

**CITY OF ALBUQUERQUE/ TRANSIT DEPARTMENT**

**HONORED CITIZEN ID APPLICATION**

**Applicant must present this application, completed in full, along with a picture ID, in person at the**

**ABQ RIDE Customer Service Center located at 100 First Street SW. V/TTY 724-3195.**

**Copies of Applications will not be accepted. (Only originals)**

### *Please read the back (pg 2.) of this application for qualifications and policy.*

Physician’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date seen by physician: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please Print)

Office Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ext:\_\_\_\_\_\_\_\_\_

**Medicare recipients need not fill out the information above. However, you must present your Medicare Card and a picture ID when you present this form at ABQ RIDE, no exceptions.**

Applicant’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(Please Print)*** Last First Middle Initial

Applicant’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: (h)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (w)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ext:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medicare Card # ( if applicable)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Due to illness, injury, age, congenital dysfunction, or other permanent or temporary incapacity or disability, this applicant is unable to use the public transit service of the city of Albuquerque as effectively as persons who are not affected in this way. (Please see definition on reverse side.)

Physician: If patient has a disability, please describe. Please indicate if this is a permanent or temporary condition.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Internal Use:***

Initials: \_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_

Approved? Y / N

Expiration: \_\_\_\_\_\_\_\_\_\_\_\_

Physician’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physicians State License Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Application Expiration Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HONORED CITIZEN ID POLICY**

**General**

The Honored Citizen ID authorizes a person to ride the ABQ RIDE regular, fixed route bus system at the established Honored Citizen fare, currently 35 cents one-way. The card is a picture ID that must be obtained from ABQ RIDE and for which there is a nominal charge of $2.00. To qualify as an Honored Citizen, a person must be 62 years of age or older; certified as disabled; or the holder of a valid Medicare card. The Honored Citizen ID is issued for a period of One (1) year. The “Medicare Half-Fare Policy” established October 4, 1991, remains in effect.

A customer seeking an Honored Citizen ID by reason of physical or mental impairment must submit a completed application form signed by a physician. There is no charge for the form. The form is available at ABQ RIDE Customer Service, 100 First Street SW, 87102, online at <http://myabqride.com>, or by calling 243-7433 to request a form by mail. The person seeking the ID must present the application in person at ABQ RIDE’s offices along with a valid picture ID as verification that the person submitting the application is the one for whom the physician certification was obtained.

Only one copy of a lost or stolen Honored Citizen ID will be issued per year, at a charge of $5.00. The issuance of the copy will be recorded and filed in the Customer Services Unit. ABQ RIDE personnel will be checking for unauthorized use of ABQ RIDE ID’s. A customer whose Honored Citizen ID has been subjected to extreme wear or unintentional damage should surrender the original and may be issued a replacement at no cost.

To receive a new ID each year, a customer must present a new application, completed in full, along with their photo ID and, if applicable, their Medicare card.

**Medicare**

An Honored Citizen ID is not required for Medicare cardholders to qualify for reduced Honored Citizen fares. A Medicare cardholder may simply present their Medicare card and picture ID as proof of eligibility when boarding a bus or purchasing a discounted pass.

Anyone wishing to get an Honored Citizen ID who has a duly issued and valid Medicare card may use that as proof of eligibility and does not need a physician to sign their Honored Citizen application.

A valid picture ID may be required at any time as verification that the person presenting a Medicare card is the person to whom the Medicare card was duly issued. Current ID’s acceptable as valid include:

a) An ABQ RIDE Honored Citizen ID.

b) A New Mexico or out of state Driver’s License.

c) A New Mexico or out of state Identification Card

d) A U.S. Military ID.

**Definition of Disabled person:**

“ … Individuals who, by reason of illness, injury, age, congenital malfunction or other permanent or temporary incapacity or disability, including those who are non-ambulatory wheelchair-bound and those with semi-ambulatory capabilities, are unable without special facilities or special planning or design to utilize mass transportation facilities and services as effectively as persons who are not affected. (UTMA-DOT; code of Federal Regulations; Part 609.3)