Used by Rural Development employees to enroll in the Transit Incentive Program.

USDA
Form RD 2045-5
(4-00)

TRANSPORTATION INCENTIVE ENROLLMENT

Please mark the proper response
○ New Application ○ Change to Application ○ Recertification with no Change ○ Recertification with Change(s)

Name *(type or print)*		*Social Security Number
Rural Development Agency/Division	State	Work Telephone Number
**Transit Amount Requested *(not to exceed $65 a month)*	***Parking Amount Requested *(not to exceed $175 a month)*	
Location of Mass Transit Station		Location of Parking
Vanpool Driver's Name		Work Telephone Number

*This information is solicited under authority of 5 U.S.C. 7905 and Public Law 105-178. Furnishing the information on this form is ***voluntary***, but failure to do so may result in disapproval of your request for a public transit fare benefit. The purpose of this information is to facilitate timely processing of your request, to ensure your eligibility, and to prevent misuse of the funds involved. This information will be matched with lists of other Federal agencies to ensure that you are not listed as a participant in a carpool or vanpool which is not a transit authority-approved carrier or a holder of any other form of vehicle parking permit with any other Federal agency.

The transit pre tax benefit is for employees who use public transportation or mass transit and certain vanpools and is based on a 20 day work day month. Eligible vanpools are commuter highway vehicles that have a seating capacity of at least seven adults including the driver. ***Vanpool drivers are ineligible to receive a transit benefit.* At least 80 percent of the mileage used must be for purposes of transporting employees in conjunction with travel between their homes and places of employment.

***The parking pre tax benefit is for employees who park at a pay lot from which the employee commutes to work by mass transit, a commuter highway vehicle (see above), or by carpool and is based on a 20 day work day month. This does not include parking at or near the employee's residence or parking at or near the work place.

"I hereby certify I am eligible for a transit benefit under 26 (U.S.C. 132 (f)). I will be using it exclusively for my regular daily direct commute from my home to work and return. I will not give, sell, barter, exchange, convey, or otherwise transfer it to any other person. The monthly transit benefit I receive does not exceed my average monthly commuting cost based on a 20-day month commuting by public transportation or eligible vanpool. I understand and agree false certifications may result in disciplinary action by the Department up to and including dismissal from Federal employment and prosecution for Federal income tax evasion." I agree to keep my eligibility current and to end my participation immediately when I no longer qualify.

Employee Signature	Date

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PROCEDURE FOR PREPARATION : RD Instruction 2045-B.

PREPARED BY : Rural Development employee.

NUMBER OF COPIES : Original.

SIGNATURES REQUIRED : Employee.

DISTRIBUTION OF COPIES : Original to program coordinator.