



Healthy Hop Program Application

You may be eligible for free rides within Tarpon Springs through the Healthy Hop service, a partnership with the city and Advent Health North Pinellas. If you are **65 or older**, live in **Tarpon Springs**, and meet the **income criteria** below, complete this form to get started!

Complete this form, include proof of age (copy of Medicare card or State ID) and proof of income (see below), then return to PSTA by fax to 727-540-1923, by e-mail td@psta.net, or deliver to the Tarpon Springs Senior Information Center. You will be called when your application has been approved. If you have questions, call PSTA at 727-540-1888.

Name: _____ Date of Birth: _____

Address: _____ Tarpon Springs, FL

Zip Code: _____ Cell Phone: _____

E-mail Address: _____

How many people live in your household? _____
(Include yourself and any relatives living at the same address)

(Circle one)

What is the total income for everyone in your household? \$ _____ Monthly/Annually

Applicant Signature: _____ Date: _____

PROOF OF INCOME:

Include proof of each source of income for you and all members of your household. Please provide copies as documents will not be returned. Acceptable forms of proof of income include current copies of:

- 1st page of your tax return,
- Social Security Income Verification or Proof of Income Letter,
- 2 most recent pay stubs, and/or
- Retirement/Pension Statement.

If no one in your household has income, you must submit either:

- Access/DCF Benefits statement (Food Assistance), or
- A signed letter on agency letterhead verifying that you have no income.