

Application
Senior Citizen Transit
Identification Card
Free/Reduced Fare
Transit Programs for Senior Citizens

Monroe County Transit Authority



Card Number _____

Social Security Number _____

Date of Application _____

Name of Applicant (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

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Male

Female

(Area Code) Home Telephone Number

Date of Birth

Age

Signature

Please choose one form of proof of age from the list below and attach a photo-copy with your application. Please note, ONLY the forms of identification listed below are acceptable documentation for this program.

- _____ Armed Forces Discharge/Separation Papers - Separation Date _____
- _____ Baptismal Certificate-Church's Name & Address _____
- _____ Birth Certificate – Number _____
- _____ Veteran's Universal Access Identification Card – Number _____
- _____ PACE Identification Card – Number _____
- _____ Passport/Naturalization Papers – Number _____
- _____ Pennsylvania Identification Card – Number _____
- _____ Photo Motor Vehicle License – Number _____
- _____ Statement of Age from Social Security Administration
(attach copy to application)

This Section to Be Completed by Transit Agency

I do hereby certify that I have reviewed the above age documentation and the information contained herein is true and accurate to the best of my knowledge, information and belief.

Signature of Transit Agency Representative Certifying Age Documentation – Date

Printed Name of Above Transit Agency Representative

Name of Transit Agency (Include Street, City or Post Office, State, Zip Code)

