



# Application Form for a Disability-Related Concessionary Bus Pass

The text in this document is available in full at [www.gloucestershire.gov.uk/buspass](http://www.gloucestershire.gov.uk/buspass)

This Application Form is part of **Your Free Bus Travel Pack** and includes Guidance Notes and the 'proof of disability' (D1-D8) and 'companion' (C1) forms. If you need a copy of this pack or you require this document in an alternative format, or language, please contact us:

Visit [www.gloucestershire.gov.uk/buspass](http://www.gloucestershire.gov.uk/buspass) - for a printable version.

Email [concessionarybuspasses@gloucestershire.gov.uk](mailto:concessionarybuspasses@gloucestershire.gov.uk)

Call the concessionary bus pass helpline on 01452 426265

## Information about you

Please print in BLOCK CAPITALS using black ink. All fields marked with \* are mandatory

Title\* Mr  Mrs  Ms  Miss  Dr  Other (please specify) \_\_\_\_\_

First name\*

Other names

Surname\*

Telephone number

Gender \* Male  Female

Date of birth\*

Email address

Preferred contact method\* Telephone  email  Post

Please note that we can contact you quicker by telephone or email should we have any queries about your application or in the event you lose your bus pass and it is returned to us.

Full Postal Address\*

Postcode\*

Old bus pass number (if you have one) 633597\_\_\_\_\_

Please tick the reason or reasons you believe you are eligible for a disability-related concessionary bus pass

- Blind or partially sighted
- Profoundly or severely deaf
- Without speech
- Unable to walk or substantial difficulty in walking
- Without the use of both arms
- Learning disability
- Medically unfit to drive
- Other – please specify \_\_\_\_\_

For office use only:

Date processed

\_\_\_\_\_



## Proof of disability

You will need to provide **one** of the following proofs of disability. Please tick the disability proof you will be providing.

- A valid Blue Badge \*

Please write down your blue badge number as shown on the front left of your badge.

(Note, by completing this box you give us permission to validate your application against your records held on the Blue Badge database)

\* If your Blue Badge is due to expire within 3 months, it would support your application if you could provide one of the documents listed below.

If you do not have a valid blue badge number you can provide a document proof instead. Make sure you enclose the **original** document with this application form and that the document is **less than one year old**.

- War pensioner's mobility supplement award letter
- Letter awarding the **higher** rate mobility component of the Disability Living Allowance or Personal Independence Payment (PIP) with a score of at least 8 points on account of inability to walk, or to communicate orally without support.
- A letter from the Department of Transport stating that under Part III of the Road Traffic Act 1988 you have been refused or had your driving licence withdrawn pursuant to section 92 of that Act
- Certificate of Vision Impairment signed by a Consultant Ophthalmologist

## If you are unable to provide a proof of disability

If you are unable to provide one of the proofs of disability listed above you will need to provide **one** of the **forms D1 to D8**, which are included in *Your Free Bus Travel Pack*. The form must be completed and signed by your consultant or specialist. **Note that a letter or certificate from your doctor/GP will not be accepted as evidence.**

A D1 to D8 form is **only** required if you cannot provide one of the proofs of disability listed above

Please tick the form D1 to D8 you will be providing

- |   |  |
|---|--|
| D1 <input type="checkbox"/> Severe walking disability | D5 <input type="checkbox"/> Learning Disability                |
| D2 <input type="checkbox"/> Deaf                      | D6 <input type="checkbox"/> Unable to drive on medical grounds |
| D3 <input type="checkbox"/> Blind                     | D7 <input type="checkbox"/> Without arms                       |
| D4 <input type="checkbox"/> Partially Sighted         | D8 <input type="checkbox"/> Without speech                     |

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. For our privacy notice see [www.gloucestershire.gov.uk/privacynotices](http://www.gloucestershire.gov.uk/privacynotices)



## Proof of address

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You will need to provide **one** of the following documents as a proof of address. The document must be an original and less than one year old.

Please tick the **one** document type you will be providing as proof of address.

- |  |   |
|--|---|
| <input type="checkbox"/> Bank statement        | <input type="checkbox"/> Driving licence                            |
| <input type="checkbox"/> NHS medical card      | <input type="checkbox"/> Optical / medical prescription counterfoil |
| <input type="checkbox"/> Benefit book / letter | <input type="checkbox"/> Utility bill                               |
| <input type="checkbox"/> Council tax bill      |   |

## If you require a Companion Bus Pass

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If you are unable to travel alone due to your disability you may be eligible for a companion bus pass. This will allow you to be accompanied by any person over 16 years of age, free of charge. To qualify for this you need to ask your doctor to complete the **C1** form - **Application for Concessionary Companion Pass**. Eligibility for a companion pass is considered in terms of the severity of disability and **not** the applicant's age.

Your C1 form must be provided **in addition** to your proof of disability.

- I wish to apply for a Companion Bus Pass and have enclosed a C1 form.

## Declaration

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I declare that I am eligible to apply for a disability related concessionary bus pass and that the address I have given is my sole or principal residence and is within the county of Gloucestershire. If approved, I will abide by Gloucestershire County Council's conditions of use and understand they may be changed from time to time.

I agree that if I have applied for and receive tokens or vouchers under a scheme run by the district council, I have waived my rights to apply for a concessionary bus pass for the year for which the tokens or voucher apply.

I accept that Gloucestershire County Council will use the information I have provided to make enquiries necessary to verify entitlement and detect fraud. This may include sharing this information with other organisations that audit or administer public funds.

I accept that my records, including proof of eligibility, will be retained securely by computer database for the purposes of administering the Gloucestershire County Council Concessionary Bus Pass Scheme and to meet statutory obligations.

I confirm that I will return my concessionary bus pass if I move away permanently from the county of Gloucestershire.

By signing this form I confirm that the details provided within it are correct.

**Signature**

**Print your name**

**Date**

Fix your photograph here

Please do not staple



## Colour photo of yourself

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If you are applying by post, you must enclose a recent, colour, passport-sized photograph. Please fix the photograph to the space on the other side of this page.

If you intend to apply at a library, you do **not** need to enclose a photograph. A member of staff at the Library can take your photograph for you. **Please note that you cannot apply by post if have your photograph taken at a library.**

## How to submit the form

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There are two ways to submit your application form.

1. Post this form along with the items needed to support your application to:

Concessionary Bus Pass Team  
 Adult Social Care Support Services  
 Gloucestershire County Council  
 Block 1, 1st Floor  
 Shire Hall  
 Westgate Street  
 Gloucestershire  
 GL1 2TP

We recommend you send your application and supporting evidence by recorded delivery post if they are either valuable or difficult to replace. Any documents you provide will be posted back to you as soon as your application has been processed.

2. Submit your application at any of the Gloucestershire Libraries listed below.

Please make an appointment by calling 01452 426265 at a time when the library will be open. You will be put through to the library of your choice from the following list.

<p><b>Cheltenham Borough</b>                      Cheltenham                      Charlton Kings                      Hesters Way                      Prestbury                      Up Hatherley</p>	<p><b>Cotswold</b>                      Cirencester                      Chipping Campden                      Fairford                      Stow-on-the-Wold                      Tetbury</p>	<p><b>Gloucester City</b>                      Gloucester                      Hucclecote                      Longlevens                      Matson                      Quedgeley                      Tuffley</p>
<p><b>Forest of Dean</b>                      Coleford                      Cinderford                      Lydney                      Newent</p>	<p><b>Stroud</b>                      Stroud                      Dursley                      Nailsworth                      Stonehouse</p>	<p><b>Tewkesbury Borough</b>                      Tewkesbury                      Churchdown                      Bishop's Cleeve                      Winchcombe</p>

You will need to take this completed form, your proof of address and proof of disability with you and give them to a member of staff who will process your application. Library staff can also take your photograph.

If you are eligible and have provided all necessary evidence, your pass should arrive at your home address by post in 7 to 10 working days.