



OVRTA/EORTA
21 S. HURON ST
WHEELING, WV 26003
PHONE (304) 232-2190

DISABLED PASS APPLICATION

FEE: \$2.00

Applicants will be issued an OVRTA picture ID card which must be presented to purchase a pass or pay half-fare. Pass must be shown to driver.

Section A

To be filled out by applicant (Please print)

Name: _____

Address: _____

Phone Number: _____ Medicare Number: _____

Signature of applicant _____

Section B

To be completed by physician

Physician's Medical Diagnosis:

Date of visit to physician _____ / _____ / _____

Is disability _____ Permanent

_____ Temporary

expected date of recovery _____ / _____ / _____

(Card will not be issued if date is not filled in)

Name of Physician (Print) _____

Physician's Signature _____

Section C

Company Use Only

Date Received _____ / _____ / _____

Date Card Issued _____ / _____ / _____

Approved _____ (yes)
 _____ (no)

Official Signature _____