

Levy County Transit

APPLICATION FOR JOB ACCESS REVERSE COMMUTE (JARC) TRANSPORTATION SERVICES

Program provides paratransit trips and access to fixed route (when and where available) to individuals with no means of private transportation, public transportation, or the ability to purchase transportation of any means.

The Job Access Reverse Commute (JARC) program was established to address unique transportation challenges faced by low income persons seeking to obtain and maintain employment. The intent of the program is to eliminate barriers for Levy County residents seeking to find and retain employment.

It provides public transportation in accessible vehicles to limited destinations and is based on availability of funds and requires a mandatory co-payment of 1.00 per trip.

For application to be processed all requested information must be complete when submitted. Incomplete applications may cause delays in eligibility approval. If assistance is needed in completing the application call the office at **352-486-3485**. Mail or deliver completed application to: Levy County Transit, 970 East Hathaway Avenue. Bronson, Florida 32621

Name: _____
Last First Middle

Physical Address: _____ Apt. # _____

Mailing Address If Different: _____

City: _____ Zip Code: _____

Phone: _____ Cell Phone: _____ TDD: _____
(If applicable)

Social Security#: _____ Date of Birth: _____ Gender: Male Female

Emergency contact: Name: _____ Phone: _____

Directions to home: _____

Levy County Transit

Do you or a member of your household have a valid driver's license? Yes No

Do you or a member of your household own a vehicle? Yes No

If you own a vehicle are you able to use it for employment purposes? Yes No

Are you currently employed? Yes No If so where: _____

How long employed on job? _____ #days worked weekly: _____ # hours: _____

Is evening, weekend or holiday travel needed? Yes No How often: _____

Trips to daycare or school? Yes No #of children: _____ # of carseats: _____

Mobility aids required? Yes No If so please list: _____

Does disability prevent use of private owned vehicles for employment purposes?

Yes No Travel without assistance? Yes No If no what assistance is needed: _____

Number of persons in household: _____ Total household income: _____

List all persons in household start with applicant:

<u>Name</u>	<u>DOB</u>	<u>SS#</u>	<u>Income</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If more space is needed put on back of this page

PLEASE READ PRIOR TO COMPLETING THIS SECTION:

I understand by my signature below, that the purpose of this application is to determine if I am Eligible to travel under (JARC) funding and may be asked further information. I certify that I have been truthful in answering all questions and that my answers may be verified, and I Have enclosed proof of income for verification.

Signature: _____ Date _____

Levy County Transit

PLEASE READ PRIOR TO COMPLETING THIS SECTION:

If applicant is able to sign their name and only required assistance completing the application, provide the following:

PLEASE READ PRIOR TO COMPLETING THIS SECTION:

Name Phone number Relationship to applicant

Signature

If applicant is unable to complete or sign application, you must complete the section below. If the applicant is not a minor child of yours, you must enclose evidence of your authority to sign for the applicant (Power of Attorney, Guardianship Papers, etc.)

Name Day Phone: (_____) _____

Address Evening Phone: (_____) _____

Relationship to applicant: _____ How long: _____

I certify that, to best of my knowledge, the information given is correct.

Signature: _____ Date: _____
(Parent or Legal Guardian of Applicant)

I am the applicant's Legal Guardian and have enclosed the appropriate legal documentation.

Please review application, make sure you have completed all necessary information to the best of your ability and signed the form.

Levy County Transit reserves the right to schedule trips for maximum efficiency; rides may be scheduled with transfer locations when necessary and available.

Levy County Transit has the right to refuse transport any time the driver, staff or dispatch deems it necessary for the safety of passengers, the general public, driver, or vehicle.

All services are open to the general public.

The information obtained through this application process is confidential and is only used by Levy County Transit to determine eligibility for services.

For Office use only

Approved _____ Denied _____ Reason for denial: _____ Date _____
Supervisors Initials _____ Trip Limitations: _____ Date Applicant notified: _____ # Children _____
Space type: _____ Escort: _____ PCA: _____ Other _____