APPLICATION: RIDE FREE PERMIT | REDUCED FARE PERMIT

Status (check one): ☐ New applicant

☐ Renewal - Card #: _____
(Begins with a F or S on your card)

Applying for (check one): ☐ Ride Free Permit (I am enrolled in the Benefit Access Program)

☐ Reduced Fare Permit (I am not enrolled in the Benefit Access Program)

Please print clearly and complete all information:

Legal Name: FIRST_____ M.I._____ LAST_____ (SUFFIX)_____

Email Address:_____

Mailing Address: (include all information required for mail delivery)

STREET ADDRESS or PO BOX #:_____
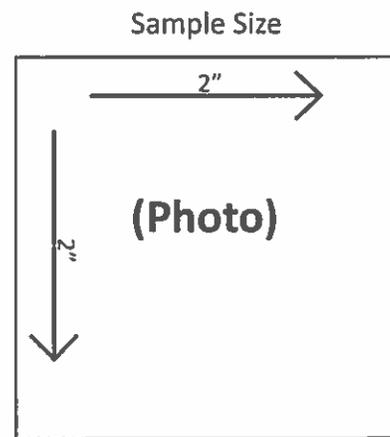
CITY:_____ **STATE:**_____ **ZIP CODE:**_____

Date of Birth (mm/dd/yyyy):_____ / _____ / _____

Sample Size

Social Security #:_____ - _____ - _____

Telephone #: (_____ **)**_____

Be sure to include ALL of the following items:

☐ 2" by 2" color photo (clearly shows face) ──────────────➤

☐ Clear copy of both sides of current government-issued ID card
(Any one of the following: Driver's License, Passport, State issued ID, U.S. Immigration, Alien registration card, or any other official government ID with your picture, date of birth and signature)

```
        ┌──── 2" ────➤
        │
      2"│      (Photo)
        │
        ▼
```

Date:_____ **Signature:**_____

CENTER USE ONLY

CENTER CODE:_____ **TAKEN BY: (INITIALS)**_____