

# Vanpool Route Information Sheet

Van Number \_\_\_\_\_ Vanpool Number \_\_\_\_\_ Work Start Time \_\_\_\_\_

Driver Name \_\_\_\_\_ Work End Time \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Origin County \_\_\_\_\_ Company County \_\_\_\_\_

Location/address of where the van is parked overnight: \_\_\_\_\_

Miles from driver's home to first pick-up point (Deadhead Miles one way): \_\_\_\_\_  
*(If deadhead miles exceeds 10 miles one way, mileage in excess of 10 miles one way will be added to the daily rider round trip miles to determine monthly riders fares.)*

**Please note the name (e.g., Wal-Mart, Woodfield Mall, St. Joseph's Church) and address (use nearest major intersection if exact address unknown) of the pick-up locations:**

Location of 1<sup>st</sup> pick-up point: \_\_\_\_\_

Location of 2<sup>nd</sup> pick-up point: \_\_\_\_\_

Location of 3<sup>rd</sup> pick-up point: \_\_\_\_\_

**Proposed vanpool route – *please be as specific as possible* by using directional headings (North, South, etc.) and noting each street (specify road, street, avenue, etc.) taken from home to work:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Heavy congestion, road repairs, or weather conditions may require occasional deviations from the above route. Submit a new route information sheet to the Vanpool Office if the route deviations occur for an extended period of time or your route changes.*

