Galveston Area Ambulance Authority Discounted Services Application Requirements

Applicant's Name: ____

You may apply for a discount by filling out the <u>Application for Discounted Services</u> and providing <u>at least one document</u> from the list in each category below. Proof of Identification and Proof of Income are required to determine any discount eligibility. Proof of your current address is required for registration.

1) Proof of Identification (yourself, spouse and children, if applicable)

- Driver's License / State Identification Card
- Student Identification Card or School Records
- Passport
- Birth Certificate (children)
- Transportation Worker Identification Credential (TWIC) Card
- Texas Department of Corrections (TDC) Identification Card
- US Immigration Documents
- US Permanent Resident Card
- Work Identification Card

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- Consular or International Identification Card
- International Voters Registration Card with Photo ID
- County Indigent Healthcare Program ID card
- 2) **Proof of Income** (the last 30 days of household gross income self and spouse) consecutively one month of current paycheck stubs.
 - One Month's worth of paycheck stubs
 - PAID 1 TIME A MONTH LAST CHECK STUB
 - PAID 2 TIMES A MONTH
- LAST TWO CHECK STUBS

LAST FOUR CHECK STUBS

- PAID BIWEEKLY LAST TWO CHECK STUBS
- PAID WEEKLY
- Wage verification from employer on company letterhead and signed by the employer or representative
- Federal Income Tax Documents (within 12 months)
- Proof of retirement income (Award letters/documentation verifying monthly gross)
- Award Letters of benefit payments (Unemployment, SSI, Social Security Disability)
- Attorney General's Child Support documentation
- Letter from Shelter on letterhead, dated, signed with the full name and contact information of the authorized person writing the letter (stating the Applicant's current financial situation; example unemployed, receiving no income)
- Letter of support dated and signed from the person who helps the Applicant with living expenses (include Applicant's full name, the full name, address, and contact number of the person providing the support). It must state the Applicant's financial situation (example: unemployed, receiving no income and the person is assisting with living expenses).

3) Proof of Address

- Utility Bill (lights, water, gas, telephone/cell, cable/satellite tv or business mail) (dated within last 30 days)
- Pay check stubs
- Current State Driver's License
- Current State Identification Card
- Consular or International Identification Card
- Property tax documents (within 12 months)
- Automobile Insurance Documentation (non-expired)
- Current Lease Agreement or Mortgage documents (signed)
- School Registration Records
- Voter's Registration
- Federal/State Housing Documents
- Letter from Shelter on letterhead, dated, signed with the full name and contact information of the authorized person writing the letter (stating Applicant's full name and the temporary housing situation or homelessness)
- Letter of support dated and signed with the full name, complete address, and contact number of the person assisting with the Applicant's housing. (include the Applicant's full name and state the physical address where the Applicant is residing.