Veterans Pass Application Form

Please complete all applicable sections.

Applicant Information

I confirm that I am a City of Belleville resident residing in Ward 1 ☐ Yes

First name: _____

Last Name: _____

House/911 number: _____ Street name: _____

Apt. or unit #: _____ City: _____ Postal Code: _____

Primary Phone Number: _____

Secondary Phone Number: _____

E-Mail Address: _____

Date of Birth: _____

Emergency Contact

Name: _____

Phone Number: _____

Relationship: _____

Veteran Eligibility

I confirm that I am a Canadian Armed Forces veteran and meet the eligibility requirements for the Veteran Transit Pass.

☐ Yes

Acceptable Proof of Veteran Status (indicate which ID you will provide):

☐ Canadian Armed Forces Veteran Service Card
☐ CF1 Card
☐ Veterans Affairs Canada (VAC) Identification
☐ Other official veteran documentation (please specify):_____

Please include a copy of your Proof of veteran status with your submission.

Terms & Conditions of Use:

The Veteran Transit Pass is valid for 10 years from the date of issue and entitles the cardholder to unlimited travel on regularly scheduled Belleville Transit conventional services. Use on Mobility Bus services is permitted only for individuals who are registered and approved for Mobility Bus eligibility in accordance with Belleville Transit policies.

- I understand this pass is for my personal use only.
- I understand misuse may result in suspension or cancellation of the pass.
- I understand eligibility may be reviewed periodically.
- I acknowledge this program is subject to change or cancellation by the Municipality

APPLICANT DECLARATION

I hereby certify that to the best of my knowledge, the information given above is correct and I understand the Terms and Conditions of Use.

Signature of Applicant or Designate: _____

Date: _____