

2020 YEAR ROUND RESIDENT ID RENEWAL FORM

The year-round resident program has been established by the Board of Commissioners of the Fishers Island Ferry District for the purpose of encouraging and sustaining year round residency through a ticket discount when using the ferry service. Year round residents are also encouraged to register to vote from a Fishers Island address in order to participate in ferry elections. The dependents of year round residents also qualify until they establish separate residence or reach the age of 26.

1. Qualifications of "Year Round Residency" are (circle your responses):
 - a. I lived on the island 270 days in 2019 – **Y/N**
 - b. I have a valid NY State driver's license or NYS ID with a Fishers Island address – **Y/N**
 - c. I am registered to vote for Ferry District elections - **Y/N**

Failure on any one qualification item will require review by the Board of Commissioners.

2. Applicants must submit this completed renewal form to the Fishers Island Ferry District's business office for review and approval.
3. In order to receive the discount, the year round resident must display his/her ID card when purchasing a ticket and unique cards must be displayed for each ticket acquired. Year-round residents may use pictures of their Resident IDs on their mobile devices as proof of residency and eligibility for the resident fare discount in place of having the ID card on-hand.
4. ***The Resident Rate is strictly for personal use only.*** Year-round residents using the ferry for business or commercial use are required to pay the full fare.
5. **Residents are required to have a freight account with an email address.**
6. Replacement cards cost \$10.00.
7. Granting of the year round pass is ultimately at the discretion of the Fishers Island Ferry District's Board of Commissioners. The resident ID may be suspended or withdrawn at any time. Misuse of this privilege may result in termination of the ID card.

~ Continued on the backside.

Initial

2020 YEAR ROUND RESIDENT ID RENEWAL FORM

Name _____

Address _____

Telephone _____ Cell _____

Email _____

Drivers License _____ ST _____

Please list dependents:

I HAVE READ THE REGULATIONS CONCERNING YEAR ROUND PASSES AND HEREBY DECLARE THAT I FULFILL THE RESIDENCY REQUIREMENTS ABOVE AND WILL ABIDE BY THESE RULES AND REGULATIONS.

Date Submitted _____

Signature _____

Agent: _____ Date Issued: _____

Approved _____ Date _____