

Dial-A-Lift Physician's Statement

Long Beach Transit's (LBT) Dial-A-Lift (DAL) services are only available to those with severe and permanent mobility impairments, LBT DAL requests a physician to assess and verify an applicant's disability in order to determine the appropriate transportation service for each individual.

Please include a brief description of the patient's mobility impairment(s) that would prevent the patient from using LBT's fixed-route bus system.

Patient's name: _____

Physician's name: _____

Telephone: _____

Address: _____

Temporary / Duration _____ Month(s) _____ Year(s) Permanent.

I certify that I am a licensed physician in the State of California.

Signature: _____ Date _____

Please describe the patient's mobility impairment(s):

This Physician's Statement is valid for 6 months after the signed date