



## Vanpool Discount on Managed Lane Facilities Reimbursement Request Form

Review and confirm that you have met the following requirements before completing the document:

1. The Regional Vanpool Program is a Regional Transportation Council (RTC)-subsidized program operated by the Denton County Transportation Authority (DCTA) and Trinity Metro.
2. Vanpool requestor/participant has pre-registered as part of the GoCarma HOV process. This is an eligibility requirement to receive the 50 percent vanpool discount.
3. Requestor has obtained and displays a valid TollTag, TxTag, or EZ Tag on the van windshield.

### Requestor Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_  
*City* *State* *ZIP Code*

Primary Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Vanpool Provider: (DCTA or Trinity Metro): \_\_\_\_\_

Specify Requestor's Vanpool Role (Captain, Co-Captain, Rider): \_\_\_\_\_

### Vanpool Identification Information

Vanpool ID Name/Number: \_\_\_\_\_

Vanpool Toll Tag Number : \_\_\_\_\_

Vehicle License Plate Number: \_\_\_\_\_

### Reimbursement

Reimbursement may be requested when the expenses have reached a minimum of \$60 or the total transaction period equals three months, whichever occurs first. Requestors can anticipate payment of expenses within 45 days from submittal of the required documentation. In addition, please be advised that ONLY tolls accrued during peak hours (Monday through Friday, 6:30 AM – 9 AM and 3 PM – 6:30 PM) are eligible for reimbursement.

Covered time period of request: \_\_\_\_\_

Total reimbursement amount requested: \_\_\_\_\_

Please submit the completed Reimbursement Request Form and the Toll Activity Report or Monthly Toll Statement as outlined in the Reimbursement Submittal Checklist. Reimbursement Request should be emailed to [TRgrants@nctcog.org](mailto:TRgrants@nctcog.org).

### **Reimbursement Submittal Checklist**

Confirm that all steps below have been completed. Items noted as **[Required]** must be checked and included with the reimbursement request form, or the form will be deemed incomplete.

- Completed Reimbursement Request Form – **[Required]**
- Toll Activity Report and or Monthly Toll Statement with eligible transactions highlighted – **[Required]**
  - Is an “HOV2+-50%” message indicated in the Discount column of the Activity Report?
  - PDF of all attachments labeled according to the submittal checklist

**The following documents are required only with the first reimbursement request.**

- Completed W-9 to comply with IRS regulations (detailed in Publication 15 Circular E, Employers Tax Guide)
- Direct Deposit Authorization Form to receive reimbursements via direct deposit. The prenote process takes six full business days. If the form is not submitted, then reimbursement will be issued via check.