



Accessible Fare Identification Card Application

Discounted fares are available for residents of British Columbia who have a **permanent** disability. To receive the discounted fares, you must apply for a BC Ferries' Accessible Fare Identification Card and present your card to the Ticket Agent when you arrive at the terminal.

A qualifying permanent disability may result in the inability to:

- Carry out personal care activities such as preparation, serving and eating of meals, dressing, washing, bathing, personal grooming, etc.
- Be mobile without personal assistance
- Manage personal affairs without supervision

The discounted fare applies to the cardholder and escort, if one is required. *As discounts cannot be applied after you have completed your trip*, any discrepancies involving your fares should be resolved at the terminal prior to sailing.

The AFI program is subsidized by the Government of British Columbia. This application is subject to review by government auditors.

Accessible Fare Identification Cards are valid for 5 years and can be renewed by submitting a completed application form. Please allow 2-3 weeks to process your application.

Complete the attached application form and mail to:

BC Ferry Services Inc.
Accessible Fare Identification Card Application
Suite 500, 1321 Blanshard Street
Victoria, BC V8W 0B7

APPLICANT'S INFORMATION

(To be completed by Applicant or Guardian)

Name of person with disability _____

Home Address _____

City _____, BC Postal Code _____

Contact Telephone _____

****Please provide only ONE criteria from A, B or C****

PROOF OF DISABILITY

Please provide only **ONE** of the following documentation to prove that you are receiving the disability benefit.

- A. **Persons with Disabilities (PWD) designation** - Please visit the *Ministry of Social Development and Social Innovation* to obtain a "Release of Personal Information" form from your financial assistance worker OR go on-line to your "My Self Serve" account and print a "Confirmation of Assistance" and include it with your application.

OR

- B. **Canada Pension Plan Disability** - Please contact *Service Canada* at 1-800-277-9914 to request official documentation verifying that you have been approved for and are currently receiving this benefit and include it with your application.

Please note: Cheque stubs are not acceptable documentation.

OR

C. TO BE COMPLETED BY YOUR PHYSICIAN OR NURSE PRACTITIONER

Attention: Please see qualifications on page 1 of this application. Ensure that your submission/approval of this application is for a patient who has a **permanent disability only**.

I have access to this applicant's medical records and hereby certify that

(Name of Applicant)

has a permanent disability that impedes this person's normal daily activities (e.g. preparation, serving and eating of meals, mobility, managing personal affairs, etc.)

CERTIFICATION

I hereby certify that, to the best of my knowledge, the above information is true and correct.

Signature of Physician / Nurse Practitioner

Name of Physician/Nurse Practitioner (please print)

Address

Physician Stamp

PHOTO DETAILS

BC Ferries requires photographic identification to verify your identity at the ticket booth so we can apply the discount to your fare. This photo will be laminated onto your Accessible Fare Identification Card and copies of the photograph will *not* be kept on file by BC Ferries.

*** Please write your surname on back of photo.** The photograph requirements are as follows:

- Photos must show a full front view of the face with both edges of the face showing clearly. The face and shoulders must be centred in the photo and squared to the camera. Photo size should be **3.5 cm high x 3 cm wide**.
- Eyes must be open and clearly visible. Glasses, including tinted ones with prescription, may be worn as long as the eyes are clearly visible. Sunglasses are unacceptable.
- Hats and other head coverings are not permitted except when worn for religious or medical reasons and only if the full facial features are clearly visible.
- Black and white **or** colour photos are acceptable. Photocopies will not be accepted.

Example of acceptable photograph:



If you do not provide a photo for your AFI card, please be advised that you will be required to show government issued photo ID along with your AFI card at the terminal in order to receive the discounted fare.

DECLARATION STATEMENT

(To be completed by Applicant or Guardian)

I hereby apply for an Accessible Fare Identification Card. I understand that BC Ferries may contact my physician or nurse practitioner to ensure the eligibility criteria have been met and I consent for them to provide information about me to BC Ferry Services Inc. for this purpose only.

Signature: _____

Applicant or Guardian (if Guardian, please indicate)

Date: _____

Personal Information on this form is collected under section 26(c) of the Freedom of Information and Protection of Privacy Act so we can process and administer your Accessible Fare Identification Card. If you have any questions about the collection of this personal information, please contact Customer Service Support at: BC Ferry Services Inc., Suite 500, 1321 Blanshard Street, Victoria, BC V8W 0B7 or call 1-888-223-3779 to speak with an agent.

CHECK LIST

- Completed Accessible Fare Identification Card Application
- Proof of PWD or CPP disability documentation (if applicable)
OR
- Ensure Physician or Nurse Practitioner has signed and stamped Section 3 (if applicable)

- Enclose Photograph 3.5cm high x 3 cm wide

We are not able to process applications if one of A, B or C have not been provided