



Paratransit Software Implementation

January 27, 2026



PROJECT TIMELINE

- **Paratransit Software Implementation**
 - Eligibility: September 2025 – December 2025
 - Deployed on December 15th
 - Operations: January 2026 – Summer 2026



PROFESSIONAL VERIFICATION FORM

Share Form Link

✕ Close

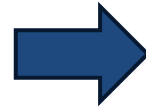
Anyone with this link can submit responses to the OCTA Professional Verification Form form as part of the Spare Test OC ACCESS Eligibility case.

Link

<https://my.sparelabs.com/forms?organizationId=9abca41e-15fe-46>

Copy Link

Open External Form



OC ACCESS Eligibility

Please proceed to fill out the OC ACCESS Eligibility.

Share Details: Please provide all necessary and required information to address your submission efficiently.

Attach Supporting Documents: Upload any relevant files or documents to support your submission if asked.

By continuing, you agree to Spare's [Terms of Use](#) and [Privacy Policy](#).

Continue

OC ACCESS Eligibility

Professional Verification

To be completed by a LICENSED Professional Only. Must be printed or typed.

Dear Professional:

Your patient has applied for paratransit services provided by your local public transit agency (OCTA) and has authorized you to release information pertaining to the applicant's disability or conditions that would PREVENT them from using regular fixed route bus/rail system.

Please complete all questions to determine proper ADA eligibility.

Applicant Name:

List disabilities or conditions that would PREVENT applicant from using fixed bus/rail systems:

** All fixed bus/rail systems are equipped with ramps and lifts

How does this affect the ability to take accessible public fixed-route transit service?



Under Review - ...

Assign To

Archive Case

Under Review - PV Received

OCTA Professional Verification Form

Case Form Details

Print Form

Share Form Link

Edit Case Form

Case	Spare Test
Case Type	OC ACCESS Eligibility
Form	OCTA Professional Verification Form
Created At	Jan 21, 2026 12:49 PM
Last Updated	Jan 21, 2026 12:49 PM
AI Scanned File	None

Form Response Details

Professional Verification

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Dear Professional:

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Please complete all questions to determine proper ADA eligibility.

Applicant Name:
Spare Test

List disabilities or conditions that would PREVENT applicant from using fixed bus/rail systems:
X, Y, Z

** All fixed bus/rail systems are equipped with ramps and lifts

How does this affect the ability to take accessible public fixed-route transit service?
Due to his disability, Mr. Spare is unable to ____.