TAXI VOUCHER PROGRAM

DISABILITY VERIFICATION FORM

Department of Aging and Disabilities Attn: Taxi Voucher Program 2666 Riva Road, Ste. 400 Annapolis, MD 21401



To be completed by the health care provider on behalf of your patient or client:

The Anne Arundel County Department of Aging and Disabilities operates the Taxi Voucher Program designed to provide essential transportation to Anne Arundel County residents who are 65 years of age or older, or have a verifiable transportation disability which precludes his/her ability to use public transportation services.

Verification of the disability must be made by a physician, psychiatrist, psychologist, or program director of a qualified social agency serving individuals with disabilities. Please complete the following form with your recommendations. Thank you for your assistance.

How does the disability prevent use of public transpo	rtation?	
Is the disability permanent or temporary?		
If temporary, how long before client is reevaluated?		
I recommend certification of (person's name) Program.		_ for the Taxi Vouche
Printed name of recommending person:		
Signed name of recommending person:		
Professional affiliation:		
Title:	Phone #:_	
Address:		