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Canada's Tournament Capital

ProPASS is a permanent bus pass purchased by employees through regular payroll deductions. ProPASS is valid for travel in the Kamloops Transit System.

Goals. A primary goal of the ProPASS program is to reduce rush hour traffic by encouraging employees to use transit whenever possible. The program also complements employer initiatives to reduce the number of vehicles being driven to the workplace.

Easy to Administer. The ProPASS is purchased through payroll deduction and designed to be as easy to administer as a payroll deduction to the United Way.

Minimum Requirement. A company must have at least 10 employees on payroll in order to enroll at this time.

Cost & Savings. The total annual cost of the ProPASS is \$480, which is divided by the number of pay periods in a calendar year. A person now purchasing 12 monthly passes per year would save \$96 by purchasing a ProPASS. ProPASS is not a taxable benefit but payments made are a tax credit for personal income tax.

For 12 pay periods - each deduction is \$40.00
For 24 pay periods - each deduction is \$20.00
For 26 pay periods - each deduction is \$18.46

No Expiry. A ProPASS is valid as long as the employee remains on the payroll deduction program.

Terms. Employees are required to sign on for one year. However, anyone can opt out who has a change of shift, job or place of residence that renders the program inoperable. The ProPASS must be returned to the employer before payroll deductions can be stopped. An employee requesting to leave the ProPASS program prior to one year, for reasons other than those stated in the enrollment application, is required to repay the City of Kamloops the difference between the cost of the regular monthly pass and the cost of the ProPASS for each month in the program.

Easy Sign-Up. All that is required of your organization to enroll is to sign the service agreement with the City of Kamloops. This agreement sets out payment schedules and responsibilities. As soon as your organization has enrolled, your employees can have their photo taken and will be provided with a ProPASS. They just bring their completed and signed Enrollment Application Form to the Tournament Capital Centre (910 McGill Road) and they will receive their ProPASS.



PROPASS ADMINISTRATOR ROLE

Thank you for your participation in the ProPASS payroll deduction bus pass program. ProPASS is the most developed program of its kind in North America.

As ProPASS Administrator for your company, please complete the following tasks to ensure smooth operator of the program:

1. Provide information about ProPASS to interested employees. The City of Kamloops provides support materials for you to distribute.
2. Sign up interested employees using the enclosed "Enrollment Application" forms. Ensure that you complete and sign the Administrator section of each Enrollment Application form. Also have each employee complete an "Entry Survey".

Fax completed Enrollment Application forms and the Entry Surveys to the City of Kamloops at 250-828-7848, attention Colleen Lepik. You will receive email confirmation that the forms have been received.
3. Once you have received confirmation, your enrolled employees can take their completed Enrollment Application form to the Tournament Capital Centre (910 McGill Road) to have their photo taken and to receive their permanent ProPASS.
4. Confirm the number of employees on ProPASS monthly. Remit a cheque and a "Monthly Payment" form to the City of Kamloops by mail. Payment must be received by the 5th day of the following month.
5. If an employee chooses to quit the program, complete an "Exit Survey", attach the employee's ProPASS and mail to the City of Kamloops.
6. If an employee need to be suspended from the program, complete the "Suspension of ProPASS" form and retain the employee's ProPASS in your files. This form is offered as a guideline for your use only for managing a record of employees on or off the ProPASS program.

Once again, thank you for your assistance in making this program a success!

Colleen Lepik
City of Kamloops
Phone: 250-828-3605
Fax: 250-828-7848
Email: clepik@kamloops.ca



ProPASS Applicant (please print clearly):

COMPANY NAME

EMPLOYEE SURNAME

FIRST NAME(S)

WORK PHONE NUMBER

WORK FAX NUMBER

EMAIL ADDRESS

Terms and Conditions of the ProPASS Program

1. I agree to participate according to the terms and conditions of the ProPASS program.
2. The bus pass payroll deduction starts at the next pay period after the date indicated on this form and continues for a minimum of one (1) year from the start date. The exceptions for earlier cancellation are: employee relocation or termination; or circumstances authorized by the payroll department such as: Maternity or Parental Leave, LTD (Long-term Disability) or WCB (Worker Compensation Board) Time Loss Claims. For reasons other than stated, I will reimburse the City of Kamloops for the difference between ProPASS cost and the cost of monthly bus passes for the time I was on the program.
3. I understand that the pass is continuous (no expiry date) and payroll deductions end when I hand in my ProPASS to my payroll department and complete an Exit Survey. If I do not hand in my pass, deductions will continue and I could be subject to legal action by BC Transit or the City of Kamloops.
4. ProPASS payroll deduction may be subject to changes in transit fares as determined by the City of Kamloops.
5. I understand that a lost, stolen or seized card is subject to a replacement fee.

I have read and understand the terms and conditions on this form.

EMPLOYEE SIGNATURE

DATE

Payroll Administrator:

Payroll deduction starts as of:

Deductions per annum: 12 24 26

SIGNATURE OF PAYROLL OFFICER (PROPASS ADMINISTRATOR) DATE

PLEASE PRINT NAME

PHONE NUMBER

PLEASE COMPLETE THIS APPLICATION AND FAX TO the City of Kamloops @ 250-828-7848

**For City
TCC Staff
Use Only:**

CLIENT
NUMBER

ISSUE
DATE

DAY

MONTH

YEAR



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TCC Staff: Please send this form to "Transit" at Development and Engineering Services.

8143

105 Seymour Street Kamloops BC V2C 2C6 250-828-3605

PROPASS

ENTRY SURVEY

Employer:

Welcome to the ProPASS program. Please take a minute to answer the following questions. Your answers can help The City of Kamloops measure the effectiveness of the ProPASS program and to better meet the needs of participants. Thank you.

1. How old are you?
 18-35 36-50 51-65+
2. Gender
 Male Female
3. Where do you live?
 Aberdeen Mt.Dufferin Sahali
 Barnhartvale Heffley Creek Valleyview
 Batchelor Heights Juniper Heights Westsyde
 Brocklehurst Knutsford North Kamloops
 Dallas Rayleigh West end /
CityCentre
4. Where did you hear about the ProPASS program?
 Employer Advertisement
 Friend Other _____
5. Prior to starting the ProPASS program, how did you travel to work?
 Drive Alone Bicycle
 Carpool Walk
 Vanpool Varies
 Bus
6. What is your main reason for joining the ProPASS program?
 Convenience Lower cost
 Ease of payment Decision to use the bus system more
7. Before joining ProPASS, how many monthly passes did you purchase per year?
 0 1-4 5-8 9-10 11-12



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PROPASS MONTHLY PAYMENT

Month

Company Name

Company Contact Name

Phone Number

Payment Date

Pay Period Term

Total number of employees
on ProPASS

Number of suspended ProPASSes

TOTAL EMPLOYEES FOR MONTH

TOTAL REMITTANCE

- Please provide an Excel spreadsheet listing the employees with ProPASS deductions. The spreadsheet should have the last name in Column A and the first name in Column B. Other information can be included based on each company's individual requirements.
- Email spreadsheet to clepik@kamloops.ca at the time the monthly payment is made, **OR** attach a copy with your payment.
- Include the cheque number and /or term to which the list refers.
- Payment must be received by the 5th day of the following month.

Please remit to:
ProPASS Program
City of Kamloops
105 Seymour Street
Kamloops, BC V2C 2C6
250-828-3605



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PROPASS

EXITSURVEY

ProPASS Administrator:

From: _____
COMPANY NAME

FIRST NAME LAST NAME ProPASS NUMBER

Payroll deduction terminated as of:

DAY MONTH YEAR

ProPASS surrendered as of:

DAY MONTH YEAR

ProPASS ADMINISTRATOR SIGNATURE

DATE

Upon completion, please return this form with the ProPASS to:
PROPASS PROGRAM, City of Kamloops, 105 Seymour Street Kamloops BC V2C 2C6

Attach card.



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ProPASS Administrator,

“**The Suspension of ProPASS**” form on the following page is for your internal use only. We offer it as a guideline on how you might keep track of employees going on and off the ProPASS payroll deduction. It does **not** have to be sent to the City of Kamloops. All the City of Kamloops needs to know is summarized on the Monthly Payment form that is remitted with your company’s cheque.

If you have any questions about its use, please call Colleen Lepik at 250-828-3605.



EMPLOYEE SURNAME

FIRST NAME(S)

WORK PHONE NUMBER

WORK FAX NUMBER

1. I certify that my ProPASS suspension is for one of the following reasons:
 - Maternity Leave
 - Parental Leave
 - LTD (Long-term Disability)
 - WCB (Worker's Compensation Board) Time Loss
2. I understand and authorize that payroll deduction will be suspended on the next pay period following the date on this form and will resume on the pay period following the date at which I return to work.
3. In order for suspension to be valid, my ProPASS card must be submitted to my ProPASS Administrator.

ProPASS NUMBER

DATE

EMPLOYEE SIGNATURE

For Human Resources Use Only:

DATE

SIGNATURE OF PROGRAM ADMINISTRATOR

DATE DEDUCTION SUSPENDED

DATE DEDUCTION RESUMED