

## THE CENTRAL BUSINESS DISTRICT TOLLING PROGRAM LOW-INCOME DISCOUNT PLAN APPLICATION

### GENERAL INSTRUCTIONS AND REQUIREMENTS

1. The Low-Income Discount Plan (LIDP) for the Central Business District Tolling Program (CBDTP) in the Central Business District (CBD), popularly named the Congestion Relief Zone (CRZ), is available to registered vehicle owners who meet at least one of the following criteria:
  - Enrolled in a qualifying government assistance program (Supplemental Nutrition Assistance Program (SNAP); Temporary Assistance for Needy Families (TANF); or Special Supplemental Nutrition Program for Women, Infants, Children (WIC))
  - Reporting Federal adjusted gross income on their income tax return for the prior calendar year in the amount of no more than \$50,000.
2. Eligible vehicles will receive a 50% discount on the CRZ toll after completing ten (10) trips in the same calendar month. While all trips count towards fulfilling this requirement, the discount will not be applied to tolls incurred in the overnight hours as the overnight toll is already discounted. Eligible vehicle types for this plan include registered passenger vehicles (station wagons, sedans, sport utility vehicles, pickup trucks, and vans).
3. Enrollment in the LIDP requires a valid E-ZPass NY account. The information on your E-ZPass NY account and LIDP application **MUST** be identical (e.g., name, address, and vehicle license plate(s)) or your application may be rejected. It is recommended that customers applying for LIDP and an E-ZPass NY Account for the first time complete the LIDP application before setting up an E-ZPass NY account. Existing E-ZPass NY customers will be required to provide a valid E-ZPass NY account number when completing the online LIDP application. If mailing the application, existing E-ZPass customers must provide a valid E-ZPass NY account number on their LIDP application. New E-ZPass customers must mail both the LIDP and E-ZPass NY applications together (*See General Instructions & Requirement 8 below*).
4. When applying for the LIDP, you will be required to provide proof of: (1) Vehicle(s) Registration; and (2) Proof of enrollment (Acceptance Letter) in a qualifying government assistance program (SNAP, TANF, or WIC) or Proof of Income (Internal Revenue Service (IRS) Form 1040 (1040-SR, 1040-NR or on the IRS personal income tax return form that was in effect for the most recent tax year) **or** IRS Tax Return Transcript and corresponding W-2s from the most recent tax year. When submitting proof of income from the IRS and W-2s, you **MUST** redact any social security numbers from the submitted copies. Applicants will also be required to provide vehicle information (License plate number, State/Province) for the vehicle(s) used for the LIDP. Please review the Terms and Conditions for details on qualifying vehicles.
5. The address printed on each document submitted with the LIDP application **MUST** match the Applicant's/Account holder's mailing address to be considered eligible for this plan (e.g., the address on the account holder's vehicle registration must match the address on the government assistance and income documents as well as the address on the E-ZPass NY account).
6. If the account holder is adding a vehicle(s) registered to another individual to the E-ZPass NY account with LIDP, the account holder must provide proof that the vehicle owner is part of their household (e.g., listed as a spouse and/or dependent on the account holder's proof of income from IRS or evidence from the government assistance program that benefits extend to that individual). Also, the address on the vehicle registration **MUST** match the address of the Applicant/Account Holder.
7. Applicants will receive a formal decision once their application is processed.
8. Mail Applications or Appeals to: Customer Account Correspondence  
Attention: LIDP Application Processing  
PO Box 15188  
Albany, NY 12212-5103
9. Annual recertification is required for the LIDP based on the date the plan was added to the customer's E-ZPass NY account.
10. More information can be found on the E-ZPass NY website ([e-zpassny.com](http://e-zpassny.com)) or questions may be directed to the NYCSC at 1-800-333-TOLL (8655).

Please indicate your application type by placing ✓

**New Application**
                         
  **Recertification**
                         
  **Appeal Application**

**SECTION 1 – ACCOUNT INFORMATION**

1. Account Holder: (Provide full legal name)	Last name	First Name	MI
2. Mailing Address:	Street name		Apt #
	City	State/Province	Zip Code/Postal Code
3. Telephone:	Day Phone	Mobile Phone	
4. Email Address:			

**SECTION 2 – LIDP ELIGIBLE VEHICLE(S) INFORMATION**

<i>License Plate Number (Sample)</i>								<i>State/Province</i>
<i>A</i>	<i>B</i>	<i>C</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>3</i>	<i>4</i>	<i>NY</i>
License Plate Number (Please Print Clearly)								State/Province

**SECTION 3 – PROOF OF VEHICLE OWNERSHIP**

Please submit with this application **A COPY OF YOUR VEHICLE REGISTRATION** for each vehicle listed above.

i. Only vehicles approved for the LIDP are permitted on your E-ZPass NY account with the LIDP.  
 ii. Any vehicle registered to another individual within your household only qualifies if the registration address matches the Account holder's address and the individual is listed as a spouse and/or dependent on your credentialing documents (See General Instructions & Requirements 6).

**SECTION 4 – PROOF OF ELIGIBILITY**

Applicants **MUST** submit at least one of the following proofs of eligibility: choose by placing ✓ and provide the required documents.

<input type="checkbox"/> <b>PROOF OF ENROLLMENT IN GOVERNMENT ASSISTANCE PROGRAM</b>  Please provide with this application your <b>ACCEPTANCE LETTER</b> in <b>ONE</b> of the following government assistance programs: ___ Supplemental Nutrition Assistance Program (SNAP). ___ The Temporary Assistance for Needy Families (TANF) program. ___ The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).  <i>Applicants who submitted proof of enrollment in one of the above government assistance programs are <b>NOT REQUIRED</b> to submit Proof of Income.</i>	<input type="checkbox"/> <b>PROOF OF INCOME</b>  Please provide with this application proof of income (Federal adjusted gross income equal to or less than \$50,000). Below is a list of the documents required to verify your income eligibility. Please submit copies of <b>ALL</b> the following documents: <ul style="list-style-type: none"> <li>• All pages of the most recent IRS Form 1040 (1040-SR, 1040-NR) or Tax Return Transcript and;</li> <li>• Corresponding W-2s</li> </ul> <i>The IRS form 1040 (1040-SR, 1040-NR) and W-2s <b>MUST</b> be for the same tax year. Redact social security numbers on income documents before submitting.</i>
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## SECTION 5 – CURRENT E-ZPASS ACCOUNT STATUS

To be eligible for the Low-Income Discount Plan, you must have an active E-ZPass NY account, and **ALL** vehicle(s) meet the requirements for the Low-Income Discount Plan to be added to the account (See General Instructions & Requirements 6). Do not submit this application without providing an active E-ZPass NY account number, or your application will be rejected.

If you already have an E-ZPass NY account but have multiple vehicles on the account, and one or more vehicles do not meet the requirements or you do not have an E-ZPass NY account, establish a new E-ZPass NY account for the vehicle eligible for the Low-Income Discount Plan.

To establish an E-ZPass NY account, we recommend applying online, or you can mail in an E-ZPass NY application. For more information on how to apply for an E-ZPass NY account, visit [www.e-zpassny.com](http://www.e-zpassny.com)

**Please provide your E-ZPass NY Account Number**

E-ZPass NY Account Number:

## SECTION 6 – ATTESTATION

By applying for the Low-Income Discount Plan, I certify that the vehicle(s) listed is associated with my household, and I understand that a household includes me, my spouse, and/or dependents. I understand that the Triborough Bridge and Tunnel Authority (TBTA) reserves the right to terminate any participant from the program who submits falsified documents or does not abide by program rules.

If supporting documentation provided as part of this Application does not suffice, I may be required to provide additional information or documentation to certify proof of eligibility for the Low-Income Discount Plan (LIDP).

The completion of this Application and signature below constitute my agreement to use E-ZPass NY subject to all applicable terms and conditions. Along with the Terms and Conditions included in this application, the E-ZPass Terms and Conditions will apply. I understand and agree that by using E-ZPass, applicable charges will be deducted from my E-ZPass account.

I hereby certify that I understand and accept the Terms and Conditions accompanying this Application and set forth in this form, all of which are part of my Low-Income Discount Plan application and, if accepted into the Low-Income Discount Plan, also become part of my E-ZPass NY Agreement.

**Authorized Signature (Account Holder):** \_\_\_\_\_  
(e-signature accepted)

**Date:** \_\_\_\_\_

## SECTION 7 – APPEAL PROCESS

If denied, the decision notice will inform the applicant of the reason(s) for the denial, their right to appeal, and the deadline for appealing. You may appeal by providing a written statement to the New York Customer Service Center (NYCSC) responding to the reason(s) for the denial, including any supporting documents, along with a re-completed Application, checking the Appeal Application box above (See General Instructions & Requirements 8).

## SECTION 8 – PRIVACY INFORMATION

The information provided will be kept strictly confidential and will not be disclosed to third parties without your consent except as required or permitted by law. The information will be used solely to determine your Low-Income Discount Plan eligibility. Incomplete applications will be rejected.

## **CBDTP LOW-INCOME DISCOUNT PLAN: TERMS AND CONDITIONS**

These Terms and Conditions, along with your Application for the Low-Income Discount from the Central Business District Tolling Program (“Application”), constitute the Low-Income Discount Agreement (“Agreement”). When you submit this Application, you agree to the following Terms and Conditions:

1. To maintain eligibility for the Low-Income Discount Plan, you must maintain a valid E-ZPass NY Account in good standing and resolve any unpaid toll violations you may owe to the Triborough Bridge and Tunnel Authority (TBTA). Instructions for resolving toll violations are available at [e-zpassny.com](http://e-zpassny.com).
2. The Low-Income Discount Plan provides eligible vehicle owners who qualify and register with TBTA for the Low-Income Discount Plan with a Central Business District (CBD), popularly named the Congestion Relief Zone (CRZ), peak period E-ZPass toll rate that is discounted from the CRZ passenger vehicle peak period E-ZPass toll rate after completing a certain number of eligible trips in a calendar month.
3. All E-ZPass NY Account Terms and Conditions and your E-ZPass NY Application, which together constitute your E-ZPass Agreement, fully apply to this Agreement and are incorporated herein by reference. All terms used herein carry the same definitions as those set forth in the E-ZPass NY Account Terms and Conditions (*visit [www.e-zpassny.com](http://www.e-zpassny.com) to review E-ZPass NY Application Terms and Conditions*).
4. By applying for the Low-Income Discount Plan, you are certifying that each vehicle listed on your Application will be used in the CRZ only by eligible household members listed on the credentialing documents.
5. Once the plan has been added to your E-ZPass NY account, you will be required to manage the addition and removal of vehicles on your account by contacting the Customer Service Center and providing documentation as appropriate. Eligible vehicle types for this plan include registered passenger vehicles (station wagons, sedans, sport utility vehicles, pickup trucks, and vans).
6. You acknowledge that your Application is subject to review and verification. Additional proof of eligibility for the Low-Income Discount Plan may be requested at any time.
7. You may only use the E-ZPass Tag on a vehicle that corresponds to the classification of Tag provided to you by E-ZPass NY.
8. Failure to comply with these Terms and Conditions or your E-ZPass Agreement may result in the removal of the Low-Income Discount Plan, revocation of your E-ZPass account(s), and/or penalties for violations as outlined in the E-ZPass Account Terms and Conditions.
9. Fraud or misuse in connection with the Low-Income Discount Plan is strictly prohibited and may result in the permanent termination and removal of your Low-Income Discount Plan, revocation of your E-ZPass account(s), and/or penalties for violations as outlined in the E-ZPass Account Terms and Conditions. Any person who, in connection with any eligibility process for or use of toll credits, discounts, or exemptions, knowingly makes a false statement or falsifies or permits to be falsified any record or records for the purpose of fraudulently obtaining a credit, discount, or exemption from a toll, may be subject to additional penalties.