



CORPUS CHRISTI REGIONAL  
TRANSPORTATION AUTHORITY

**APPLICATION FOR REDUCED FARE ON FIXED ROUTE  
SERVICES**

*TO BE COMPLETED BY APPLICANT: (PLEASE PRINT ALL INFORMATION)*

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **SS#** \_\_\_\_\_

**ZIP CODE:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

I understand that it may be necessary to verify disability stated on this form and I hereby authorize this verification. I further understand that in the event my disability does not meet the guidelines set forth that I will be unable to obtain a RTA photo "B" ID card for discounted fare as mentioned for Older Americans and Persons with Disabilities.

**CHECK ONE:**

**SENIOR**

**DISABLED**

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**(NOTE TO SENIORS-----NO FURTHER INFORMATION IS NEEDED)**

**NOTE TO CERTIFYING PHYSICIAN/AGENCY**

I certify that the information I have provided in this application is a fair representation of this applicant's medical impairment or condition and is accurate to the best of my knowledge. I understand that the information provided in this application will be only be used for the purpose of determining the applicant's eligibility for a CCRTA Reduced Fare Photo "B" ID card. I also agree that CCRTA may contact me for clarification of any information that I have provided.

**Please describe the nature of applicants Disability** \_\_\_\_\_

Signature of Physician/Agency \_\_\_\_\_

Printed Name of certifying Physician/Agency \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Corpus Christi Regional Transportation Authority  
1024 Leopard Street, Suite C.  
Corpus Christi, TX 78401

Phone # 361-883-2287

Fax # 361-883-9938

www.ccrta.org

## **CORPUS CHRISTI REGIONAL TRANSPORTATION AUTHORITY**

### **Photo "B" ID**

### **Information for Older American's (60+)/Person with Disabilities**

#### **WHAT IS A PHOTO "B" ID FOR OLDER AMERICANS (60+) /DISABLED IDENTIFICATION CARD?**

A "B" ID for Older Americans/Disabled Identification Card is an I.D. that entitles to special fares on regularly scheduled bus routes ONLY.

#### **WHO IS ELIGIBLE FOR A "B" ID OLDER AMERICANS/DISABLED IDENTIFICATION CARD?**

Person's sixty (60) years or older and person's with permanent disabilities are eligible to obtain identification cards.

#### **HOW DO I APPLY FOR A "B" ID OLDER AMERICAN(60+)/DISABLED IDENTIFICATION CARD?**

To apply for a "B" Older American (60+)/Disabled Identification Card for the regularly scheduled bus routes, please complete the application form on reverse side.

If you are a person with a disability, it will be necessary for you to have a physician or agency complete the bottom portion of the application. Please be sure the doctor or agency completes the address portion of the application.

Other acceptable forms of disability verification accepted are Medicare & Social Security Awards letter

To obtain the Identification card, you must go to the Regional Transportation Authority Customer Service Center Office at 1024 Leopard Street, Suite C. Office hours are Monday-Friday from 7:00 a.m. to 6:00 p.m.

#### **HOW MUCH DOES A SENIOR/DISABLED Photo "B" id IDENTIFICATION CARD COST?**

The first "B" ID Older American/Disabled Identification Card is free. Replacements cards cost \$3.00.