



Category D3 & D4 – blind or partially sighted

A person is eligible for a concessionary bus pass if they are blind (severely sight impaired) or partially sighted (sight impaired).

Blind - In general terms a person can be registered as blind, or severely sight impaired, if they cannot see (with glasses, if worn) the top letter of the eye test chart (used by doctors and opticians) at a distance of 3 metres or less. Some people who can read the top letter of an eye test chart at 3 metres, but not at 6 metres, may still be eligible for registration as blind if their field of vision is also severely restricted.

Partially sighted - A person can be registered as partially sighted, or sight impaired, if they have a full field of vision but can only read the top letter of the eye test chart at a distance of 6 metres or less (with glasses, if worn). However, if they can read the next three lines down at the same distance, but the field of vision is either moderately or severely restricted, they may still qualify for registration.

You will be eligible if;

- you are registered, or entitled to be registered, as blind or severely sight impaired, or
- you are registered, or entitled to be registered, as partially sighted or sight impaired.

You will **not** be eligible if;

- you are not entitled to be registered

N.B. you may still qualify if your vision is so impaired that you would be refused a driving licence due to unable to read a registration plate in good light at 20.5 metres with lenses if worn. See the information sheet for 'Category D6' for more details.

Proving that you are eligible



we can accept
this evidence

- Certificate of Visual Impairment (CVI) completed by an ophthalmologist.
- Evidence of registration with the local authority as being severely sight impaired (blind) or sight impaired (partially sighted - e.g. registration card).
- For a veteran, the 'Reasons for Decision' letter under the Armed Forces Compensation Scheme (AFCS).
- A signed D3 (blind) or D4 (partially sighted) form provided by Gloucestershire County Council (available from 01452 426265 or the GCC website - www.gloucestershire.gov.uk/transport), which needs to be signed by a doctor or consultant.



we cannot accept
this evidence

- Standard eye test, or report, from an optician
- NHS appointment letter

If you cannot provide one of the above pieces of acceptable evidence, then please call the Concessionary Travel Team on 01452 426265 to discuss your application or renewal.

Your doctor is not obligated to fill in your evidence form. If your doctor does agree to complete the form you may have to pay, and a completed form does not guarantee you a bus pass. We do not deal with doctors directly and we cannot accept doctor's letter.

**Form D3
& D4**

Blind or Partially Sighted Disability Evidence Form

1. To be filled in by applicant

Declaration of authority. I authorise the consultant / doctor (shown below) to disclose to Gloucestershire County Council the information requested in this form. (Please PRINT Details)

Name		Date of birth	
Address		Telephone no.	
		Email	
Postcode			
Signed		Date	

2 To be filled in by consultant / doctor

Dear Consultant or Doctor,

The person mentioned below has applied to us for a travel concession on the basis of being blind or partially sighted.

The Transport Act 2000 defines Blind as "having a high degree of vision loss i.e. seeing much less than is normal or perhaps nothing at all" or Partially Sighted defined as "a person who can see more than someone who is blind, but less than a fully sighted person". This is clarified in more detail as set out in the options below.

Please tick the box(es) that apply to this person.

	They cannot see (with glasses, if worn) the top letter of the eye test chart (used by doctors and opticians) at a distance of 3 metres or less.
	They can read the top letter of an eye test chart at 3 metres, but not at 6 metres and their field is also severely restricted.
	They have a full field of vision but can only read the top letter of the eye test chart (used by doctors and opticians) at a distance of 6 metres or less (with glasses, if worn).
	They can read the top 4 lines of an eye test chart at 6 metres, but their field of vision is moderately or severely restricted.

	I am unable to confirm that any of the above options apply to this person.
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3 Declaration (To be filled in by consultant / doctor)

By submitting this form, I confirm that all the information is true and accurate.

Name		OFFICIAL CLINIC/HOSPITAL STAMP
Position		
Address		
GMC No		
Tel		
Signed		
Date		

(On completion, please return the form to the applicant.)

Once completed, the applicant should submit this evidence form, along with the completed concessionary bus pass application or renewal form by post to:

Concessionary Bus Pass Team
Integrated Transport Team
Gloucestershire County Council
Shire Hall
Westgate Street
Gloucester
GL1 2TH

Telephone enquiries: (01452) 426265
Monday to Friday 9am – 4.30pm

Email enquiries
conbuspasses@gloucestershire.gov.uk

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