



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

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## ***BRTA 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.gov](mailto:julie.davine@berkshirerta.gov)**  
**Fax (413) 442-2536**