



Local Reduced Fare Taxi Program Applicant:

The Local Reduced Fare Taxi Program (the “Program”) is available to all City of Fairfield residents **60 years of age or older or ADA paratransit-qualified passengers**. Taxi trips are available for curb-to-curb service, 24 hours a day, 7 days a week and provided by Fairfield Cab (707) 422-5555 and Veteran’s Corp (707) 421-9999.

- Complete the application on page 2 and provide Proof of Age and Proof of residency (must be within Fairfield city limits).
- A valid proof of eligibility (yellow City of Fairfield Taxi Card or current Solano County ADA Paratransit Identification Card) as well as photo ID must be shown to taxi driver under the Program.
- Program participants may only travel within Fairfield city limits.
- Taxi trips under the Program must be paid for with Local Taxi Scrip. Balances under one dollar (\$1) may be paid in cash or coin.
- **A \$20 book of Local Taxi Scrip is available for \$10** and is available for purchase at the Fairfield Transportation Center, located at 2000 Cadenasso Drive, Fairfield, CA 94533 or by mail by using the DART Pass and Taxi Scrip Order Form. Request the form by calling (707) 434-3800 or find it online at www.fasttransit.org.
- Local Taxi Scrip is limited to 40 books per eligible passenger, per month.
- Local Taxi Scrip may not be used for tipping the drivers.

If you have questions about the Program, please call (707) 434-3800.

Free language assistance | Asistencia gratis en su idioma | Libreng tulong para sa wika | 免費語言幫助



Local Reduced Fare Taxi Program Application

PLEASE PRINT CLEARLY

Name: _____
Last First M.I.

Address: _____

City: _____ Zip Code _____

Phone: _____ Male _____ Female _____

Birthdate: _____

I understand that:

- *There is a charge for the taxi service.*
- *Taxi trips must be paid with Local Taxi Scrip.*
- *The City of Fairfield is not responsible for any taxi service delivery issues, lost items, or fare discrepancies with the taxi service providers.*
- *Fare balances under one dollar (\$1) may be paid in coin.*

Local Taxi Scrip may not be used for tipping drivers.

Signature: _____ Date: _____

The following documentation must be submitted with this Application:

1. **Proof of age.** Age must be verified with a California driver’s license or California identification card. Other sources proving date of birth may be accepted.
2. **Proof of residency within Fairfield City Limits:** Identification must be from a recognized source (California driver’s license or California identification card, recent utility bill, check deposit slip, etc.).

Mail completed application and required documentation to:

**City of Fairfield
2000 Cadenasso Drive
Fairfield, CA 94533**