 **Fair Pass Discount Program**

**Application Form**

The Fair Pass Discount Program is a City of Toronto poverty reduction initiative to make public transit more affordable for low-income Toronto residents. Ontario Works (OW) or Ontario Disability Support Program (ODSP) recipients residing in the City of Toronto who are not in receipt of transportation support equal to or greater than $100 may apply to the Fair Pass Discount Program. The Program provides a discount to eligible users for an approved period of time. The Fair Pass Discount is not transferrable. The Fair Pass Discount Program is subject to annual funding approval by the City of Toronto Council.

This Fair Pass Discount Program Application Form is applicable for adult recipients of OW or ODSP only. Please submit a signed application form to any Toronto Employment and Social Services (TESS) office in-person or by mail. Please contact the Fair Pass Discount Program telephone line at (416)338-8888 or visit any TESS offices if you require assistance in completing the Form or more information about the Program. A complete list of TESS office addresses can be found on the Fair Pass Discount Program information sheet or [toronto.ca/transitdiscount](https://www.toronto.ca/community-people/employment-social-support/support-for-people-in-financial-need/assistance-through-ontario-works/transit-discount/).

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Applicant Information** | | | | | | |
| First Name | | Last Name | | | Date of Birth (yyyy/mm/dd) | |
| Street Number | Street Name | | Suite/Unit Number | City/Town | Province | Postal Code |
| Telephone Number | | Mobile Number | | Email Address | | |

By submitting this application form, I am confirming that:

a) I am a recipient of assistance through Ontario Works or the Ontario Disability Support Program; and

b) I am not in receipt of employment or medical transportation support equal to or greater than $100 in the current month from Ontario Works or/and Ontario Disability Support Program.

I understand that the information provided on this application form is for the purpose of assessing my eligibility for the Fair Pass Discount Program. I authorize the City of Toronto Fair Pass Discount Program staff to obtain information directly from the Ontario Works Program and/or Ontario Disability Support Program to confirm my Fair Pass Discount eligibility.

Applicant: \_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:      \_\_\_\_\_\_\_\_\_\_\_

Name (First, Last – print) (yyyy/mm/dd)

Toronto Employment & Social Services collects personal information on this form under the legal authority of the City of Toronto Act, S.O. 2006, Chapter 11, Schedule A, s 136 (c) and the City of Toronto By-law No.1290-2016. The information is collected for the purpose of assessing the eligibility for the Fair Pass Discount Program.  Questions about this collection can be directed to the Manager, Program Support, Metro Hall, 55 John Street, 11th Floor, Toronto, Ontario, M5V 3C6 or by telephone at 416-338-8888

|  |  |
| --- | --- |
| For Office Use ONLY | SAMS Reference Number |
| Eligible  Ineligible | Processed by Staff Name (First, Last) |

311 logo. Text: Toronto at your service.

26-0219 2020-01

Please complete both sides of this form.



**Fair Pass Discount Program**

**Consent to Collect and Share Information**

In consideration of my participation in the City of Toronto's Fair Pass Discount Program,

I,      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby freely give my consent to

(Name-First, Last -print)

The City of Toronto to share the following information about me with the Toronto Transit Commission ("TTC") and Metrolinx (as operator of the PRESTO fare collection system) for the sole purpose of administering a Fair Pass Discount on my PRESTO card:

* my PRESTO card number(s) including any replacement card numbers; and
* that I, as a recipient of assistance under the Ontario Works Act, 1997, and/or Ontario Disability Support Program Act, 1997, am eligible to participate in Phase 1 of the Fair Pass Discount Program.

I also give my consent to Metrolinx to disclose any new PRESTO Card number to the City of Toronto in the event my Fair Pass concession is transferred to a new PRESTO Card, as well as my old PRESTO Card number. I further acknowledge that the City of Toronto will provide this consent to Metrolinx when appropriate and that Metrolinx is relying on my consent herein to disclose this information to the City of Toronto.

I further give my consent to the TTC to provide card usage transaction reports to the City of Toronto for the purpose of processing the Fair Pass Program subsidy payment.

I have read and understand the above information. This consent is given for the stated purpose only and shall remain valid while I am a participant in the Fair Pass Discount Program. I understand that I may withdraw my consent at any time by giving written notice to the City of Toronto's Fair Pass Discount Program staff. I acknowledge and agree that if I withdraw my consent, I shall immediately be withdrawn from the Fair Pass Discount Program.

Applicant:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:      \_\_\_\_\_\_

(Name-First, Last -print) (yyyy-mm-dd)

Toronto Employment & Social Services collects personal information under the legal authority of the City of Toronto Act, S.O. 2006, Chapter 11, Schedule A, s 136(c) and the City of Toronto By-law No.1290-2016. The information is collected for the purpose of administering and evaluating the Transit Fare Equity: Fair Pass Discount Program. Questions about this collection can be directed to the Manager, Program Support, Metro Hall, 55 John Street, 11th Floor, Toronto, Ontario M5V 3C6 or by telephone at 416-338-8888

26-0217 2020-01 311 logo. Text: Toronto at your service.

Please complete both sides of this form.