



Berkshire Regional Transit Authority (BRTA)
1 Columbus Avenue Suite 201 Pittsfield, MA 01201
413-499-2782 800-292-2782

Dear Applicant:

An application for the BRTA Medical Transportation for Seniors in Rural Areas is enclosed. Please answer all questions. Incomplete applications will be returned and not considered submitted until complete.

Email, mail, or hand deliver the application to BRTA.

Email: julie.davine@berkshirerta.com

BRTA, 1 Columbus Avenue, Suite 201, Pittsfield, MA 01201

Once the application is processed, BRTA will reach out to you and if accepted, transportation scheduling can begin.

This medical transportation program is for seniors, 60 years+, living in the following rural areas:

Alford, Becket, Clarksburg, Florida, Hancock, Monterey, Mount Washington, New Ashford, Otis, Richmond, Savoy, Washington, and Windsor

Operating hours are Monday – Saturday, from 7 AM – 6 PM. Pricing is BRTA Non-ADA base fare \$7.50 and \$2.50 for each additional town of travel. Fare is paid online through RM Pay (please see RM Pay brochure). Drivers cannot accept fare payment.

Reservations are accepted in advance for up to fourteen (14) days, between 8:00 AM and 5:00 PM Monday-Saturday, excluding holidays, at least one day before the requested trip date, at (413) 499-2782 ext. 3. Proof of identification using a current license, state ID, or passport will be required on every trip. There are no same-day bookings available for this program.

For questions or assistance in completing your application, please call BRTA at (413) 499-2782 or (800) 292-2782.

Sincerely,
BRTA ADA Coordinator



Berkshire Regional Transit Authority (BRTA)
1 Columbus Avenue Suite 201 Pittsfield, MA 01201
413-499-2782 800-292-2782 413-442-2536 FAX

BRTA Medical Transportation for Seniors in Rural Areas

Applicant Information

This form must be filled out completely. **Please type or print.**

Last Name _____ First Name _____ MI _____

Address _____ Apt. # _____

Town _____ State _____ Zip _____

Phone _____ Cell _____

Email _____ Date of Birth _____

Provide a copy of proof of identification using a current license, state ID, or passport. If dropping the form off at BRTA, a copy will be made by staff.

Return completed form to:

BRTA - ADA Coordinator
1 Columbus Avenue
Suite 201
Pittsfield, MA 01201
Email: julie.davine@berkshirerta.com
Fax (413) 442-2536