

**Low Income Fare Trips (LIFT) Program Application**

Full Name: \_\_\_\_\_  New  Renewal

Female  Male  Other Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Reduced Fare:  Yes  No

If Yes:  Medicare  Age 65+  Reduced Fare ID

Annual Household Income: \$ \_\_\_\_\_ # of People in household: \_\_\_\_\_

\*Ethnic Group:  White/Caucasian  Asian/Pacific Islander  Black/African American  
 American Indian/Alaskan Native  Hispanic Origin  
 Other \_\_\_\_\_

Passes are limited to persons 18 years of age and older who meet the income requirements (must be below 150% of HHS Poverty Guidelines). Passes are limited to 4 per person per month, not to be used on consecutive days, and are available on a first come, first served basis.

Certification: I certify this application has been completed to the best of my knowledge with complete and accurate information. I understand any false statements or omissions of facts relevant to my eligibility for assistance will be considered fraud, and that I may be prosecuted under applicable U.S. Codes for this fraud. Furthermore, I understand that assistance is contingent upon availability of passes.

Eligibility will be determined within 3 business days. Participants will be notified of status via phone or email.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

\*Answer is not required; however, highly encouraged. Information is maintained confidential and may be needed in the future when funding is requested to continue this program.

**National Poverty Guidelines**

|                            |             |          |
|----------------------------|-------------|----------|
| <b>FOR OFFICE USE ONLY</b> |             |          |
| # Passes: _____            |             |          |
| Smartcard # _____          |             |          |
| Municipality:              |             |          |
| Allouez                    | Ashwaubenon | Bellevue |
| Green Bay                  | De Pere     |          |

| Household/<br>Family Size | 150%     | Household/<br>Family Size | 150%      |
|---------------------------|----------|---------------------------|-----------|
| <b>1</b>                  | \$19,320 | <b>8</b>                  | \$66,990  |
| <b>2</b>                  | \$26,130 | <b>9</b>                  | \$73,800  |
| <b>3</b>                  | \$32,940 | <b>10</b>                 | \$80,610  |
| <b>4</b>                  | \$39,750 | <b>11</b>                 | \$87,420  |
| <b>5</b>                  | \$46,560 | <b>12</b>                 | \$94,230  |
| <b>6</b>                  | \$53,370 | <b>13</b>                 | \$101,040 |
| <b>7</b>                  | \$60,180 | <b>14</b>                 | \$107,850 |