

APPLICATION



MUNICIPALITY OF CHATHAM-KENT AFFORDABLE BUS PASS PROGRAM

Please contact 519-360-1998 to :

1. Get assistance completing the application;
2. Ask any questions about the program;

- * PLEASE NOTE - ONE APPLICATION PER FAMILY
- * MUST PRESENT DOCUMENTATION IN PERSON

1. Application (please print)

Last Name	<input type="text"/>	First Name	<input type="text"/>		
Date of Birth	<input type="text"/>	Age	<input type="text"/>		
You are the applicant. Are you requesting an Affordable Bus Pass for yourself?		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Income (From Notice of Assessment)	<input type="text"/>				
Address	<input type="text"/>	Apartment or unit number	<input type="text"/>		
City/Town	<input type="text"/>	Postal Code	<input type="text"/>	Main Phone number	<input type="text"/>
Email	<input type="text"/>				
CARD #	<input type="text"/>	ID #	<input type="text"/>		
SIGNATURE	<input type="text"/>				

2. Family Members and Dependents

Please list all other family members (Spouse/partner and dependents) who reside at the same address as the applicant.
To list more family members, provide the information on a separate sheet of paper.

Last Name	<input type="text"/>	First Name	<input type="text"/>		
Date of Birth	<input type="text"/>	Age	<input type="text"/>		
Income (From Notice of Assessment)	<input type="text"/>				
No Income or 17 years of age and younger	Yes	<input type="checkbox"/>			
Is this family member requesting an Affordable Bus Pass?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
CARD #	<input type="text"/>	ID #	<input type="text"/>		
SIGNATURE	<input type="text"/>				

Last Name	<input type="text"/>	First Name	<input type="text"/>		
Date of Birth	<input type="text"/>	Age	<input type="text"/>		
Income (From Notice of Assessment)	<input type="text"/>				
No Income or 17 years of age and younger	Yes	<input type="checkbox"/>			
Is this family member requesting an Affordable Bus Pass?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
CARD #	<input type="text"/>	ID #	<input type="text"/>		
SIGNATURE	<input type="text"/>				

Last Name	<input type="text"/>	First Name	<input type="text"/>		
Date of Birth	<input type="text"/>	Age	<input type="text"/>		
Income (From Notice of Assessment)	<input type="text"/>				
No Income or 17 years of age and younger	Yes	<input type="checkbox"/>			
Is this family member requesting an Affordable Bus Pass?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
CARD #	<input type="text"/>	ID #	<input type="text"/>		

SIGNATURE

PLEASE ADD ADDITIONAL APPLICATIONS IF REQUIRED

Last Name First Name

Date of Birth Age

Income (From Notice of Assessment)

No Income or 17 years of age and younger Yes

Is this family member requesting an Affordable Bus Pass? Yes No

CARD # ID #

SIGNATURE

3. Family Income

Check your family size in the Statistics Canada Low Income Measures Before Tax Table. Your family size includes you, your spouse or partner and dependents living in your home. To be eligible for the Affordable Bus Pass, you must fit into one of the scenarios in the table. Your family income (before taxes) must be less than or equal to the Low Income Measures for your family size.

Family Size	Low Income Measures
<input type="checkbox"/> 1	22,160
<input type="checkbox"/> 2	31,339
<input type="checkbox"/> 3	38,382
<input type="checkbox"/> 4	44,320
<input type="checkbox"/> 5	49,551
<input type="checkbox"/> 6	54,281
<input type="checkbox"/> 7	58,630

Total Income for Application	
#1	<input type="text"/>
#2	<input type="text"/>
#3	<input type="text"/>
#4	<input type="text"/>
#5	<input type="text"/>
#6	<input type="text"/>
#7	<input type="text"/>
TOTAL FAMILY INCOME	<input type="text"/>

To convert to other household sizes, multiply the value in the one-person household by the square root of the desired household size.

4. Family Income Documents

Attach a current copy of your Canada Revenue Agency Personal Income Tax Notice of Assessment for all members with an income. Document(s) are used to verify each person's income and must be the most current available. **ODSP clients may present current income statement.**

5. Supporting Identification Documents

One of the following supporting documents must be provided (for applicant and each family member):
- Birth Certificate - Passport
- Driver's License - Ontario Health Card (where the date of birth is imprinted on the card)
- Baptismal Certificate

6. Collection of Personal Information

Personal information contained on this form, and all accompanying documents, is collected by The Municipality of Chatham-Kent under the authority of the Municipal Act, 2001 and will be used by Municipal staff for the purpose of determining eligibility for the Affordable Bus Pass Program and to send you updates about any program changes. Questions regarding the collection and use of this information may be directed to the Municipal Clerk, 315 King Street West, Chatham, ON N7M 5K8, or by telephone 519-360-1998 or email to ckclerk@chatham-kent.ca. **The Municipality of Chatham-Kent reserves the right to terminate the eligibility of any participant if they are found to be in breach of this policy.**

7. Signature

All adults and any family members and dependants with income over 18 years of age **must sign this application.** By signing you agree that all the statements in this application are true to the best of my knowledge and belief and no information required to be given has been concealed or omitted. The Criminal Code of Canada subsection 380(1) states that everyone who by deceit, falsehood or other fraudulent means defrauds the public of any property, money or valuable security is guilty of an offence.

Applicant's signature

Date
day/month/year

8. Sending in Your Application

Deliver in person to: Chatham-Kent Civic Centre 315 King Street W, Chatham, ON

Office Use only

Approved

Denied Reason _____

All Documents Verified

ODSP Deposit Statement Verified

Date: _____

CSR Signature: _____