



GOVA TRANSIT & GOVA-PLUS DISABILITY PENSIONERS' BUS PASS

ELIGIBILITY:

You are eligible for a Disability Pensioners' Pass for Specialized Transit or Conventional Transit if you are a resident of the City of Greater Sudbury and are currently receiving one of the following:

- 1) Ontario Disability Support Program (O.D.S.P.)
- 2) Association for Children with Severe Disabilities (A.C.S.D.)
- 3) Canada Pension Plan Disability (C.P.P.D.)
- 4) A War Veterans Pension
- 5) Registered with CNIB

HOW TO APPLY:

Please complete the reverse and follow the instructions below:

- 1) Persons receiving a monthly disability cheque from the Ontario Disability Support Program, or the Association for Children with Severe Disabilities, must have the application form **certified by the Ministry of Community and Social Services at 199 Larch Street, 5th floor.**
- 2) Persons receiving a monthly disability cheque from the Canada Pension Plan for Disability **MUST** present proof in the form of a **T4, current pay stub and photo identification** to the Transit Kiosk staff located at 9 Elm Street upon application.
- 3) Persons receiving War Veteran's Pension must have the application form **certified by the Department of Veteran's Affairs.**
- 4) Persons registered with the C.N.I.B. must have the application form **certified by the C.N.I.B.**

Return the completed application form by:

Mail:

City of Greater Sudbury Transit
1160 Lorne Street, Sudbury, ON, P3C 4TC
ATTN.: GOVA PLUS/DISABILITY PENSIONERS' SERVICES

In Person:

At the Transit Centre Kiosk, 9 Elm St. or at any
Citizen Service Centre

PLEASE NOTE: For conventional Transit, a Photo I.D. card must be purchased for \$6.00 and acquired at the Transit Centre Kiosk, 9 Elm. St.

REDUCED FARES:

The reduced fares you can qualify for are:

6-RIDE CARD

\$15.00

31-DAY PASS

\$56.00

FOR FURTHER INFORMATION ABOUT GOVA TRANSIT, PLEASE VISIT:
<https://www.greatersudbury.ca/live/transit/> or CALL 705-675-3333



APPLICATION FOR GOVA TRANSIT & GOVA PLUS DISABILITY PENSIONERS' BUS PASS

Date: _____

Applicant Name: _____

Address: _____

Phone Number: _____

Date of Birth: _____

Application for Conventional Transit OR Specialized Transit

This will verify that Mr. / Miss / Mrs.: _____ is receiving one of the following pensions: *(check one of the following)*

An Ontario Disability Support Program Pension (O.D.S.P.).....

A pension from the Association for Children with Severe Disabilities (A.C.S.D.).....

A disability from the Canada Pension Plan Disability (C.P.P.D.).....

A War Veterans Disability Pension.....

Or

Is Registered with the C.N.I.B

Authorization:

Signature / Place stamp here