



APPLICATION FOR DISABLED DISCOUNT PHOTO ID CARD

APPLICATION INSTRUCTIONS:

1. All applicants must complete PARTS I and II
2. Applicants with a qualifying medical disability (see list of qualifying disabilities) must also complete PARTS III AND IV
3. Application may take up to three business days to process

PART I: APPLICANT INFORMATION (PLEASE PRINT LEGIBLY)

Last Name

First Name

Date of Birth

Address

City, State, ZIP Code

Phone Number

Email

APPLICANT CERTIFICATION

I certify under penalty of perjury under the State of California that the information provided concerning my application is true and correct.

Signature of Applicant

Date

PART II: ELIGIBILITY CRITERIA

Applicants are eligible for an RT Disabled Discount Photo Identification (ID) Card if one of the following criteria below applies: (**Note:** Applicants must provide the document proving eligibility **AND** government issued photo ID with the application.)

- A current Medicare card or a Medicare, SSI or SSDI award letter
 - A current California Dept. of Motor Vehicles (DMV) disabled person or disabled veteran placard ID
 - A valid Disabled discount ID issued by another transit operator
 - Proof of current RT ADA paratransit eligibility
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- Qualifying medical disability (**must complete PARTS III and IV below**)
Refer to page 3 for information on qualifying disabilities

PART III: AUTHORIZATION TO RELEASE MEDICAL INFORMATION

I hereby authorize the release of the following medical information regarding my disability to the Sacramento Regional Transit District (RT). This information will be used to verify my eligibility for an RT Disabled Discount Photo Identification Card. RT may contact my healthcare professional to confirm any of the information provided herein.

Applicant Name

Applicant Signature

Date

PART IV: HEALTHCARE PROFESSIONAL CERTIFICATION

Qualified healthcare professionals who may certify a disability included in the list of qualifying disabilities are (check one):

- Physician, Physician's Assistant, Nurse Practitioner (all impairments)
- Optometrist (visual impairment)
- Audiologist (hearing impairment)
- Podiatrist (mobility impairment)
- Clinical/School Psychologist (mental impairment)
- Psychiatrist (mental impairment)

HEALTHCARE PROFESSIONAL INFORMATION

Full Name

License Number and State

Address

Date Licensed Issued

City, ZIP Code, State

Phone Number

QUALIFYING DISABILITY INFORMATION

In the space below, please provide a **SPECIFIC** description of the nature of the disability and how the impairment(s) inhibits applicant's ability to utilize mass transportation facilities and services without special facilities, planning, or design (Please print LEGIBLY and provide sufficient detail or attach description on official letterhead form).

This disability is (check one): Permanent Temporary (lasting not more than 12 months; duration is ___ months).

Does the described disability necessitate that the applicant have an attendant to ride RT?

Yes No

HEALTHCARE PROFESSIONAL CERTIFICATION

*I **CERTIFY** that I am legally licensed as a _____ in the State of California and the applicant has one or more of the disabilities described in the attached list of qualifying disabilities. I hereby declare under penalty of perjury under the State of California that the information I have provided is true and correct.*

Signature of Healthcare Professional

Date

RT USE ONLY

Issued By: _____ Issued Date: _____ Expiration Date: _____

Healthcare Professional Certification Verified By: _____ Date: _____

DISABLED DISCOUNT FARE QUALIFYING DISABILITIES

Under this program, people with disabilities may travel on RT's buses and light rail trains for half the regular fare at all times.

Who is eligible: For purposes of this program, a disabled person is defined as an individual who: 1) has a physical or mental impairment that substantially limits one or more major life activity and/or by reason of illness, injury, age, congenital malformation, or other permanent or temporary incapacity or disability is unable, without special facilities or special planning or design, to utilize public transportation facilities and services as effectively as a person who is not so affected, and 2) has a current record of such impairment, incapacity or disability.

To be eligible for a Disabled Discount Pass, the applicant must possess one of the following disabilities:

DEVELOPMENTAL OR LEARNING DISABILITIES: An individual has a significant learning, perceptual and or cognitive disability. Some conditions are excluded from eligibility such as attention deficit disorder (ADD) and ADHD. A specific diagnosis is required. This includes autism and cerebral palsy, etc.

HEARING: Persons who have total deafness or are unable to hear with the aid of an assistance device on the level that meets the standards of the American National Standards Institute (ANSI), as determined by an audiometer.

MENTAL ILLNESS: An individual whose mental illness includes a substantial disorder of thought, perception, orientation, or memory that impairs judgement and behavior. A specific diagnosis is required.

PHYSICAL: Persons who have any of the following physical disabilities:

- **Mobility:** Orthopedic impairments, amputations, or functional limitations where there is: 1) loss or significant impairment of one or both upper extremities; or 2) loss of significant impairment of one or both lower extremities; or 3) impairment of the trunk, back or spine that is a medically diagnosed disability which substantially limits one or more major life activities, impairs or interferes with mobility, or requires the aid of an assistance device for mobility.
- **Cardiovascular:** Severe cardiac impairment resulting from one of the three consequences of heart disease: 1) congestive heart disorder; or 2) ischemia with or without necrosis of heart muscle; or 3) conduction disturbances and/or arrhythmias resulting in cardiac syncope; or 4) chronic venous insufficiency, or peripheral arterial disease with intermittent claudication.
- **Respiratory:** Lung disease to such an extent that forced expiration volume at one second, when measured by spirometry, is less than one liter, or arterial oxygen tension (PO₂) is less than 60mm/HG on room air at rest.
- **Neurological:** Multiple sclerosis and other neurological disorders such as epilepsy and parkinsonian syndrome.
- **Chronic Progressive Debilitating Conditions:** An individual who experiences debilitating diseases, autoimmune deficiencies or progressive and uncontrollable malignancies, any of which are characterized by fatigue, weakness, pain and /or changes in mental status that impair mobility. A specific diagnosis is required.
- **Blind or Low Vision:** An individual is legally blind, whose visual acuity in the better eye, with correction is 20/200 or less, or who has tunnel vision to 10 degrees or less from a point of fixation or so the widest diameter subtends an angle no greater than 20 degrees. An individual has low vision, and whose visual acuity is in the range of 20/70 to 20/200 with best correction.

Who is not eligible:

People whose sole incapacity is pregnancy, obesity, acute or chronic alcoholism or drug addiction or have a contagious disease. Financial need is NOT a consideration.

How do I apply:

A completed application must be submitted in person with a valid photo ID (driver license; ID card issued by a state, passport, government or school) at:

RT Customer Service and Sales Center

1225 R Street

(adjacent to the 13th Street light rail station)

Weekdays: 9 a.m. to 5:30 p.m.

Closed weekends and most holidays

If you do not have a current Medicare card or Medicare award letter, current California Department of Motor Vehicles disabled person or disabled veteran placard identification card, valid disabled discount identification card issued by another transit operator or proof of current RT ADA paratransit eligibility, you must complete parts I, II and III, and have a qualified Healthcare Professional complete part IV.

RT Disabled Discount Photo ID Cards used in any unlawful manner will be confiscated.