

C-TRAN ID CARD Applicants with Disabilities



A doctor, nurse, social worker, or other health care provider who knows you and is not a family member must fill out and sign the health care provider verification. For more information, call (919) 469-4086. **Until all medical information is filled out by medical professional, returned to C-Tran, and verified by staff, you may not ride C-Tran's Door-to-Door service.** This form can be completed at the Cary Senior Center located at 120 Maury O'Dell Place, Cary, NC 27513 OR faxed directly to (919) 462-3981. For more information, please call (919) 469-4081. If you need to reserve your initial FREE ride to the Cary Senior Center for registration and have ID made, call (919) 481-2020, dial option #3.

I am under the age of 60 and I have a disability.

Nature of disability: _____

Is this a Temporary Disability? Yes _____ **No** _____

Name _____

Street Address _____ City _____ Zip Code _____

Telephone/Mobile Numbers _____

Age _____ Date of Birth _____ Male _____ Female _____

Do you require an assistant to travel on a bus or car? Yes _____ No _____

Do you utilize any of the following: _____ Wheelchair _____ Service Animal
_____ Oxygen _____ Other: _____

EMERGENCY CONTACT INFORMATION

Name _____

Address _____

Telephone/Mobile Numbers _____

Relationship to Applicant _____

To be filled out by HEALTH CARE PROVIDER only (Town of Cary staff will be calling to verify this applicant's information)

I have read this application and certify that the information is correct.

Signature _____

Printed Name _____

Telephone Number _____

If not a MD, title _____

TO BE COMPLETED BY STAFF ONLY: Verified: Citizenship Verified on Cary GIS _____

Form Faxed to Planning Department (919) 380-6426 ID made: _____ Staff: _____ Date: _____

[Temporary Disability End Date: _____] Notes: _____

Approved Date: _____ Applicant Notified Date: _____ Staff: _____ Date: _____