

Application/Recertification for the Transportation Disadvantaged (TD) Program

The Transportation Disadvantaged Program provides lower-cost transportation for life-sustaining trips to Pinellas County residents whose gross household income is below 200% of poverty, and who do not have another way to take these trips.

To apply, complete and submit this application for each member of your household who needs this service (age 9 and up, children 8 and under ride free). Please provide copies as proof of income will not be returned.

Applications submitted without proof of income/no income for all household members will not be approved until this is received.

Acceptable forms of proof of income include current copies of:

• 1st page of your tax return

- DCF Cash Benefit/Child Support Letter*
- Two (2) most recent pay stubs or employer letter
- Social Security Income Verification or Proof of Income Letter (includes SSI and SSDI)
 Retirement/Pension Statement (includes VA)
- Unemployment Compensation Income Verification

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

- Access/DCF/SNAP Benefits statement showing eligibility dates, or;
- a signed, dated letter on agency letterhead verifying that you have "no income"

City of St Petersburg Residents who become TD-eligible pay \$0 if Home Address is within City limits (avoid P.O Box)

If you do not have a permanent address, you may submit a signed, dated letter on agency letterhead verifying that you live within the City of St Petersburg.

APPLICATION DATE:	//	DATE OF BIRTH//
FULL NAME ON YOUR ID		
STREET ADDRESS		
CITY, STATE, ZIP CODE		
PHONE NUMBER		
EMAIL ADDRESS		

- 1. Do you have a car ride for your vital trips (work, food, Dr.)? □ Yes □ No
- 2. Do you qualify for free bus rides as one of the following:
 - □ US Military Veteran
 - □ City of St. Petersburg Employee
 - □ Student of MYcro School
 - □ Program Participant of Ready for Life
 - \Box Other employer program

- Student/employee of:
- Pinellas County Public Schools
- □ Pinellas Technical College (PTC)
- USF St. Petersburg
- □ St. Petersburg College (SPC)
- 3. Do you qualify for Medicaid free rides? □ Yes □ No
- 4. Do you have any physical or mental disabilities?
- □ Yes □ No
- If yes, please explain briefly: _

5. TD services include low-cost bus fares, Late Shift, in-county and cross-county trips if bus can't serve all of your priority trips:

- a) Do you need TD Late Shift to get to/from a current job between 10 pm 6 am?
 - □ Yes □ No
- b) Do you need TD door-to-door within Pinellas because bus can't meet your needs? □ Yes, explain why _____ □ No

c) Do you need TD Tampa Bay cross-county trips to Pasco or Hillsborough?

NOTE: If you checked "Yes" to a), b), or c) above, call 727-540-1888, Option 4 in three business days to learn how to sign-up.

6. You MUST complete the table below for each immediate member of your household living together at the same address. For Monthly Gross Income, list all income by source and attach proof of income for each source as described below. Gross Income is before all taxes and withholding and includes pay, Social Security, Disability, Cash Benefits, and child support. You may attach additional pages if you need more lines to list your full household.

_____ I am applying ONLY for TD Tampa Bay (cross-county trips) and I am currently eligible for PSTA Access (leave income chart blank without proof of income).

NAME	DATE OF BIRTH	RELATIONSHIP TO APPLICANT	MONTHLY GROSS INCOME

7. By signing this form, I am stating that the information I have given is true and complete to the best of my knowledge; if falsified or rules violated, my TD services will be suspended: SIGNATURE: ______ DATE: ___/____

Completed form and proof of income must be turned in to PSTA at a bus terminal, mailed, e-mailed or faxed to: Pinellas Suncoast Transit Authority (PSTA), Attention: TD Program Office 3201 Scherer Drive Saint Petersburg, FL 33716 Phone: 727-540-1900; Fax: 727-540-1923; E-mail: TD@psta.net