The City of Athens, Hocking Athens Perry Community Action, Athens Public Transit (APT) and Athens on Demand Transit (AODT) offer reduced fares for senior citizens and individuals with a disability when using the public transportation services in the City and County of Athens. Eligible individuals can acquire the ID from the Athens City Building (8 E. Washington Street, Athens). ID showing age 65 or older will be accepted as proof of eligibility for the elderly. Persons under the age of 65 must submit this form with the appropriate signatures, of either a health care professional or an Athens County Board of Developmental Disabilities Service and Supports Administrator

**Applicant’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Birthdate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CERTIFICATION OF INFORMATION AND AUTHORIZATION TO PROVIDE INFORMATION**

I hereby authorize the completion of the remainder of this form by the professional listed below and release of the form and related information to the City of Athens to be used for transportation: **Professional name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\*\*\*TO BE COMPLETED BY HEALTH CARE PROFESSIONAL OR ACBDD SSA\*\*\*\*\***

The following section of the application should be completed by a health care professional or an Athens County Board of Developmental Disabilities Service & Support Administrator:

**I, THE UNDERSIGNED HEALTH CARE PROFESSIONAL OR ACBDD SSA, DO HEREBY CERTIFY THAT THE ABOVE NAMED APPLICANT HAS A MENTAL OR PHYSICAL IMPAIRMENT LIMITING SOME LIFE FUNCTIONS.**

**Professionals Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Office Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Agency\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Professionals Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**