

INTERNAL USE ONLY

PASS ID# _____

DC (last 4 numbers) _____

CSR INITIALS _____

Reduced Fare Application

In order to receive your pass, you must complete this form.

Date: _____

Name: _____

Address: _____

City, State, Zip: _____

Phone #: _____

Email Address: _____

To obtain a new/renewed Reduced Fare ID you will need your ID, Medicare card and/or expired pass. For information on applying or qualifying for a Reduced Fare ID call visit us online at <https://www.centro.org/fares-passes/reduced-fares> or call (315) 442-3400.

There is a **\$2.00** charge for the following passes:

- | | | |
|------------------------------------|--|--|
| <input type="checkbox"/> Temporary | <input type="checkbox"/> Permanent | <input type="checkbox"/> Renewal/Replacement |
| <input type="checkbox"/> Broken | <input type="checkbox"/> JOBSplus! (voucher) | |

There is a **\$5.00** charge for the following passes:

- ☐ Lost (Reduced Fare)

Note: You must bring your Pass with you or it will be considered lost.

There is NO CHARGE for the following passes:

- | | | |
|---------------------------------|--------------------------------|-----------------------------------|
| <input type="checkbox"/> Spouse | <input type="checkbox"/> Faded | <input type="checkbox"/> ACCES-VR |
|---------------------------------|--------------------------------|-----------------------------------|

Note: Current Reduced Fare ID cardholders may renew their ID cards prior to the expiration date, but not more than 6 months in advance.

