

TRASPORTATION INCENTIVE BENEFITS APPLICATION STEP BY STEP PROCESS

- After your supervisor has completed registration for the program you will now complete your application.
- Visit: <u>https://www.youtube.com/watch?v=RWsBZSh8w2s&feature=youtu.be</u> for a step by step instructional video on how to fill out your application, or follow the instructions below.

LOG INTO PROGRAM:

https://transitapp.ost.dot.gov/index.cfm



SELECT - Certify/Enroll to begin application

READ- Warning label, you must agree that you understand you role and agree to use it properly **CHECK:** On the application screen check to see if you can complete the application before you start it. Scroll all the way down to the bottom and find the first approver field, use the select boxes to see if your approvers are listed in this section. If your supervisor is not listed **DO NOT** start your application. Contact your supervisor to complete their registration process.



If your supervisor is NOT listed in this section you can NOT continue with the application process

*Reasons why your supervisor is not listed:

1. You didn't Select Your Agency: USAF-REG-ACTIVE

2. Supervisor didn't register or email TIPS POC requesting access.

HTTPS://WWW.TRANSPORTATION.GOV/

APPLICATION:

eason for Certification:	New Transit Benefit Participant	*
	"I have completed the required Transit Benefit Integrity train	ing for my Agency
Ch. 10 - 2011 0	CIVILIAN	
Civilian/Military: 😏	UNILION	

REASON: New Transit Benefit Participant **SELECT:** Civilian/NAF/Military **WORK STATUS:** Must be FULL TIME (Military-Reserve, must be on orders for >30 days)

COMPLETE AN EXPENSE WORKSHEET:

vays follow your Agency work schedu	le policy for sp	ecific guida	ince on the Da	ys per N	fonth entry.				
fined work schedule examples									
 If you work a Flex Schedule of 9- If you work a Compressed sched If you telecommute or work part to 	hours per day, t ule of 10-hour o ime, enter the i	he averag lays, the a number of	e amount of 10 verage amour days you actu	8 Days c it of 16 (ally com	an be entered int Days can be enter mute to/from work	o the Days p ed into the D	er Month column ays per Month column		
			*Select yo	ut trans	portation methods				
		Bus	"Select yo Other Bus	ul trans	Other Method	Vanpool			
Vanpoo	Dang Var	Bus	"Select yo Other tius	ut trans	Other Method	Vanpool	16	5	160.00

SELECT ONE: Vanpool/Bus/Rail

NAME OF COMPANY: UTAH TRANSIT AUTHORITY OR Enterprise

DAILY EXPENSE: Contact Luwanna at lfitzgerald@rideuta.com or 801-287-5358 OR Abby at 563-499-0530 with assistance on what your van-pool expense may be. This amount is a monthly approved AF Benefits and may not be the total amount owed (put this amount in the monthly block and the system will calculate the rest, i.e. days and daily rate.

DAYS PER A MONTH: The system will generate if you followed directions

MONTHLY EXPENSE: See VPM for assistance or view YouTube video timed at 8:56 for help. If you telework view video timed at 10:00.

https://www.youtube.com/watch?v=RWsBZSh8w2s&feature=youtu.be

IDENTIFIER:

G Transit Benefit Program Application				
'Identifier: 9				
Name:	Name (Last)	Name (First)		
Email Address:	first.last@Agency.mil		*Work Phone: 😧	(202) 123-4567
*Common Identifier: 0	Green Commuter			

IDENTIFIER: Ten digit EDIPI from CAC NAME: Last, First Name, and Middle initial EMAIL ADDRESS: Government Email Address WORK PHONE: Phone number you can be reached COMMON IDENTIFIER: First initial of you First Name and the first 4 of your Last Name

AGENCY:

Select Your Agency: O	DOI-OFFICE OF THE SOLICITOR .	*Region: O	DC	
			\uparrow	
*Admin: O	SOL-SOLICITOR			
	Populates from Select Your Agency			
Accounting Code: 0		Select.		DO NOT Sel
	Click the Select button to select Accounting Code			Hill AFB Select Ogder
Routing Symbol: 9		Select		
	Click the Select button to select Routing Symbol			
Location/Building: O		Select		
	Click the Select button to select Location/Building		•	
	I certify that my usual monthly Transit commuting costs are 🧿		S 160.00	
	This field is automatically calculated			

SELECT YOUR AGENCY: USAF-REG-ACTIVE REGION: OGDEN, UT ADMIN: Hill AFB

WORK INFORMATION:

 Fill out according to where you usually commute and from where you usually commute Work Information

'Work Address:	1594 Ocean View Hwy					
"Work City:	Oklahoma City	*Work State:	OK	٠	"Work Zip:	12345
esidence Information						
*Address:	9874 Beech Lane					
	Apartment 71					
*City:	Suburban City	*State:	OK	*	*Zip:	23456

SELECT APPROVERS:

If you don't see your supervisor in the drop down list unfortunately, you will have to stop here and come back when they have completed their registration process.

Confirm A	pprov	ers		
Approver Information				
*Approving Official: 0		Select	'Manager/Fund Certifier: 0	Select
	Click the Select button to Approving Official	select		Click the Select button to select Manager/Fund Certifier
*Point of Contact: 0	CHERIJOHNSON_OST	Select	Manager Phone:	
	Click the Select button to Contact	select Point of		

SUPERVISOR/ 1ST APPROVING OFFICAL: Your Supervisor POC or 2ND APPROVING OFFICAL: JANAE STEUDE POINT OF CONTACT: JANAE STEUDE MANAGERS PHONE: Supervisor's phone number

SMART TRIP CARD:

Smart Trip Card Number: This will be <u>NA</u> for everyone

<u>COMMENTS FOR AGENCY APPROVERS</u>: Make sure you list any changes you're making. If you are a new participant you will need to list the <u>Van Managers name and Van Number</u> you'll be

bining.		
	All Participants outside of the NCR - Enter "NA"	If this information not noted in
*SmartTrip Card Number: 🛛	NA	approvers your
Comment for Agency Approvers: 0	Enter any information to assist application approval. For instance, an intern may enter start and stop dates. An employee who parks may enter: I will turn in my Parking Pass on August 17.	application will be disapproved.
	You have 1808 characters remaining	

APPLICATION COMPLETED:

Thank you, your SmarTrip and Rate Change Application has been submitted. Thank You for enrolling in the Transit Benefit Program.

IF YOUR APPLICATION IS DISAPPROVED:

HOW TO TAKE CORRECTIVE ACTION: (from the home page)

CLICK: Transit application button SELECT: An action to continue displays REASON FOR DISAPPROVAL: Will be at the top in red (see example on NEXT page)

	Reason: TEST Disapproval	
elect an Action to Continue		
	Employer: Federal Deposit Insurance Corporation	
	Request information	
	O Update Disapproved Certification 0	
	Contrast 1	
	Conside	

CLICK: Delete application and start over button- this will revert this to the last submitted application. If this is your first time using this system you'll be reverted back to your profile information. Correct reason for disapproval and resubmit application.

		Delete Application and Start Over
		Disapproved Reason: trace
indicates required field	e	
Certify/Enroll	Status: Certification Disapproved	

IMPORTANT INFORMATION

> Each time an action is taken on your application you'll be notified by email.

- THIS PROCESS CAN TAKE UP TO 6-8 WEEKS TO GO INTO EFFECT ONCE YOUR APPLICATION IS APPROVED – If you apply for your benefits by 15th day of the month your BENEFITS will go into 6 weeks later. (EXAMPLE) You apply on 15 January your benefits would go into effect on 1 March.
- After your application has been approved you will be notified by email that your TRANServe Debit Card has been received. You will be given instructions to make an appointment with your program manager, Stephanie Pollak to sign for your new TRANServe Debit Card.

If you have questions please contact your Your Transportation Incentive Program Specialist

Transportation Incentive Benefits POC: Janae Steude 801-775-3833 Email: Hill.TIP@us.af.mil

Don't forget to contact:

UTA Vanpool Support Specialist POC: Luwanna Fitzgerald 801-287-5358 Email: <u>lfitzgerald@rideuta.com</u>

