

New participant		Returning participant	
Employer (name of company/organization)		Employee number (for payroll purposes)	
Name		Work address/office location	
Home address			
Telephone (work)		Telephone (alternate)	
Email (work)		Email (alternate)	
<b>Type of pass requested:</b>		<b>Payroll deduction:</b>	
EPass - Travel on regular bus, ferry, and Access-A-Bus services		\$68.25 monthly	
LinkPass - Travel on MetroLink, regular bus and ferry, and Access-A-Bus services		\$82.69 monthly	
XPass - Travel on MetroX and MetroLink, regular bus and ferry, and Access-A-Bus services		\$97.13 monthly	
EPass fees are paid through payroll deduction, with deductions beginning the first pay period in January 2018.			

**Conditions of Use**

The EPass program is subject to both the:

- Halifax Transit service policies and guidelines, and
- EPass contract between my employer and Halifax Transit.

EPasses are subject to a \$25 replacement fee.

EPasses do not include parking fees at Halifax Transit Park & Ride locations.

EPasses must be presented when boarding and are non-transferable.

EPasses may be confiscated if:

- the EPass is improperly used;
- the employer suspends payments to Halifax Transit; or
- payroll deductions are discontinued.

Halifax Transit is not liable for any disruptions/interruptions in transit services.

**Cancellation Policy**

The EPass program require employees to enrol for one-year; however, EPasses can be either suspended or cancelled due to:

- a change in employment status;
- a change in work location;
- parental leave;
- sick leave, where benefits under a long-term disability plan or benefits from the Worker's Compensation Board are being received;
- any other reason acceptable to Halifax Transit, in its sole discretion.

EPasses must be returned to the employer immediately upon suspension/cancellation. Employee Initials:

**Consent**

I hereby consent to the Halifax Regional Municipality (including its agents, officers, servants, employees, representatives, and any third party hired by the Municipality, to collect, store and use any information including personal information the Municipality determines, in its sole discretion, to be necessary for the SmartTrip EPass Program, and I authorize my employer to provide such information to the Municipality and any third party hired by the Municipality.

I understand any personal information obtained by the Municipality in relation to me is subject to Part XX (Freedom of Information and Protection of Privacy) of the Municipal Governments Act, SNS 1998 c. 18, as amended.

If you have any questions about the collection and use of this information, please contact the Municipality's Access and Privacy Officer at 902.490.4390.

**Execution**

I hereby acknowledge that I am 19 years of age or older and agree to all the terms and conditions of the SmartTrip EPass Program. This consent, authorization and application is executed by me, the employee/applicant, with the full knowledge and understanding that the information will be used by the Halifax Regional Municipality (its agents, officers, servants, employees, representatives and third parties) in processing, creating and operating the SmartTrip Program.

<b>Employee Name</b>	
<b>Date</b>	
<b>Employee signature (if applicable)</b>	