



LUMMI ISLAND **NEEDS BASED** FERRY PUNCH
CARD PURCHASE ORDER FORM

FARES EFFECTIVE 6/1/24

Customer Information

Name: _____

Mailing Address: _____

City, State, Zip: _____

Daytime Telephone #: _____

Needs Based Passenger/PED punch cards (**Red**) (10 punch) _____ @ \$28/each = \$ _____

Needs Based Veh/Dr <11,001 punch cards (**Gold**) (10 punch) _____ @ \$56/each = \$ _____

Total amount enclosed: \$ _____

Mail this order form with your check issued to **Whatcom County Public Works to the address listed above.

****If you are not currently enrolled in the needs based program your check will be returned to you unprocessed.**

****All sales are final.**

****No refunds or exchanges will be given.**

Public Works Administration Use Only

PWA Receipt # _____ Check # _____ Date Processed _____