# **Park County Windrider Transit**

# ADA Complementary Paratransit Service Dial-A-Ride Application & Instructions



## **Park County Public Transportation Provider**

Park County Transit Office 414 East Callender Street Livingston, MT 59047

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#### **Paratransit Dial-A-Ride Application Instructions**

#### What is Paratransit Dial-A-Ride?

In compliance with the Americans with Disabilities Act (ADA), Windrider Transit provides complimentary paratransit service – also known as Dial-A-Ride (DAR) – to passengers who are typically unable to use the regular fixed-route city bus service without assistance due to a disability or other condition. DAR is a shared ride, appointment-based service that picks up eligible passengers where they are and delivers them to their desired destination within ¾ of a mile from the City of Livingston fixed-route bus service limits. DAR operates the same house and days as the fixed-route bus service. All vehicles are ADA compliant with lift-equipped.

There are no fees for trips. Personal care attendants may accompany passengers at no charge. Service animals\*\*\* are welcome.

#### How Do I Apply?

Complete the attached application form. Please fill out and sign Section 1, then have a health care or social service professional complete Section 2. You, or they, may return the forms to the Windrider Transit office via email or mail.

Examples of professionals who may complete Section 2 include physicians, physician assistants, nurses or nurse practitioners, chiropractors, physical/occupational/speech therapists, social workers, social service agency caseworkers or case managers, mental health professionals, vocational rehabilitation specialists and independent living specialists.

Once your application is received, it will be processed within 15 working days. If approved, you will receive an i.d card in the mail along with a Passenger Guide that explains how to use the service. If your application is denied, you will receive a letter providing the reason for the denial and instructions on how to appeal the determination. Alternative formats for correspondence and materials are available on request.

\*\*\*Service animals are always welcome. The passenger must have the service animal fully under control at all times so as not to disrupt other passengers, driver or the schedule. Drivers will not assume any responsibility for service animals. If you schedule your ride, please let the dispatcher know if you will have a service animal with you. Windrider Transit does not allow pets or comfort animals on vehicles. An Emotional Support Animal (ESA) is an animal that, by its very presence, mitigates the emotional or psychological symptoms associated with a handler's condition or disorder. The animal does NOT need to be trained to perform a disability-specific task. The only legal protections an ESA has are 1) to fly with their emotionally or psychologically disabled handler in the cabin of an aircraft and 2) to qualify for nopet housing. No other public or private entity (motels, restaurants, stores, transit, etc.) is required to allow your ESA to accompany you and in all other instances, your ESA has no more rights than a pet.



### Paratransit Dial-A-Ride Application/Renewal

#### **SECTION 1:** To be completed by the applicant

| Name of Applicant:   |
|--|
| Address:   |
| Phone Number:  |
| Email Address:   |
| Date of Birth:   |
| Emergency Contact (name and number):   |
| Relationship to Applicant:   |
| To help us serve you better, please check all that apply:  |
| ☐ I use a wheelchair or scooter  |
| ☐ I use a cane or walker   |
| ☐ I use portable oxygen  |
| ☐ I have a vision impairment   |
| □ I have a hearing impairment  |
| $\ \square$ I use sign language or other alternative means of communication  |
| $\ \square$ I may travel with a personal care attendant or someone to assist me  |
| ☐ I may travel with a service animal   |
| Other  |
| Signature:Date:  |
| My signature authorizes a health care or social service professional below to release information to Park County Windrider Transit concerning limitations I may have in using regular, fixed-route transit services and to submit this form to the Windrider Transit office. |
| Name of Professional:  |

Questions: transit@parkcounty.org or 922-5683



#### **SECTION 2:** To be completed by designated professional

The information provided below will be used by Eagle Transit to determine the applicant's eligibility for paratransit service, also known as Dial-A-Ride. Dial-A-Ride is an appointment-based, shared ride service where an accessible vehicle picks passengers up from their home or other origin and takes them where they want to go within a defined service area. Eligibility is based on the presence of a disability or other condition that functionally limits the applicant's ability to use regular, fixed route transit service (predetermined stops on a set schedule). Please note: age, inability to drive or use of a mobility device do not automatically confer eligibility.

| mobility device do not automatically comer eligibility.  |  |  |
|--|--|--|
| 1. Does the applicant have a physical, mental, sensory or cognitive disability or other condition that reasonably limits his or her ability to use regular, fixed route public transiservices? |  |  |
| □ Ye   | es   |  |
| □ <b>N</b>   | 0  |  |
| •  | oplicant cannot reasonably be expected to do the following without assistance a bus stop, wait at a bus stop or ride the bus (please check all that apply) |  |
| □ Tr   | ravel 3 blocks   |  |
| □ Cr   | ross a multi-lane intersection   |  |
|  | avigate obstacles such as uneven or steep terrain, lack of or damaged sidewalks, ck of curb cuts   |  |
| □ Tr   | ravel in adverse weather conditions such as snow, ice, or extreme heat/cold  |  |
| □ St   | and for fifteen minutes at a stop  |  |
| □ St   | and on the bus if no seat is available   |  |
| □ Tr   | ravel in unfamiliar locations  |  |
| □ Tr   | ransfer from one bus to another  |  |
|  | oplicant cannot reasonably be expected to do the following without assistance rips and use the service safely (please check all that apply)                |  |
| □ U  | nderstand how to use a bus schedule  |  |



| □ U  | nderstand how to identify and travel to a bus stop   |  |
|--|--|--|
| □ U  | nderstand when and how to get on and off the bus   |  |
| □ U  | nderstand what to do or where to go upon reaching a destination  |  |
|  | oplicant's disability or other condition that prevents him or her from typically ed route service is (check one) |  |
| □ P  | ermanent   |  |
| □ <b>T</b> e   | emporary   |  |
| If temporary, how long do you expect the applicant to need Dial-A-Ride service?  |  |  |
| 5. Is there anything else about the applicant's condition not addressed above that should be considered in determining his or her eligibility? |  |  |
|  |  |  |
| <u>Printed l</u>   | Name:  |  |
| Title/Rel  | ationship to Applicant:  |  |
| Address  | :  |  |
| Phone N  | lumber:  |  |
| Signatur   | e: Date:   |  |
| Please r   | eturn the completed form to:   |  |
| Email:<br>Mail:  | transit@parkcounty.org Park County Windrider Transit 414 East Callender Street                                   |  |

Questions: transit@parkcounty.org or 922-5683

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