



PIKE COUNTY TRANSPORTATION OFFICE

SENIOR APPLICATION – 65 AND OLDER

PLEASE PRINT

NAME: _____ DATE: _____

MAILING ADDRESS: _____

PHYSICAL ADDRESS: _____

DEVELOPMENT/COMMUNITY NAME: _____

CITY/TOWN: _____

PHYSICAL ADDRESS DIRECTIONS: _____

TELEPHONE NUMBER: _____

CELL PHONE: _____

PROOF OF AGE: **(Please attach document COPY)** _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

EMERGENCY CONTACT (Name & Phone #): _____

Permission to get medical assistance for you in an emergency: Yes: _____ No: _____

Do you need a wheel chair accessible vehicle: Yes: _____ No: _____

List Physical limitations, allergies, or other medical condition: _____

SIGNATURE (MUST BE SIGNED): _____

Do you have a Pennsylvania Medicaid Card? Yes _____ No _____

Pike Co Transportation office Verification by: _____

Do you require the services of a personal care attendant or escort when you travel? (Someone that is needed to assist you during the trip or at the origin or destination) _____ Yes _____ No

Describe when you need the assistance: _____

If so, please complete the escort application and return.

ESCORT POLICY AND APPLICATION

An escort is an individual that shall accompany a client to his or her appointment. Based on physical, medical or mental conditions, certain clients may be required to have an escort of their choice ride with them. This is for the safety and well being of the client and is the sole responsibility of the client.

The escort may not be employed by or provided by the Transportation Office delivering the transport and must be registered with the Transportation Office.

The Transportation Office needs to be notified as soon as possible, should an escort change and that a new escort will be assuming these responsibilities. The new escort must complete an application and provide requested documentation.

The client is responsible to make sure that their escort has submitted the completed escort application before transportation services are provided.

The client is responsible to notify the Transportation Office of any changes in escorts.

An escort must be either a parent, legal guardian, foster parent and all others 25 years of age or older.

All escorts are responsible to submit the escort application along with proof of identification.

ALL ESCORTS ARE REQUIRED TO FILL OUT THE APPLICATION BELOW AND RETURN

Client's Name _____

Escort's Name _____ Date _____

Address _____

Phone _____ Cell Phone _____

Emergency Contact _____

Agency Affiliation _____

Escort Signature _____

A copy of the following identification is required to be submitted with this application:

Pennsylvania ID

or

Pennsylvania Driver's License

PENNSYLVANIA DEPT. OF TRANSPORTATION REQUIRES US TO VERIFY THE AGE OF EVERYONE USING OUR SERVICE. PLEASE FILL OUT AND SIGN THE ENCLOSED FORM AND RETURN IT WITH A COPY OF ONE OF THE FOLLOWING PROOFS OF AGE:

ACCEPTABLE PROOFS OF AGE

1. BIRTH CERTIFICATE
2. BAPTISMAL CERTIFICATE
3. DRIVER'S LICENSE
4. ARMED FORCES DISCHARGE PAPERS
5. STATEMENT OF AGE FROM U.S. SOCIAL SECURITY ADMINISTRATION
6. PASSPORT & NATURALIZATION PAPERS
7. PACE I.D CARD
8. PENNDOT NON-DRIVER'S

IDENTIFICATION: YOU MAY BE REQUIRED TO SHOW A FORM OF I.D. TO THE DRIVER WHEN BOARDING THE VEHICLE.

**PIKE COUNTY TRANSPORTATION FARES
SENIORS 65+
RATES
PAYABLE UPON BOARDING**

In County - less than 15 Miles one way (Zone 1)	\$1.00
In County - between 16 – 21 Miles one way (Zone 2)	\$1.50
In County - more than 21 Miles one way (Zone 3)	\$1.50
Out of County – less than 20 Miles one way (Zone 4)	\$2.00
Out of County - between 21 – 40 Miles one way (Zone 5)	\$3.00
Out of County -more than 41 Miles One Way (Zone 6)	\$4.00
ANY ADDITIONAL STOPS	\$.75

ALL TRANSPORTATION CONSUMERS

The Shared-Ride Program for seniors is a program providing schedule responsive transportation services for persons sixty-five and older.

SHARED RIDE PARTICIPANTS pay a one way fare of \$1.00 to \$4.00 by miles travelled. If there are multiple stops within the trip, there is an additional \$.75 fee for each stop.

MEDICAL ASSISTANCE RECIPIENTS are encouraged to let the scheduling person know they have an access card for medical appointments and pharmacy pick-ups. ★ (There is an eligibility form to be filled out for this program).

GENERAL PUBLIC riders may also access our services based on the following fee schedule:

Zone #1 one-way trip within county:	\$15.00
Zone #2 one-way trip within county:	\$17.00
Zone #3 one way trip within county:	\$19.00
Out of county trips within 21 miles:	\$25.00
Out of county trips from 21-40 miles:	\$38.00
Out of county trips over 40 miles:	\$44.00

Each Additional Stop for General Public is \$7.50, Shared Ride is \$.75, and People with Disabilities \$1.15.

As a provider of transportation, Pike County Transportation is reimbursed 85% for each fare from Pennsylvania Department of Transportation's Shared Ride Lottery Division. Because all trips are coordinated by our transportation manager, whether it is by a staff person or a volunteer, we are obliged to use the most cost-effective method of transportation. **We suggest giving two working days notice if at all possible.** Less notice may not allow us to fit the appointment into our schedule. Same day appointments can not be accepted.

PLEASE GIVE 24-HOUR NOTICE FOR ALL CANCELLATIONS. YOU MAY LEAVE MESSAGES 24/7, FOR CANCELLATIONS, PLEASE NOT FOR APPOINTMENTS. APPOINTMENTS MUST BE LOGGED BY THE TRANSPORTATION DEPARTMENT. SATURDAY AND SUNDAY ARE NOT TO BE COUNTED AS DAYS OF NOTICE.

Questions?

Contact

Pike County Transportation Office

506 Broad Street

Milford, PA 18337

570-296-3408 Phone

570-296-3409 Fax

1-866-681-4947

www.pikepa.org