

Biddeford Saco Old Orchard Beach Transit

RIDER WRITTEN WARNING

Section I: Passenger Information

Date: ____/____/____

Name: _____

Address: _____

Phone: _____

Section II: Violation

Check all that apply:

Restricted Items	Personal Hygiene/ Dress Code	Eating/Drinking/Electronic Dev	Conduct	Safety
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Offense: _____

Brief Description of Occurrence: _____

Date of Verbal Warning: ____/____/____

Section III: Driver & Route Information

Driver Name: _____

Bus # _____ Route _____ Inbound/Outbound (Circle One)

As per Biddeford Saco Old Orchard Beach Transit's passenger rules to ride guidelines, you have received this written warning. This is part 2 of a 3-step process in which another violation could lead to a suspension in your services. We want to provide clean, safe, reliable and affordable public transportation for all our passengers. If you would like to discuss this procedure further, we welcome your call during business hours M-F 9:00-4:30. Thank you for your cooperation.

PASSENGER SIGNATURE: _____

DRIVER SUPERVISOR SIGNATURE: _____

COPY RECEIVED BY: _____ **DATE** ____/____/____