

## Volunteer Vanpool Driver Application

- **Safely operate** a 7, 12 or 15- passenger vanpool vehicle, on a planned route while adhering to an established time schedule.
- **Adhere to and apply Washington State traffic regulations and Agency vanpool policies and procedures.** Wear seatbelts at all times, by you and your passengers.
- **Understand any citation** resulting from the operation of the van is the responsibility of the person driving the van at the time of issuance of the citation. The driver and backup drivers must report any citation resulting from a moving traffic violation to the STA Vanpool Office within 24 hours whether the violation was committed while driving the van or another vehicle.
- **Immediately report any van accident involving bodily injury or property damage to STA Dispatch or STA Vanpool Office.**
- **Report non-vehicular accidents** involving a van passenger to the STA Vanpool Office within 24 hours.
- **Fuel vehicle** or obtain assistance from riders or service station attendant.
- **Clean interior and exterior** of vehicle at least once a month or obtain assistance from others.
- **Perform daily inspections** and immediately report any problems to Spokane Transit.
  - ✓ Check for fluid leaks.
  - ✓ Check for body damage.
  - ✓ Ensure that no obstacles are in the path of the vehicle.
  - ✓ Check gauges after 30-second vehicle warm-up.
  - ✓ Ensure mirrors are clean and properly adjusted.
  - ✓ Ensure windows are clean and clear of fog, ice, or snow before operating vehicle.
  - ✓ Report any windshield chips or cracks at service time (immediately if they are in your line of vision).
  - ✓ Ensure that seatbelts are operational.
  - ✓ Ensure that the interior of the van is clean and free of debris and that the area under the driver's seat is free of any items
  - ✓ Check that the brakes are working properly.
  - ✓ Ensure that the steering operates properly.
- **Perform weekly inspections.**
  - ✓ Check the oil level. Add oil if needed. Check the windshield fluid level. Add fluid if needed.
  - ✓ Check the tire pressure and tire tread. Fill air to appropriate level. Report unusual tire wear.
  - ✓ Check the wipers. Replace or request to have them replaced at next maintenance.
  - ✓ Check that headlights, taillights, directional signals, and emergency flashers work properly.
  - ✓ Ensure that the heater, defroster, and air conditioner work properly.
- **Swap primary van for spare van** within 48 hours of a phone call from Spokane Transit. The turnaround ensures timely maintenance of the vehicles.
- **Be reachable by phone or e-mail during normal business hours.** Be responsive to our communications when we leave a message.

My signature indicates that I have reviewed each of the essential functions and agree that I can complete each task.

Printed Name \_\_\_\_\_

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

# Volunteer Vanpool Driver Application

## APPLICANT INFORMATION:

**PLEASE PRINT**

_____ NAME			_____ CURRENT VAN # (IF EXISTING VAN)			_____ PRIMARY DRIVER		
_____ ADDRESS			_____ EMPLOYER			_____ JOB TITLE		
_____ CITY		_____ STATE		_____ ZIP CODE		_____ WORK ADDRESS		
_____ E-MAIL ADDRESS			_____ SUPERVISOR			_____ SUPERVISOR PHONE		
_____ CELL PHONE		_____ WORK PHONE		_____ HOME PHONE				

**WORK HOURS: FROM:** \_\_\_\_\_ : \_\_\_\_\_ **AM PM** **TO:** \_\_\_\_\_ : \_\_\_\_\_ **AM PM** **WORK DAYS: M T W Th F S S**

## APPLICANT DRIVER HISTORY:

Do you have a current and valid Washington or Idaho Driver's License? (Please attach a legible copy)		Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, please explain:		
Have you held a driver's license for more than 5 years?	License issue date:	
Driver's license number:	I authorize STA to obtain future driving records for the purpose of determining my driving eligibility	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are there any restrictions on your driver's license? If restricted, state type and date of restriction:		Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever had your driver's license suspended, revoked, or refused? If yes, please explain:		Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you been convicted during the last 10 year of driving while intoxicated or under the influence of drugs? If yes, please explain (date, charge, jurisdiction, etc):		Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you had any accidents or moving violations during the past three (3) years?		Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Please indicate below any vehicle accidents of any type or cause you have been involved in, either as owner or otherwise, during the last three years:</b>		
DATE:	WHO WAS AT FAULT?	
DAMAGE TO YOUR VEHICLE?	AMOUNT \$	
BODILY INJURY"		



*By signing below, I understand that this application warrants a verification of information provided. Applications for Volunteer Driver authorize Spokane Transit to obtain as often as desired my driving record, including all Department of Licensing actions that have taken place regarding the driver's license I now hold, have held, or in the future may obtain. This release continues in effect as long as I continue to serve as a volunteer driver on a Spokane Transit vanpool vehicle.*

Print Name: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**3 WAYS TO SUBMIT YOUR APPLICATION:**

EMAIL COMPLETED APPLICATION TO: STAVANPOOL@SPOKANETRANSIT.COM

FAX YOUR COMPLETE APPLICATION TO: 509-232-6784 ATTN: VANPOOL

MAIL TO: RIDE SHARE  
SPOKANE TRANSIT  
1212 W SHARP AVE  
SPOKANE, WA 99201

**FOR OFFICE USE ONLY**

Application Recd date \_\_\_\_\_

MVR date \_\_\_\_\_

Training date \_\_\_\_\_

Group # \_\_\_\_\_



# Vanpool Gas Card Statement of Usage

My signature below signifies that I have read, understand, and agree to abide by all of the conditions listed on this form. Variance and/or violation of these conditions will result in cancellation of authorization to use the fuel card, collection for monies owed, and possible termination of the vanpool group.

Date Issued:	Vanpool Group #:	PIN: Once approved, the PIN will be assigned.
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Volunteer Driver's Name: *(please print)*

Volunteer Driver's Signature:

**Please Initial**

**DO NOT REMOVE THE FUEL CARD FROM ANY VAN. YOUR PIN NUMBER IS VALID WITH ALL VANPOOL FUEL CARDS.** Fuel cards shall be issued by Spokane Transit to vanpool vehicles and shall remain with the vehicle at all times.

**Authorized Users**

Only Spokane Transit approved volunteer drivers who have been issued a PIN shall use the card. All authorized volunteer drivers will sign for the fuel card agreement.

**Safeguarding**

The card will be kept in the van at all times and the van must be locked when not in use. Each Van group will have an Identification Number (PIN).

**Authorized Purchases**

Purchases shall be limited to vanpool-related purchases only. Purchases of personal items (candy, pop, etc.) are prohibited. Unauthorized purchases will be billed to the individual who made the purchase for immediate payment. Misuse of the card may result in cancellation of the card and termination of the vanpool group. A misuse of a Spokane Transit gas card is a felony. Spokane Transit monitors the use of each vanpool gas card and will take immediate action if inappropriate use occurs.

**Van Washes**

Several area gas stations are equipped with automatic car/van washes and accept the Fuel card. The ability to use the Fuel card for van washes at these stations may reduce our car wash expenses fleet-wide.

**Lost or Stolen Fuel Card**

Lost or stolen cards shall be reported to Spokane Transit Vanpool immediately by calling 509-326-POOL (7665)