PARATRANSIT ELIGIBILITY INFORMATION

In addition to a physician's signature, the following information will be required on the ADA Paratransit Application to determine eligibility. For an application please contact the Authority office at 724-283-0445.

- Name, Address, Contact Information, Birth Date
- Are you currently riding any Transit Authority fixed route buses?
 - o If your answer is "No" what is the disability which prevents you from using our fixed route services?
- How does this disability prevent you from using fixed route services? Please explain completely.
- Do you use any mobility aids?
- Do you require a personal care attendant when you travel using transit?
- Can you travel 200 feet without the assistance of another person?
- Can you travel ¼ mile without the assistance of another person?
- Can you travel 3/4 mile without the assistance of another person?
- Can you climb 3 12-inch steps without assistance?
- Can you wait outside without support for ten (10) minutes?
- Do you receive benefits or service from any of the following:
 - o Medical Assistance (Medicaid)
 - o OVR
 - o SSI
 - o SSDI
 - o UB4
 - o MH/MR
 - o Workman's Compensation
 - o Office of Blindness & Visual Services
 - o Association Blind & Handicapped
 - Muscular Dystrophy
 - o United Cerebral
 - o Multiple Sclerosis
 - Cancer Society
 - o Nursing Home
 - Goodwill Industries Lifesteps
 - o Other
- Do you currently receive any transportation services from any other of the agencies listed above?
- What trip purposes would you be using the service for?
 - o Work
 - o Medical
 - o Shopping
 - Other (please explain)