



**DETROIT TRANSPORTATION CORPORATION  
HALF-FARE ELIGIBILITY FORM**

Patrons must have one of the following to be eligible for DPM Half Fare token or Pass purchase.

	Proof of Eligibility	I.D. Number	Expiration Date
<input type="checkbox"/> Elderly	<input type="checkbox"/> DDOT or SMART Disabled Card	_____	_____
<input type="checkbox"/> Disabled	<input type="checkbox"/> State ID or Driver's License (Age 65 or older)	_____	_____
<input type="checkbox"/> Medicare	<input type="checkbox"/> Medicare Card #	_____	_____
<input type="checkbox"/> Secretary of Station Handicap Decal	<input type="checkbox"/> State Handicap Decal #	_____	_____

Please Note: This form will remain on file for repeat purchases until expiration of your eligibility card.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Date: \_\_\_\_\_

Received By: \_\_\_\_\_

Employee Signature: \_\_\_\_\_