FORM CD-3	07
(REV. 09-98)	LF
DAO 217-8	

## **CARPOOL APPLICATION FORM**

U.S. DEPARTMENT OF COMMERCE

NAMES LAST, FIRST, MI	WORK	COMPLETE WORK ADDRESS (Include Room No. & Mail Route)	HOME ADDRESS	EMPLOYER/ AGENCY AND BUREAU	NO. OF MILES FROM RESIDENCE TO HCHB	DAYS PARTICIPATED TO & FROM PER WEEK	MAKE OF CAR	Y E A R	S T A T E	TAG NUMBER
APPLICANT										
RIDER'S										
RIDER'S										
RIDER'S										
RIDER'S										
RIDER'S										
RIDER'S										
TOTAL MEMBER RIDES										

## **CARPOOL POLICY**

1. Carpools must contain at least three members.

## CERTIFICATION

2.	The applicant must be a full-time Commerce employee.	Applicant Signature and Printed Name	Date	
3.	Carpools will be registered in the name of the Applicant.			
4.	Applicants are responsible for accuracy of the information and true signature of each carpool member.			
5.	Riders must ride (to and from) on an average of at least three days per week. Weeks containing holidays, and annual/sick leave are excluded.	Rider Signature and Printed Name	Date	
6.	Commerce employees who are assigned permanent spaces in the HCHB courtyards or HCHB garages may not be included as members of carpools.			
7.	Commerce employees who are bona fide members of other Agencies' carpools may not become members of Commerce carpools and vice versa.	Rider Signature and Printed Name	Date	
8.	Employees that receive other transit subsidies, such as metro check, are not authorized for subsidized parking.			
9.	Applicants are responsible for immediately reporting changes in their carpool to the Parking Coordinator.			
10.	Vanpools are considered to be "carpools" for the purpose of these policies, and subject to the same criteria.	Rider Signature and Printed Name	Date	
11.	All items on this form must be completed; if not, the application may be denied.			
12.	The Office of the Parking Coordinator (Room 6321) must be given written notification whenever the carpool is terminated.	Rider Signature and Printed Name	Date	
		Rider Signature and Printed Name	Date	
		Rider Signature and Printed Name	Date	

## WARNING

The United States Code contains penalties for falsification of information or signatures, or inclusion of individuals not participating regularly as carpool members. Please carefully read the certification before you sign. All items will be verified.

CERTIFICATION: We, the undersigned, certify with our signatures that the information provided on this form is true and accurate as of this date. We understand that if this certification is false or fictitious in any material respect, we may be subject to criminal prosecution under 18 USC § 1001 (providing for potential imprisonment and fines). Falsification of and/or misrepresentation in documents submitted under this program will lead to a mandatory *minimum* of six month loss of parking privileges and may lead to Agency disciplinary action, up to and including removal from Federal employment.