



Elder Reduced Fare & Dial-A-Ride Application

Mail To: Coos County Area Transit
2810 Ocean Blvd
Coos Bay, OR 97420

Phone: (541) 267. 7111

Passengers 60 and over are eligible for 1) reduced fares on all Deviated CCAT buses, 2) Dial-A-Ride service.

Applicant information: (PLEASE PRINT LEGIBLY)

Name: _____
Last name First name

Mailing address: _____
Street City State Zip

Date of birth: _____ **Age** _____

Telephone number: (_____) _____ **Email address:** _____

Certification of eligibility section (Check only one box below) Note: Passengers must recertify every 2 years.

- Senior (60+) 60 years of age or older. Government issued ID with date of birth. Attach copy.
- Visitor I.D. 21 days maximum. Visitor must show transit agency issued ID card with date of birth. Eligibility end date ___/___/___ 30 days after effective date.
- Medicare Card. Medicare card and government issued photo ID.

I agree to release the information I am sending to CCAT for the purpose of making this Reduced Fare Program Eligibility determination. I certify that the information above is true and correct.

Signature of applicant _____ Date _____

DO NOT WRITE BELOW THIS LINE. DESIGNATED AGENCY OFFICE USE ONLY

_____ Designated Agency

_____ Representative's signature & Printed Name _____

_____ Date

DO NOT WRITE BELOW THIS LINE. CCAT OFFICE USE ONLY

Coos County Area Transit - CCAT Elder Eligibility Approved (Y/N) If no, why? _____

_____ CCAT Representative's Signature & Printed Name _____

_____ Effective Date. End Date ___/___/___ (21 days or 2 years)

For the purpose of simplifying administration of the REDUCED FARE PROGRAM, social service agencies or other organizations that are interested in processing Reduced Fare Applications for their clients may be selected, at CCAT's discretion, to operate as a "Designated Administrative Agency."