



**BEND DIAL-A-RIDE**

**LOW-INCOME DISABLED ELIGIBILITY APPLICATION**

A special low-income rate is available for individuals eligible for Dial-A-Ride services under the City of Bend Fare Policy.

Low income is defined as participation in one of the following programs. **Please attach proof of participation to this application.**

- Oregon Health Plan (OHP) / Medicaid (**Copy of both front and back of proof required**)
- SSI-OSIPM (Supplemental Security Income, **not Social Security Income**)
- Food Stamps (**Copy of both front and back of proof required**)
- Federal Public Housing Assistance (Local organization: Housing Works)
- Low-Income Energy Programs (LIHEAP)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

DOB \_\_\_\_\_ Address \_\_\_\_\_ Apt/Space # \_\_\_\_\_

Mailing Address if different \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cross Street \_\_\_\_\_ Name of Building or Facility \_\_\_\_\_

Name of person/party responsible for applicants mail \_\_\_\_\_

Telephone: Day \_\_\_\_\_ Evening \_\_\_\_\_

Optional Cell Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

I certify that this information is correct. Signature \_\_\_\_\_ Date \_\_\_\_\_

If completed by someone other than applicant: Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please complete form and mail or Fax to:  
Cascades East Transit  
343 E Antler Ave  
Redmond, OR 97756  
Phone 541-385-8680  
Fax 541-548-9548**