

City of Avalon/ Avalon Transit

Avalon Dial-A-Ride Eligibility Application



Overview – Services Available

The City of Avalon's public transit program, known as Avalon Transit, provides two types of paratransit service: Avalon Access and Dial-A-Ride. The following explains the two services and the required applications.

Avalon Access provides curb-to-curb transportation service in accordance with the Americans with Disabilities Act of 1990 (ADA). This service is provided to individuals who, because of a physical or mental disability, are unable to use regular, fixed route bus service in the City of Avalon. This application provides you an opportunity to describe how your disability prevents you from riding the fixed route bus system, in order for Avalon Transit to determine eligibility for ADA Complementary Paratransit services. Age or inability to drive are factors which are not taken into consideration in making an eligibility determination.

Dial-A-Ride service is made available to seniors age 65+ and individuals with disabilities that do not necessarily prevent them from utilizing the Avalon Community fixed route bus. Seniors and those with disabilities will be provided Dial-a-Ride trips on a space-available, immediate response basis. If you are interested in applying for Dial-A-Ride without ADA certification, a three-page Dial-A-Ride application can be obtained from the Avalon Transit office or on our website at _____.

Avalon Dial-A-Ride Eligibility Instructions

Each application will be reviewed for eligibility. The more complete and accurate your application information, the better Avalon Transit staff will understand your abilities and travel challenges.

1. Please answer FULLY all of the questions on the form, and return it to Avalon Transit. Incomplete applications will not be processed, and will be returned to you for completion;
2. If 65 years of age or older, provide identification with your date of birth;
3. If under 65 years and disabled, provide disability documentation from another agency. See Part 3A in Application. If you are not already certified as disabled by a government agency, complete Part 3B of the Application.

Avalon Transit
[Office Address] / Box _____, Avalon CA 90704
Phone: 310-510-xxxx / FAX: 310-510-xxxx / [Email address]

AVALON DIAL-A-RIDE ELIGIBILITY APPLICATION

Office Use Only:
New ____ Recert ____

Submit the following to initiate your Dial-A-Ride Certification:

- 1) Completed Application
- 2) Copy of identification with your date of birth
- 3) Healthcare Verification (only if under 65 years old or you do not have qualifying proof of disability)

Part 1. Applicant Information

Last Name _____ First Name _____ Middle Initial _____

Home Address _____ Unit # _____

City _____ State _____ ZIP _____

Mailing Address (if different from home)

_____ Unit # _____

City _____ State _____ ZIP _____

Daytime Phone: (____) ____ - _____ TDD/TTY: (____) ____ - _____

Evening Phone (____) ____ - _____ Cell Phone: (____) ____ - _____

E-Mail _____ @ _____

Birth Date: ____/____/____ Female Male

Primary Language (please check): English Other (specify) _____

In case of emergency, whom should we contact?

Name: _____

Relationship: _____

Day Phone: (____) ____ - _____ Eve. Phone: (____) ____ - _____

Part 2: Senior Eligibility

To use the Avalon Dial-A-Ride individuals must be either 65 years of age or older or disabled.

If you are 65 years of age or older, please be prepared to show one of the following to document your age:

- Check which: Driver's License or State ID Card
 Medicare Card
 Other: _____

Please SKIP Part 3 and continue your Application with Part 4.

Part 3: Disabled Eligibility

If applicant is under 65 years of age, Avalon Dial-A-Ride eligibility may be granted on the basis of disability by submitting either acceptable evidence of disability certification by another agency or a signed certification of your disability.

3A Disability Documentation: Please be prepared to provide any one of the following to document the certification of your disability by another agency.

- Check which you can provide:
- Current ADA Paratransit Certification Documentation
 - Current SSI/SSDI award letter
 - Valid Blue California DMV Disabled Placard receipt
 - Dept. of Veteran's Affairs documentation of service connected disability
 - Current Transit Discount ID for Disability
 - Other: _____

If you are able to provide any one of the above-listed documentations of your disability, SKIP Part 3B and continue this application with Part 4.

3B Disability Information & Certification

A. Please provide a description of your disability:

B. How does your disability affect your ability to use public transit?

C. Is your disability described above.... (check only one)

Permanent

Temporary

If temporary, how long do you expect it to last? _____ months.

I don't know

D. Does your disability change from day-to-day under certain circumstances?

No

Yes

How? _____

Part 4: Tell Us About Your Travel Needs

1. Which of the following mobility aids or equipment do you use when traveling to destinations outside of your home?

None

Walker

White Cane

Manual Wheelchair

Cane

Service Animal¹

Electric Wheelchair

Crutches

Portable Oxygen

3 or 4-Wheel Scooter

Leg Braces

Prosthesis

Other (please specify) _____

2. Do you travel with a Personal Care Attendant?

Always

Sometimes

Never

12a. If "always" or "sometimes", what type of help do they provide?

¹ "Service Animal" means any guide dog, signal dog, or other animal individually trained to work or perform tasks for an individual with a disability, including, but not limited to, guiding individuals with impaired vision, alerting individuals with impaired hearing to intruders or sounds, providing minimal protection or rescue work, pulling a wheelchair, or fetching dropped items. [49 CFR Part 37, Subpart A, Section 37.3]

IMPORTANT NOTE

Avalon Transit cannot guarantee its ability to transport you if your wheelchair/scooter is longer than 48 in., wider than 30 in., or if your total weight including wheelchair is more than 600 pounds. Transport over these dimensions will be determined by lift and vehicle capabilities.

If you believe that your mobility device might fall into this category, please fill out the below information and we will arrange a time to meet with you personally to examine your mobility device and we will do our best to accommodate you. However, please keep in mind that devices exceeding these standards may not be transportable.

3. Is your mobility device oversized? Yes No

If "Yes", please explain:

4. Does your mobility device weigh less than 600 pounds when occupied?

Yes No I don't know

Part 5: Signature

A. Applicant's Signature

I certify that the information I gave in this application is true and correct.

Signature of Applicant: _____ Date: _____

(Applicants must be 18 years of age to sign independently. Otherwise, the signature of a guardian is required.)

B. Applicant's Representative

If someone other than the applicant has completed this Application, the following information must be provided:

Name: _____

Daytime Telephone Number: (____) _____ - _____

Relationship to Applicant: _____

**Please return completed application to:
Avalon Transit
[Street Address]
Box xxx, Avalon CA 90704**