



APPLICATION FOR STANISLAUS REGIONAL TRANSIT AUTHORITY HALF FARE CARD

To be eligible for a StanRTA Half Fare Card you must be sixty-five (65) years of age or over, an honorably discharged veteran, a Medicare recipient or have a disability that makes riding the fixed route service extremely difficult. Possession of a StanRTA Half Fare Card does not make you eligible to ride complementary paratransit services. If you are unable to use fixed route due to a disability, you might be eligible to use Paratransit Door to Door Service. Possession of a StanRTA Half Fare Card does not allow anyone to ride with you for free. To be allowed to have a free attendant, the attendant certification (Step 4 of this application) must be completed by your physician or social service provider.

APPLICATION INSTRUCTIONS:

1. If you are applying because you are a **Medicare** recipient you must provide a copy of your current red, white and blue Medicare Card.
2. If you are applying for the discount card on the **basis of age, please complete steps 1 and 2 only.**
3. If applying as a **Veteran** please provide one of the following: VA Veteran ID Card, Veteran Health Identification Card, or a CA Driver's License with Veteran designation.
4. If you are applying because of **disability, complete both sides** of this application. The reverse side must be completed by a social service agency or your doctor's office.
5. **APPLICANTS ARE REQUIRED TO PRESENT A VALID, GOVERNMENT ISSUED PHOTO IDENTIFICATION (PHOTO ID) IN ADDITION TO ANY DOCUMENTS LISTED ABOVE**

STEP 1 TO BE COMPLETED BY ALL APPLICANTS (PLEASE PRINT CLEARLY)

I (PRINT NAME): _____ DOB: ____/____/_____
HEREBY AUTHORIZE THE CERTIFYING INDIVIDUAL LISTED ON THE REVERSE SIDE TO RELEASE INFORMATION TO STANISLAUS REGIONAL TRANSIT AUTHORITY FOR THE PURPOSE OF ISSUING A HALF FARE DISCOUNT CARD

PRINT MAILING ADDRESS:

Street/P.O. Box City Zip

PRINT
DATE OF BIRTH: _____ APPLICANT SIGNATURE _____

PHONE NUMBER: _____

STEP 2 REQUESTED BASIS FOR ELIGIBILITY-CHECK ONE BOX ONLY

- Medicare Recipient**
 Senior
 Veteran
 Disabled

CERTIFYING AGENCY OR PHYSICIAN MUST COMPLETE STEPS 3,4 & 5

STEP 3

In compliance with Federal Regulations, StanRTA charges half the regular fare to qualified disabled riders. The federal standard for qualification for this fare discount is he or she "is a person who by reason of illness, injury, congenital malfunction, or other incapacity or temporary or permanent disability cannot use effectively, without special facilities, planning, or design" the StanRTA fixed route bus system.

Please initial here if this applicant meets the qualifying standard stated above:

_____ **YES**, this applicant meets the qualifications required for discounted fare

Condition is Permanent (Must be renewed after 3 years)

Temporary (3 month minimum) from: _____ to: _____

STEP 4

Attendant - Does the applicant require physical assistance getting on or off the bus or need help negotiating the bus service? **Yes** **No**

Transit staff may call certifying agency to confirm or discuss need for an attendant.

(A disabled passenger's attendant rides free when assisting a passenger. Fraudulent use of an attendant is considered fare evasion and is against the law.)

If Yes, what specific tasks will the attendant perform to assist the passenger?

STEP 5

Social Service Agency or Physician's Confirmation

Name of Certifying Professional (Print)

Signature

Date

Title

Facility Name

Telephone

Address

**PLEASE COMPLETE AND RETURN THIS FORM TO THE STANRTA OFFICE
AT THE TRANSPORTATION CENTER (1009 9th Street, Modesto 95354) OR
YOU CAN EMAIL THIS APPLICATION TO: info@stanrta.org**