

IDLAND ODESSA URBAN TRANSIT DISTRICT; PO BOX 60808; MIDLAND, TEXAS 79711; TEL: (432) 561-9990 FAX: (432) 561-8056

EZ-Rider ADA Paratransit Services Rules of Ridership

Reservations are made within a one-hour window of the intended drop-off or pick-up. It is the responsibility of the client to be ready for pick-up any time within that window.

Reservations are accepted from 8:00 a.m. to 5:00 p.m. Monday through Friday. Reservations must be made no later than 5:00 p.m. one day in advance. Monday trips should be scheduled on Friday; reservation requests left on the EZ-Rider voicemail system over the weekend may be accommodated subject to availability.

Cancelations must be made at least (1) hour in advance. Failure to cancel at least (1) hour in advance will be counted as a "No Show."

The driver shall only wait 5 minutes after (s)he arrives to pick up a client. After 5 minutes, the driver must mark the trip as a "No Show" and continue to his/her next stop.

Accumulation of multiple "No Shows" will result in action outlined in the EZ-Rider No Show and Late Cancelation Policy.

It is the responsibility of the client to advise EZ-Rider if a trip was missed for reasons beyond the client's control.

Clients must present full fare or a pre-purchased ticket when boarding. When paying with cash, clients should have the exact fare amount. Drivers do not make change.

A client may be accompanied by a maximum or (1) companion and (1) Personal Care Attendant (PCA). There is no fare charged for the PCA to accompany the client on paratransit trips; a companion must pay the regular fare.

PCAs are responsible for assisting clients with all personal needs.

Items brought on the bus are limited to what the client can carry aboard without making additional trips.

Back-to-back trips must be scheduled at least (30) minutes apart.

Eating, drinking, and smoking on the bus are prohibited at all times.

Client Statement

I have read and understand the above stated rules for use of ADA Complementary Paratransit Services.

Printed Name: _____

Signature: _____

Date: _____