

## Handicap Placard

### Who is Eligible?

A person with a disability listed below that is certified by a health care provider. Eligibility includes a person who:

1. is blind\*,
2. does not have full use of an arm or both arms,
3. cannot walk 200 feet without stopping to rest,
4. cannot walk without use of, or assistance from, a brace, cane, crutch, another person, prosthetic device, wheelchair or other assistive device,
5. is restricted by lung disease to such an extent the person's forced (respiratory) expiratory volume for one second, when measured by spirometry, is less than one liter or the arterial oxygen tension is less than 60 MM/HG on room air at rest,
6. uses portable oxygen,
7. has a cardiac condition to the extent the person's functional limitations are classified in severity as Class III or Class IV according to the standards set by the American Heart Association,
8. is severely limited in his or her ability to walk due to an arthritic, neurological or orthopedic condition,
9. is a person in loco parentis of a person specified in (1), (2), (3), (4), (5), (6), (7), or (8),
10. is a parent including adoptive parent or foster parent, of a child or adult child provided that the person has custody, care or control of the child or adult child and the child or adult child satisfies paragraph (1), (2), (3), (4), (5), (6), (7), or (8)
11. is the spouse of a person specified in paragraph (1), (2), (3), (4), (5), (6), (7), or (8).

\*If an applicant is blind or does not have full use of a leg or both legs, the application can be signed by a police officer.

**NOTE:** A person may have two permanent Persons with Disability placards or 1 permanent placard and 1 Persons with Disability registration plate.

FAQs: <https://www.dmv.pa.gov/Pages/FAQ%20Pages/Placard-Frequently-Asked-Questions.aspx>

Form: <http://www.dot.state.pa.us/public/dvspubsforms/BMV/BMV%20Forms/mv-145a.pdf>

## Retired, Reduced Vehicle Registration

ELIGIBILITY REQUIREMENTS AND INSTRUCTIONS FOR THE \$10.00 PROCESSING FEE 1. You must be retired and receiving Social Security or other pension payments as described in Section D on the front of this application, regardless of age. Part-time employment is permitted if you are retired from your principal occupation. If you receive only unemployment compensation or public assistance, or are a student or other individual who is not retired, you do not qualify. 2. Total gross income from all sources must not exceed \$19,200. Other income includes Business/Rental Income, Wages, Public Assistance and Unemployment Compensation. 3. To be eligible for the retired status processing fee, the applicant must meet the qualifications above and the applicant must be listed as an owner on the vehicle's registration. **The vehicle may be owned jointly, however, the applicant must be the principal operator of the vehicle, unless physically or mentally incapable of operating the vehicle. The vehicle must be a passenger car or truck with a registered gross weight of not more than 9,000 lbs.** Only one vehicle per qualified applicant may be registered for the retired status processing fee. 4. This application must be submitted in conjunction with Form MV-1, MV-4ST, MV-105, MV-120 or MV-140. 5. NOTE: Individuals should list their PA Driver's License (PA DL) or Photo ID# in the space provided. Return the completed application with your vehicle registration application and include a \$10 check or money order made payable to PA Department of Transportation. DO NOT SEND CASH

<http://www.dot.state.pa.us/Public/DVSPubsForms/BMV/BMV%20Forms/mv-371.pdf>

## MA 51 and Physician Certification

[Click here for the certification](#)

## Farmers' Market Proxy Form

**Proxy** - means an individual authorized by an eligible senior to act on the senior's behalf, including receipt of SFMNP checks and use of SFMNP checks at authorized outlets, as long as the SFMNP benefits are ultimately received by the eligible senior. **Power of Attorney (POA 's) must have a completed proxy.**

**EX - A husband picking up the SFMNP checks for his wife must have a completed proxy form from his wife in order to receive the checks for his wife.**

[\\*PDF Proxy Form \\*](#)

## **PACE/PACENET Income and Form**

[https://pacecares.magellanhealth.com/documents/PACE\\_Enrollment\\_Form\\_Instructions.pdf](https://pacecares.magellanhealth.com/documents/PACE_Enrollment_Form_Instructions.pdf)

### **PACE/PACENET Maximum Income Limits**

<b>PACE:</b>	Single:	<b>\$14,500</b>	<b>Copay Generic</b>	<b>\$6</b>
	Married:	<b>\$17,700</b>	<b>Copay Single-Source Brand</b>	<b>\$9</b>
<b>PACENET:</b>	Single:	<b>\$27,500</b>	<b>Copay Generic</b>	<b>\$8</b>
	Married:	<b>\$35,500</b>	<b>Copay Single-Source Brand</b>	<b>\$15</b>