



**Central County Transportation Authority**  
 530 N. Rose Street Kalamazoo, MI 49007  
 Telephone: 269-337-8201 Fax: 269-337-8211  
 www.kmetro.com

**Certification for Reduced Fare**

All applicants must to complete Part A. Senior certification requires that Part B be completed. For passengers with a disability, Part C is completed by your physician, case manager or other health care professional who is familiar with your disability and is qualified to certify you.

This form is confidential and any information contained in it will be used for transportation purposes only. All information will be kept confidential.

<b>Part A: General Information</b>			
Name: _____			
Address: _____		Email: _____	
City, State, Zip Code: _____			
Home Phone: _____	Work Phone: _____	Birth Date: _____	Today's Date: _____
<b>Will you use?</b>	_____ Metro Transit _____ Fixed Route	_____ Metro County _____ Connect	_____ Both
<b>Do you use a mobility device?</b>		_____ Yes _____ No	
<b>If yes, what kind?</b> _____			

<b>Part B: Senior Certification - Must be 62 Years or Older</b>	
Proof of age verified by: _____ Driver's Licence	Certified By: _____
_____ Birth Certificate	Agency: _____
_____ Other Picture ID	

**Applicant - Please Do Not Write Below This Line**

**Part C: Disability Certification** - Either a Physician, Case Manager or other Healthcare Professional (please cite credentials, MD, RN, LSW, etc.) **must complete all** of the following:

Name and Address of Agency or Physician:	Date: _____	Phone: _____
	Signature: _____	
	Name and Title of Agency Representative: _____	

Please describe in detail the applicant's disability which would qualify the individual for reduced rates:  
 \_\_\_\_\_  
 \_\_\_\_\_

Is Disability: \_\_\_\_\_ Permanent? \_\_\_\_\_ Temporary?

If Temporary, length of disability: \_\_\_\_\_ Months \_\_\_\_\_ Years

Does the individual require an escort to travel with them? \_\_\_\_\_ Yes \_\_\_\_\_ No

Over:

## Fare Explanation

This form is to certify an individual as either a Senior Citizen 62 years or older, or as an individual with a disability. This is a service provided by Kalamazoo Metro Transit. Individuals may obtain a Metro Transit Photo ID card at the Kalamazoo Transportation Center at 459 N. Burdick St., Kalamazoo, MI 49007. This form also qualifies individuals for reduced non-routine demand/response fare on Metro County Connect; no ID is required for Metro County Connect.

With a Metro Transit Photo ID card, these individuals may travel for half fare of 75 cents during all service hours, 6:00 am to 12:15 pm, Monday through Friday; 6:00 am to 10:15 pm, Saturday; and 8:00 am to 5:00 pm, Sunday. Certified individuals may ride Metro County Connect for \$4.00 for demand/response non-routine trips during all service hours, 6:00 am to 12:15 pm, Monday through Friday; 6:00 am to 10:15 pm, Saturday; and 8:00 am to 5:00 pm, Sunday.

## Definitions

"Individuals with Disabilities" means any person who (1) has a physical or mental disability that substantially limits one or more major life activities; (2) has a record of such disability or (3) is regarded as having such a disability. As used in this definition:

- 1 "Physical or mental disability" means (1) any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems; neurological; musculoskeletal; special sense organs; respiratory; including speech organs; cardiovascular; reproductive; digestive; genito-urinary; hemic & lymphatic; skin; and endocrine; or (2) any mental or psychological disorder, such as intellectual disability, organic brain syndrome, emotional or mental illness, and specific learning disabilities. The term "physical or mental disability" includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech, and hearing disabilities; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer; heart disease; intellectual disability; emotional illness; drug addiction; and alcoholism.
- 2 "Major life activities" means functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working.
- 3 "Has a record of such a disability " means has a history of, or has been classified, or misclassified, as having a mental or physical disability that substantially limits one or more major life activities.
- 4 "Is regarded as having a disability" means:
  - (I) Has a physical or mental illness disability that does not substantially limit major life activities, but that is treated by a recipient as constituting such a limitation.
  - (II) Has a physical or mental disability that substantially limits major life activity only as a result of the attitudes of others toward such a disability; or
  - (III) Has none of the disabilities set forth in paragraph (1) of this definition, but is treated by a recipient as having such a disability.