
- Natural disasters or civic emergencies (e.g., earthquake, blizzards, heavy snow or rain storms, terrorist attack, demonstration, etc.)
- Any type of building closings or evacuations
- Transportation to a doctor or hospital resulting from an on-the-job injury. *ERH cannot be used to replace an employer's legal responsibility under workers' compensation regulations.*

### **How Do I Use the Guaranteed Ride Home Program?**

If you have received an enrollment confirmation letter via mail or email from Valleyrides stating you are registered for the ERH program, and you have an unscheduled event, please call your vanpool provider immediately and notify them of your emergency. If your trip is less than 20 miles away from your home or park and ride location, please call a taxi after you have notified your vanpool provider. If your trip is more than 20 miles away from your destination please call a rental car agency. Typically, taxi service providers can arrive in approximately 25 minutes, however, response times are not guaranteed.

### **Procedure for Reimbursement:**

**You pay the entire cost** of the taxi ride or rental car, then complete and return a reimbursement form, including the original receipt. Upon verification and approval of your request for reimbursement, a check will be mailed to your address. **Gratuities for taxi services will not be reimbursed.** *If employees do not have adequate funds on hand, most taxis accept credit cards.*

### **Allowable Reimbursements:**

Trips of 0-20 miles one-way: taxicab at maximum cost of \$51 per trip

Trips 20+: Enterprise rental car at an average cost of \$55 per trip

All reimbursement requests must be submitted within 45 days of the date of the trip.

### **Restrictions:**

Valleyrides reserves the right to verify employment and your actual work schedule upon enrollment in the ERH Program. The Program will not pay for any penalties or fees incurred through use/misuse of taxi cars or rental car vehicles and any charges beyond the allowed reimbursable amount. The Program DOES NOT reimburse for gasoline expenses. Employees should not drive if they are experiencing illness, emotional distress, or exhaustion, are not able to return the car within 24 hours.

*\*Funding for the ERH program is provided through the Council of Fresno County Governments (Fresno COG).*

For questions or to receive additional Emergency Ride Home applications, contact Valleyrides at 559-441-RIDE, or log onto our website at [www.valleyrides.com](http://www.valleyrides.com)

***Please retain this page for your records***

2035 Tulare Street, Suite 201, Fresno, CA 93721 • 559-441-RIDE (7433) • [www.valleyrides.com](http://www.valleyrides.com)

# Emergency Ride Home Program Application

Thank you for your interest in the Emergency Ride Home Program. In order to register you in this program, we require that you provide all of the following information. **(PLEASE PRINT CLEARLY)**

## Vanpool Primary Driver:

Name \_\_\_\_\_ Phone(home/cell) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Employer Name \_\_\_\_\_ Supervisor Name & Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Vanpool # \_\_\_\_\_ Vanpool Leasing Company \_\_\_\_\_

## I certify that I am a user of an approved alternative transportation mode:

Commuter Vanpool  Farmworker Vanpool

## I certify that I do not qualify for Measure C subsidies or reimbursements under any commute program, and I have not received any Measure C funding.

I do not qualify for Measure C funding  
 I do qualify for Measure C funding  
 I am currently receiving Measure C subsidies and reimbursements

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

**Please visit and register in the [Valleyrides.com](http://Valleyrides.com) website which will provide you with name(s) of other potential rideshare partners. In doing so, your name will be released to other commuters.**

**Please complete the information below for all members of the vanpool. Each member of the vanpool must register independently to receive the Emergency Ride Home benefit.**

2. Name \_\_\_\_\_ Signature \_\_\_\_\_  
(Please Print)  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (work) \_\_\_\_\_ (home) \_\_\_\_\_ Employer Name & Phone \_\_\_\_\_

3. Name \_\_\_\_\_ Signature \_\_\_\_\_  
(Please Print)  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (work) \_\_\_\_\_ (home) \_\_\_\_\_ Employer Name & Phone \_\_\_\_\_

4. Name \_\_\_\_\_ Signature \_\_\_\_\_  
(Please Print)  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (work) \_\_\_\_\_ (home) \_\_\_\_\_ Employer Name & Phone \_\_\_\_\_

5. Name \_\_\_\_\_ Signature \_\_\_\_\_  
(Please Print)  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (work) \_\_\_\_\_ (home) \_\_\_\_\_ Employer Name & Phone \_\_\_\_\_

6. Name \_\_\_\_\_ Signature \_\_\_\_\_  
(Please Print)  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (work) \_\_\_\_\_ (home) \_\_\_\_\_ Employer Name & Phone \_\_\_\_\_

If you have more than 6 passengers, please attach another sheet. Return this application to your vanpool provider. Any requested and approved reimbursements will be mailed to your home address. Call 559-441-RIDE if you have additional questions regarding this program.