StaRT SENIOR/DISABLED DISCOUNT CARD APPLICATION
(For use by Seniors and Persons with Disabilities – This card is NOT accepted on ADA Paratransit Services)

APPLICATION INSTRUCTIONS
If you are sixty-five (65) years of age or older or have a disability, you are eligible for a StaRT Discount Fare Card.

➢ All applicants must have a photo taken in our office to complete the application process. Please bring a valid state issued I.D. with you to 1010 10th Street, Suite 4204, between the hours of 8:00 a.m. and 4:00 p.m. Monday through Friday for your photo to be taken for the issuance of your discount card.

➢ If applying for the StaRT Discount Card as a Senior (age 65+) or Medicare card holder, please complete Steps 1 & 2 only, unless you need an attendant, in which case Step 3 will also need to be completed.

➢ If applying for the StaRT Discount Card on the basis of disability, you must complete ALL STEPS of this application. The reverse side must be completed by a physician.

### STEP 1

NAME: _____________________________________________

MAILING ADDRESS:

Street/P.O. Box City ZIP

PHONE: _____________________________ DOB: _____________________________

I hereby authorize the certifying individual listed on the reverse side to release information to Stanislaus County Public Works/Transit Division for the purpose of issuing a StaRT senior/disabled discount fare card.

SIGNATURE: _____________________________ DATE: _____________________________

### STEP 2 CHECK ONE BOX ONLY FOR ELIGIBILITY

☐ SENIOR - 65 or Over
    Attach Proof of Age

☐ MEDICARE
    Attach Copy of Card

☐ DISABLED
    Reverse Side must be completed

### PHYSICIAN MUST COMPLETE REVERSE SIDE

ID Card #: _____________________________ Expiration Date: _____________________________

Issued by: _____________________________ Issued Date: _____________________________
STEP 3 - THIS SECTION MUST BE COMPLETED BY A PHYSICIAN

Please explain applicant’s disability completely (please print)

________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________

Applicant’s Condition is: □ Permanent  □ Temporary (From: ___________ To: ___________)

Does the applicant require the physical assistance of a personal care attendant (PCA) getting on or off the bus, or need help negotiating the bus service? (Disabled passenger’s attendant rides free when assisting passengers on or off the bus.) Fraudulent use of an attendant is considered fare evasion and is against the law.

□ NO - The applicant does not require the assistance of an attendant.

□ YES - The applicant requires the assistance of an attendant to travel.

________________________________________________________________________________________________________________________________________
Name of Certifying Person (Print)  __________________________________________  Signature

________________________________________________________________________________________________________________________________________
Title  __________________________________________  Date

________________________________________________________________________________________________________________________________________
Name of Medical Facility  __________________________________________  Phone Number

________________________________________________________________________________________________________________________________________
Address

NOTE: A fee will be charged to replace a discount fare card

FOR QUESTIONS?? – Please call Stanislaus County Transit Division Office at (209) 525-4311