



Subsidized Bus Pass – Income Application Form

Must be completed by applicant AND agency

effective 2/9/18

Name: _____
Last, First, M

Gender: _____ Male _____ Female **Marital Status:** _____ Single _____ Married
_____ Legally Separated _____ Widowed

Address: _____ Apt # _____ Zip _____

_____ Rent _____ Own _____ Other **Date of Birth:** _____ **Telephone:** _____

Eligibility

Please indicate all sources of your household's gross annual income: _____

Household Members **Total Annual household income:** \$ _____

Total number of adults in household (over the age of 18): _____

Total number of minors in household (under the age of 18): _____

I AGREE TO the release of information to the Topeka Metro for the purpose of obtaining low income eligibility certification and photo **ID card**. I hereby certify information on this form is true and desire the photo **ID card** for my personal use only. I understand my photo **ID card** is good for three (3) years, is not transferable to any other person, and that the Topeka Metro reserves the right to determine qualifications for issuing cards in accordance with terms and conditions stated. I give the Topeka Metro permission to verify information provided in this application. Photo **ID cards** must be obtained at Quincy Street Station (QSS), 820 SE Quincy Street.

Signature of Applicant

Date

To be completed by Agency only.

I hereby certify the applicant, _____, meets the income threshold as defined by the outlined criteria. To the best of my knowledge the information contained herein is true and correct.

Agency Name

Office Telephone

Agency Representative - Print Name

Agency Representative Signature

The applicant may bring the completed form to QSS to obtain their ID. Or, the Agency Representative may fax the completed form to Topeka Metro at 785-354-8476 at least 1 business day prior to obtaining the ID.

Office Use Only: Received: _____ Filed by: _____ Card Issued: _____
