

JTS Senior Citizen Identification Card Issuance

Re-certify *: _____

Directions: Please fill in all necessary blanks on form (Including initials of person issuing card). When complete, please file in the box provided **in alphabetical order**.

Name: _____

Address: _____

Telephone Number: _____ Date of Birth: _____

Hair Color: _____ Eye Color: _____ Height: _____

How Certified: _____

Mobility Impaired: Yes No Description: _____

Able to get to Bus Stop: Yes No Spring/Fall Only: _____

Mobility Aid Used: Cane Walker Std. W/C Elec. W/C Platform Chair

Date of Issue: _____ Pass Number: _____ Person Issuing: _____

Date of Re-Issue: _____ Pass Number: _____ Person Issuing: _____

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* - Special I.D. cards must be re-certified 3 years after the date of last issue, or at any time a lost or damaged card is re-issued.

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