



# REDUCED FARE IDENTIFICATION CARD APPLICATION

For OCTA ACCESS Approved Clients Riding the Fixed-Route Bus System

OCTA USE ONLY			
ID No:	RP:	Cat.:	ACCESS ID #:
Init: / /	ACCESS Exp: /		PCA: YES <input type="checkbox"/> NO <input type="checkbox"/>

Reduced Fare ID valid only for .25 cent fare on OCTA fixed route service.

**SECTION I – APPLICANT INFORMATION**  
Please print or type in BLACK ink. *(Photocopied signatures are not accepted.)*

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_

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

Telephone Number: ( ) \_\_\_\_\_ – \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

I declare, under penalty of perjury under the laws of the State of California, that the responses I have given are true.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION II – CERTIFICATION**  
To be completed by OCTA ACCESS Eligibility Staff only.

\_\_\_\_\_  
OCTA ACCESS Eligibility Administrator

\_\_\_\_\_  
Date

**PHOTOCOPIED OR FAXED APPLICATIONS WILL NOT BE ACCEPTED.**

Please mail original to:

**Orange County Transportation Authority**  
**ACCESS Certification**  
**P.O. Box 14184 / Orange / California 92863-1584 / (714) 560-OCTA (6282)**