

Application for Oakville Transit Support Person ID Card

The Oakville Transit Support Person ID Card identifies a person who, because of their disability, requires regular or occasional assistance while travelling on Oakville Transit buses.

In compliance with the *Accessibility for Ontarians with Disabilities Act (AODA), 2005*, the Support Person ID Card allows you to have one support person ride with you free of charge on any Oakville Transit bus (or service) route. There is no charge for the ID card. Card holders will be asked to update their information and obtain a new card every three years.

- Please complete the Section A below (Applicant Information) yourself, or with the assistance of a support person
- Section B: Disability Information, must be completed by a health care professional (i.e. doctor, nurse, physiotherapist, occupational therapist, recreational therapist)
- On completion of this form, please forward by mail, fax or email:
Oakville Transit Fax: 905-338-4703
430 Wycroft Road Email: transit@oakville.ca
Oakville, ON L6H 0H3
- Once your application has been approved, you will receive a confirmation letter and your Support Person ID Card

For further information or clarification, please contact Oakville Transit at 905-815-2020 or visit www.oakvilletransit.ca

Section A: Applicant Information (please print)

Name:

Surname

First

Middle initial

Telephone:

Date of Birth:

YYYY-MM-DD

Address:

Street number and name

Apt. #

Town/City

Province

Postal Code

Email:

Applicant's consent

I consent to Oakville Transit contacting my health care professional if additional information or clarification is required regarding the disability information in my application.

Applicant's signature

Date

please see reverse



OAKVILLE TRANSIT

Section B: Disability Information

To be completed by health care professional (doctor, nurse, physiotherapist, occupational therapist, recreational therapist)

1. Are there conditions or special health care needs which would prevent the applicant's independent use of conventional transit? Please explain:

2. Does the applicant require the assistance of a support person (personal care attendant) in order to travel?
 Yes No

Certification by health care professional

Please print

Name of health care professional:

Professional designation:

Organization's name:

Telephone:

Address:

<i>Street number and name</i>		<i>Apt. #</i>
<i>Town/City</i>	<i>Province</i>	<i>Postal Code</i>

I hereby certify that the information provided is accurate and complete to the best of my knowledge.

Signature of health care professional

Date

Personal information on this form is collected under the authority of the Municipal Act, 2001, S.O. 2001, c.25 as amended, and is used solely to determine eligibility for the Universal Support Person card for travel on Oakville Transit buses. This information is held in strict confidence. Questions about this collection should be directed to the Records and Freedom of Information Officer at 905-815-6053.

For office use only

Date approved

Comments
