

## **Guidance Notes for completing the application form**

**The application form for a Blue Badge reflects all criteria under which people may qualify for a badge. These notes are intended to assist you to complete the form.**

**Please complete all relevant sections of the application form and supply the appropriate documents to confirm your address, identity and evidence of eligibility.**

**The local authority may refuse to issue a badge if you do not provide adequate evidence that you meet the eligibility criteria.**

<b>Section 1 – Information about the Applicant</b>		
1.1	<b>Personal Details</b>  This asks you for personal details including name, date of birth, address, telephone number and e-mail address (if you have one), of the adult or child requiring a badge. You do not have to be a car driver to qualify for a Blue Badge.	If you are completing the form on behalf of a child who is less than 16 years of age or an individual who is unable to complete the form independently, please complete all sections as if you were that person and you may also sign the mandatory declarations on their behalf.  National Insurance numbers start with two letters followed by six numbers and another letter (in the format <b>XX999999X</b> ).  Child Benefit Numbers are issued to people under the age of 16.
1.2	<b>Information about your current Blue Badge</b> (if you have one)	If you are re-applying for a Blue Badge, previously issued by another Local Authority or you have previously had a Blue Badge under the automatic eligibility criteria for which you no longer qualify (see section 2), then you will need to complete this section.  For badges previously issued by Gloucestershire, a re-application reminder will be sent to you approx. 3 months before expiry of your badge.  If you have lost your badge or it has faded then please apply for replacement online or contact us on 01242 532302.

1.3	<p><b>Proof of Address</b></p> <p>Of Adult or Child requiring a badge.</p> <p><u>We cannot process your application without this information.</u></p>	<p>We need to check that you are a resident in this local authority area before we can process your application. Please select one of the options and send a <u>photocopy</u> of the document (dated within the last twelve months) with your completed form.</p> <p>Please do not send originals.</p>
1.4	<p><b>Proof of Your Identity</b></p> <p>Of Adult or Child requiring a badge.</p> <p><u>We cannot process your application without this information.</u></p>	<p>We need to check your identity to reduce the potential for fraudulent applications for a Blue Badge.</p> <p>Please tick to indicate what proof you are providing. Please send <u>photocopies</u> of the document with your completed form.</p> <p>Please do not send originals.</p>
1.5	<p><b>Photograph</b></p> <p>The photograph will be placed on the reverse side of the badge and will not be visible when the badge is being displayed in the vehicle.</p> <p><u>We cannot process your application without receiving a photograph.</u></p>	<p>You will need to provide <b>one</b> photograph which needs to be in <b>colour</b> and should be taken <b>within the last month</b> or at least within the last year. It must be of your <b>head and shoulders</b> and of <b>you facing forward and looking straight at the camera</b> so that you can be easily identified.</p> <p>It must be taken with <b>your eyes open and clearly visible</b> (no sunglasses or tinted glasses) and be free from reflection or glare on your glasses. Please write your name on the back of the photograph.</p> <p><u>If you cannot provide a photograph and are terminally ill, we may be able to process your application without one.</u></p>
1.6	<p><b>Badge Issue Fee</b></p> <p>There is currently an administration fee of £10.00 per Blue Badge application.</p> <p><u>We cannot process your application without receiving the administration fee.</u></p>	<p>Please enclose a cheque or postal order for <b>£10.00</b>. The fee should be made payable to <b>Gloucestershire County Council</b>.</p> <p>Your cheque will be returned to you if your application is unsuccessful. Please do not send cash through the post.</p> <p><b>You will only be issued with a Blue Badge once payment has been received.</b></p>

## Section 2 – Questions for Automatic Qualifications ‘without further assessment’ applicants

To be eligible for automatic qualification you need to meet one of the requirements below and evidence must be provided. Please tick whichever applies.

Please note if any of the awards below have been issued for a date less than 3 years in the future your badge will expire on that date.

<b>Are you registered as Severely Sight Impaired or Blind?</b>	<p>If you are registered with a Local Authority please state the name of the Local Authority you are registered with.</p> <p>If you are not registered with a Local Authority, please send us a photocopy of your CVI (Certificate of Visual Impairment) or other evidence showing that you are registered severely sight impaired.</p>
<b>Do you receive Higher Rate Mobility Component of Disability Living Allowance (DLA)? (Please note - Attendance Allowance does not apply).</b>	<p>Please send us a photocopy (dated in the last 12 months) of the official DWP letter confirming that you receive the allowance and the duration of the award - all pages of the award letter must be included.</p>
<b>Do you receive 8 points or more in the 'Moving Around' part of the mobility component of Personal Independence Payment (PIP)?</b>	<p>If you have lost your award letter, you can contact the DWP to obtain a new copy:</p> <ul style="list-style-type: none"> <li>• DLA: <b>0800 1214600</b></li> <li>• PIP: <b>0800 1214433</b></li> <li>• Textphone: <b>0800 1214600</b></li> </ul>
<b>Do you receive the specific points descriptor Descriptor E (10 points) – “You cannot undertake any journey because it would cause overwhelming psychological distress” in the ‘Planning and Following a Journey’ part of the mobility component of Personal Independence Payment (PIP).</b>	<p>These enquiry lines are open from 8am to 6pm on weekdays, and further details can be found online at:</p> <p><a href="https://www.gov.uk/browse/benefits/disability">https://www.gov.uk/browse/benefits/disability</a></p> <p>Badges are issued for a maximum of three years. If your DLA/PIP award expiry date is less than three years, we will issue your Blue Badge until the same expiry date.</p> <p><b><u>If you do not send in proof of your award we will not be able to process your application.</u></b></p>
<b>People who receive the War Pensioners' Mobility Supplement (WPMS)/Armed Forces Compensation Scheme (AFCS)</b>	<p>You should enclose an award letter from the Service Personnel and Veterans Agency confirming this award.</p> <p>If you have lost this letter, then the agency can be contacted to obtain a new copy on</p>

	<p><b>0800 169 2277.</b></p> <p><b><u>If you are in receipt of the WPMS or AFCS, you must enclose an original letter of entitlement for this benefit.</u></b></p>	
<b>Do you have a DS 1500 or SR1 issued by your Doctor or Healthcare Professional?</b>	Please send us a photocopy of the DS 1500 or SR 1.	
<b>Section 3 – Questions for “subject to further assessment” - People who are unable to walk or who find walking very difficult based on “physical” disabilities</b>		
<b>For Non-Visible (Hidden) disabilities go to Section 5.</b>		
<p>These questions are intended for people who have answered <b>NO</b> to all of the questions in Section 2 and are applying as an individual. Please note that applicants will only qualify for a Blue Badge if they are over 2 years of age and:</p> <ul style="list-style-type: none"> <li>• have an enduring and substantial disability which means they are unable to walk;</li> <li>• have an enduring and substantial disability which means, during the course of a journey they experience very considerable difficulty whilst walking.</li> <li>• have a severe disability affecting both arms, drives regularly and cannot use or finds it hard to use parking meters;</li> </ul>		
<p>An enduring disability is one that is likely to last for a minimum period of 3 years.</p>		
3.1	<b>Please describe any health conditions or disabilities which affect your walking.</b>	Applicants should describe the nature of their health conditions/disability. For example, arthritis, falls, severe epilepsy, motor neuron disease, etc.  Please provide as much detail as possible.
	<b>How does your health condition/disability you have described affect your ability to walk?</b>	For each health condition/disability, the applicant should describe how that condition/disability affects them when walking.  Please provide as much detail as possible.
	<b>Describe where you can walk from and to.</b>	Provide the place names or house numbers i.e. from home to tesco (location).

	<b>How long does it take.</b>	<p>State how long it takes you to walk from and to the place named. Street Names, Numbers and Post Codes should be provided.</p> <p>If you need to take breaks, state that you need to take a break or the number of breaks you need to take.</p> <p>If you need to use a walking aid to walk from and to the place named, state which walking aids you use.</p>
	<b>Excessive pain</b>	Applicants should answer 'Yes' or 'No' to each of the following questions relating by ticking the relevant box.
	<b>Breathlessness</b>	Applicants should answer 'Yes' or 'No' to each of the following questions relating by ticking the relevant box. Applicants can add additional information into the text box if required.
	<b>Balance/ Co-ordination</b>	Applicants should answer 'Yes' or 'No' to each of the following questions relating by ticking the relevant box. Applicants should describe any difficulties with balance or co-ordination when walking in the text box.

3.2	<b>People with a severe disability in both arms</b>	<p>This section is for drivers with a severe disability affecting both arms. You should be the driver in the car, and satisfy all four conditions in order to qualify for a badge. We may make arrangements to meet applicants to check eligibility.</p> <p>The Blue Badge will only be issued to a driver who has a severe disability in both arms and not to someone who uses the car as a passenger.</p>
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#### **Section 4 – Applying for a child under the age of three years old**

These questions are intended for the parents/guardian of children under the age of three years old who may be eligible for a Blue Badge because:

- They have a condition requiring the transportation of medical equipment at all times
- They must always be kept near a motor vehicle so that they can, if necessary, be treated for that condition in the vehicle or taken quickly in the vehicle to a place where they can be so treated.

4.1	<b>If you are applying for a child under the age of three years old</b> <p>This section needs to be completed if you are applying for a Blue Badge for a child who is under three years of age.</p> <p><u>A parent or guardian must apply on behalf of a child under the age of three years.</u></p>	<p>In order to qualify for a Blue Badge, the child needs to have a condition which means that they are always accompanied by bulky medical equipment or need immediate access to a vehicle, either for treatment or for transportation to a location where treatment can be performed.</p> <p>A badge will be issued if medical equipment (please list the equipment) is always needed and cannot be carried without great difficulty.</p> <p>Examples of highly unstable medical conditions that mean children may need quick access to transport to hospital or home include:</p> <ul style="list-style-type: none"> <li>• Tracheotomies</li> <li>• Severe epilepsy/seizures</li> <li>• Highly unstable diabetes</li> <li>• Terminal illnesses that prevent children from spending any more than brief moments outside and may need a quick route home</li> </ul> <p>An additional letter from a consultant, doctor or other medical professional detailing the child's conditions, medical equipment and/or current treatments may be helpful.</p>
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## **Section 5 - Questions for “subject to further assessment” applicants in respect of “non-visible” disabilities**

These questions are intended for people who have answered **NO** to all of the questions in Section 2, are not covered in Sections 3 and 4 and are applying as an individual. Please note that applicants will only qualify for a Blue Badge if they:

- over two years of age and experience any non-visible disabilities (such as very considerable psychological distress) which cause you very considerable difficulty whilst walking as part of a journey.
- are over two years of age and when walking as part of a journey pose a risk of serious harm to yourself or others.

Please provide as much detail as you can about the nature of the difficulty you experience whilst walking as part of a journey, and any measures or coping strategies you use to help manage that difficulty. Travelling with another person – such as a parent/guardian/carer/personal assistant – is an example of a form of coping strategy.

## **Section 6 – Treatments, medication and associated professionals**

Treatments	<p>Please provide evidence of the treatments that you have undergone.</p> <p>Evidence can include the following:-</p> <ul style="list-style-type: none"><li>• Letter of diagnosis.</li><li>• Confirmation of on-going treatments/clinic attendances, or referral for such.</li><li>• Evidence of prescribed medication relevant to the disability/symptoms.</li><li>• Evidence of specialist consultations, or referral for such.</li><li>• Education, Health and Care Plans (EHCP), which may provide insight into the needs, experiences and coping strategies devised.</li><li>• Care Plans from Social Care Teams.</li><li>• Patient summary or summary care records.</li><li>• Evidence of other benefits received by the applicant.</li><li>• Letters from professionals involved in the care of the applicant.</li></ul>
Medication	<p>Please list all the medication you currently take and who prescribed it. If you take other medicine which is not prescribed (e.g. paracetamol from a chemist) please also include this.</p> <p>Please provide a copy of your prescription(s).</p>

Professionals involved in your care	<p>Please list all professionals or specialists involved with your care.</p> <ul style="list-style-type: none"> <li>• Examples of professionals include:-</li> <li>• Consultants</li> <li>• Teachers</li> <li>• Therapists</li> <li>• Neurologists</li> <li>• Psychologists</li> <li>• Psychiatrists</li> </ul> <p>Please also include details of your GP.</p>
<b>Further Information</b>	<p>Please let us know if you have had any alterations made to your home. For example; hand rails, a walk-in shower, ramped access to doors and rails for outside paths.</p> <p>Please let us know if you receive any help in your home. For example; meals delivered, help with getting dressed or washed, help with your shopping. This assistance may come from a care agency or a friend, neighbour or family member may help you to do these things – if so please let us know.</p> <p>Please also add anything that you may feel helps us to understand more about your disability and medical condition(s) and how it affects your ability to get around.</p>

## **Section 7 – Next of Kin Details, Declarations and Signatures**

These questions are intended to be answered by all applicants for a Blue Badge

7.1	<p><b>Next of Kin Details and Returning a Blue Badge</b></p> <p>All badges that are not needed or have expired should be returned to the <b>Blue Badge Team</b>.</p>	<p>We need to know the contact details of a nominated person who would be responsible for the return of the Blue Badge (other than yourself) if it was no longer needed.</p>
7.2	<p><b>Mandatory declarations about the information you have provided, your consent to share and the application process.</b></p>	<p><b>Please read the declarations carefully.</b> By ticking the appropriate boxes and signing your signature in the designated box you are indicating that you have read, understood and agree with each declaration stated.</p> <p>If you do not put your signature in the box, it will mean we are unable to issue you with a Blue Badge, and will return your application to be signed and returned.</p>
	<p><b>Your signature against the declarations</b></p>	<p>Please sign in the designated box to show that you have read and understood the declarations.</p>

		If you are completing the application form on behalf of a child who is less than 16 years of age or an individual who is unable to complete the form independently, you are able to sign the form yourself.
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**Please ensure you have enclosed all of the relevant documents for the sections of this application form that you have completed which are relevant to you.**

**We have provided a checklist below to remind you of what you will need to enclose in addition to your completed application form:**

**If you do not provide this information this may delay the processing of your application.**

<b>Section 1.3 – Proof of Address</b> One document as proof of your address, dated within the last <u>12 months</u> (photocopy of an original)	
<b>Section 1.4 – Proof of Your Identity</b> One document as proof of your identity (photocopy of an original)	
<b>Section 1.5 – Photograph</b> One recent <u>passport-sized colour photograph</u> of yourself	
<b>Section 1.6 – Badge Issue Fee</b> Cheque or postal order for £10.00 (made payable to <i>Gloucestershire County Council</i> ).	
<b>Section 2.1 - People who are registered severely sight impaired or blind</b> <u>A photocopy</u> of your CVI (Certificate of Visual Impairment)	
<b>Section 2.2 – People who receive the Higher Rate Mobility Component of Disability Living Allowance (DLA) or 8 points or more under the “Moving Around” part of Personal Independent Payment (PIP) or Descriptor E (10 Points) – Cannot undertake any journey because it would cause severe psychological distress under the “Planning and Following a Journey” part of Personal Independent Payment (PIP)</b> <u>A photocopy</u> award letter of entitlement for DLA or PIP from the Department for Work and Pensions (DWP) dated within the last <u>12 months</u>	
<b>Section 2.3 – People who receive the War Pensioner’s Mobility Supplement (WPMS)/Armed Forces Compensation Scheme (AFCS)</b> <u>A photocopy</u> award letter of entitlement for the War Pensioner’s Mobility Supplement (WPMS)/Armed Forces Compensation Scheme (AFCS) issued within the last <u>12 months</u>	
<b>Do you have a DS 1500 or SR1 issued by your Doctor or Healthcare Professional?</b>  <b>Please send us a photocopy of the DS 1500 or SR 1.</b>	
<b>Section 6 - Treatments, medication and associated professionals</b> Photocopies of any letters/documents relating to treatments, medication and associated professionals as described under Section 6 above.	

<p><b>Please return completed application forms along with your proofs of address and identity documents, photograph and fee to:</b></p>	<p>Address: <b>Blue Badge Team</b>  <b>Gloucestershire County Council</b>  <b>4<sup>th</sup> Floor, Block 4</b>  <b>Shire Hall</b>  <b>Westgate Street</b>  <b>Gloucester</b>  <b>GL1 2TG</b></p>
<p><b>You can contact the Blue Badge Team using these methods:</b></p>	<p>Phone: <b>(01242) 532302</b>  Email: <a href="mailto:bluebadge@gloucestershire.gov.uk">bluebadge@gloucestershire.gov.uk</a>  Web: <a href="http://www.goucestershire.gov.uk/bluebadge">www.goucestershire.gov.uk/bluebadge</a></p>

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 those bodies responsible for auditing or administering public funds for these purposes.

For our Privacy Notice see [www.goucestershire.gov.uk/privacynotices](http://www.goucestershire.gov.uk/privacynotices)