

Salford City Council

Application form for a disabled person's parking badge



Please use this form if you are applying for a Blue Badge for the first time, or if you need to renew your existing badge which is due to expire.

Do not use this application form if your blue badge has been lost or stolen. Please contact 0161 793 2259 for information regarding procedures for lost and stolen badges. You must report any lost or stolen badge to the police. A police crime reference number is required as part of replacing a lost or stolen blue badge.

Please review the checklist to ensure you have completed all relevant parts of the form and enclosed supporting documentation before returning to:

Salford City Council
Blue Badge Officer
Unity House
Chorley Road
Swinton
M27 5AW

Notes to assist you with the completion of this application form

- Please read all of the notes on pages 18 to 21 before you answer the questions.
- We need to see proof of some things you tell us about. We have put this sign where you need to send us proof.

Proof needed ✓

- Use blue or black ink, do not use pencil.
- Please write clearly in CAPITAL LETTERS.
- If you make a mistake, cross it out and put the correct answer next to it.
- Do not use correction fluid.
- Please fill in all the details we ask for or your application will be delayed.
- Allow thirty (30) working days for processing applications.

SECTION A	YOUR DETAILS
	If you completing this form on behalf of the applicant please provide their details and complete the representative's or guardian's declaration at the end of this form.

Title: Mr/Mrs/Miss/Ms/Other: Gender: Male Female

First names (in full):

Last name:

Address:

Postcode:

Date of birth: dd/mm/yyyy / / Age:

National Insurance number:

2 letters 6 numbers 1 letter

Daytime phone number(s): Home

Work

Mobile

Proof needed ✓	You will be required to provide documentation to confirm your residency and identity, this is outlined in Section D.
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Previous address (if you have moved within the last three (3) years):

Address:

Postcode:

This is a first application

This is a renewal

My last badge expires

For Blue Badge renewals only:

What is the serial number?

When does your Blue Badge Expire?

Was it issued by Salford or another council?

For office use only

DLA details

Rec

Team receipt Number

Badge number

Officer signature

Expiry date

General Practitioner (GP) details:

GP's name: _____

Practice name: _____

Address: _____

_____ Postcode: _____

Daytime phone number(s): _____

Approximate date last seen: _____

Are you also seeing a Health professional or Consultant? If so:

Name: _____

Role: _____

e.g. heart specialist, oncologist, physiotherapist, social worker, audiologist, psychiatrist, psychologist

Address: _____

_____ Postcode: _____

Daytime phone number(s): _____

Approximate date last seen: _____

CONSENT TO SHARING INFORMATION

Do you agree with the following statement?

"I confirm that the local authority may contact my GP and accredited health professionals if necessary, for the purpose of obtaining information to support my application."

Yes No

Please print your name in full

Client's Signature

Date

Representative or Guardians
Signature

Date

If you do not consent to sharing information we will make a decision on your application based on the information provided.

Although information from health professionals is considered, the final decision about whether to issue you with a Blue Badge is made by the council. The decision is based on your mobility difficulties and not on medical diagnosis. You may need to attend an interview with an independent assessor.

Please tick the box if you are willing to have a medical assessment in support of your application.

SECTION B	AUTOMATIC ELIGIBILITY
	If you answer ' Yes ' to any of the questions in this section you <u>may</u> be automatically eligible to a Blue Badge.

Q1: Do you receive the higher rate mobility component of the disability living allowance (HRMCDLA)? Yes No

If '**Yes**' is the award indefinite? Yes No

Proof needed ✓	If you have answered ' Yes ' to having HRMCDLA you will need to provide one (1) of the following: <input type="checkbox"/> A copy of your award notice letter, issued within the last six (6) months. The letter must state the award period. (If you do not have an award letter please call the Disability Living Allowance helpline on 0845 7123 456). <input type="checkbox"/> A copy of your indefinite HRMCDLA award certificate.
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Q2: Are you registered or certified as blind (severely sight impaired)? Yes No

If '**Yes**' is the registration with Salford? Yes No

Proof needed ✓	If you have answered ' Yes ' to being registered blind you must provide: <input type="checkbox"/> A copy of your ophthalmologist's CVI or BD8 report
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Q3: Do you receive a War Pensioner's Mobility Supplement? Yes No

Proof needed ✓	If ' Yes ' you must provide: <input type="checkbox"/> A copy of your award letter.
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If you answered '**Yes**' to any questions in **Section B** got to **Section D**.

If you answered '**No**' to all questions in **Section B** please go to **Section C**.

SECTION C	ELIGIBILITY SUBJECT TO FURTHER ASSESSMENT
	If you answered 'No' to all questions in Section B you <u>may</u> qualify for a Blue Badge under one of the following assessment categories. You need only complete the question(s) relevant to your circumstances.

1. People with severe disability in both arms.

Badges may be issued to a person who 'drives a vehicle regularly, has a severe disability in both arms, and is unable to operate, or has considerable difficulty in operating, all or some types of parking meter'.

Do you travel in a motor vehicle regularly solely as a passenger? Yes No

Do you have a severe disability in both arms? Yes No

Do you drive regularly? Yes No

Are you unable to operate, or have considerable difficulty operating, all or some types of parking meter? Yes No

Please describe your medical condition.

Do you have a specially adapted vehicle? Yes No

If 'Yes' please describe how the vehicle has been adapted for you.

If you use your vehicle for shopping, please describe how you manage to do your shopping.

Proof needed ✓

To qualify under this category you must provide a letter from your GP or Health Professional verifying your medical condition **and** if you have an adapted vehicle you must provide a copy of the insurance details verifying this.

2. People with severe walking difficulties.

Badges may be issued to a person who 'is unable to walk or has very considerable difficulty in walking because of a permanent and substantial disability', or 'the exertion to walk would constitute a danger to their life or would likely lead to serious deterioration in their health'.

Your medical conditions.

List your medical conditions and/or disabilities in relation to your mobility and when did they start?

Your difficulties in walking.

Please describe your difficulty in walking?

Have attended a consultant/therapist **over the past year** in relation to your medical condition/disability?

Yes No

If you have answered 'Yes' please give details of any appointments.

Appointment dates	Hospital/Consulting Office	Name of Doctor/Consultant
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Please give details of any medication and dosage of each (continue on a separate sheet if necessary).

Medicine prescribed/currently taking (please provide copies of your most recent prescriptions).	Dosage (e.g. 1 tablet to be taken 3 times a day)

Are you on oxygen therapy at the present time? Yes No

If you require using oxygen therapy, how long do you require it for?

Number of times a day: Number of hours:

Do you use a wheelchair to help you get around?	Indoors?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Outdoors?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Both?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Please tell us how long ago your walking difficulty started.

Less than 12 months	<input type="checkbox"/>
12 to 18 months	<input type="checkbox"/>
18 months and 3 years	<input type="checkbox"/>
Over 3 years	<input type="checkbox"/>

On average, how many minutes could you walk before you need to stop for a rest?

If you have severe difficulty walking, is this because your disability is?

Permanent and substantial	<input type="checkbox"/>
Permanent but not substantial	<input type="checkbox"/>
Substantial but temporary	<input type="checkbox"/>

Please explain how your medical condition severely restricts your ability to walk.

If your mobility restriction is substantial but temporary, how long will the condition last?

Less than 12 months	<input type="checkbox"/>
Between 12 and 18 months	<input type="checkbox"/>
Between 18 months and 3 years	<input type="checkbox"/>
More than 3 years	<input type="checkbox"/>
I don't know	<input type="checkbox"/>

Whilst walking, do you often:
(Please tick as many boxes
as applicable).

- Stop to rest
- Get help from someone else
- Use a walking aid
- Get severe pain

Please answer 'Yes' or 'No' to the following questions.

- Are you troubled by shortness of breath when hurrying on level ground? Yes No
- Do you get short of breath walking with other people of your own age on level ground? Yes No
- Do you have to stop for breath when walking at your own pace on level ground? Yes No
- Do you get too breathless to leave home, or do you get breathless after dressing? Yes No

If you suffer from severe pain whilst walking, is this pain: Constant
Intermittent (it comes and goes)

On a scale of 0 (no pain) to 10 (most severe pain), how severe would you describe your pain whilst walking:

0 1 2 3 4 5 6 7 8 9 10
(No pain) (Extreme pain)

Which of these walking aids help you get around? Walking frame Artificial limb(s)
Crutches Walking stick
None of these Other (please state)

Please tick the box that best describes the way you walk. Normal (without difficulty) Reasonable
Difficult Poor

What is the maximum distance and how quickly can you walk without getting severe pain or discomfort?

Less than 50 metres	Normal speed	Moderate speed	Slowly	Very slowly
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Between 50 to 100 metres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More than 100 metres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How long, on average does it take you to walk this distance? Minutes

When you have completed this section go directly to Section F

3. Children under two years of age.

Are you applying on behalf of a child under two (2) years of age who:

either has a 'condition that requires that they be always accompanied by bulky medical equipment which cannot be carried around with the child without great difficulty'.

Yes No

If '**Yes**', what type of equipment is required?

and/or has a 'condition that requires that 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'.

Yes No

If '**Yes**' please describe the child's medical condition and the need for immediate treatment.

Proof needed ✓

To qualify under this category you enclose a letter from your GP or Health Professional verifying the above details.

Please go to **Section D**

SECTION D**RESIDENCY & IDENTITY DOCUMENTATION**

You must provide us with the following documentation, if you do not your application will be delayed while we return it to you.

1. Proof of residence in Salford.

Proof needed ✓

Please provide a **photocopy** of any two (2) of the following documents to confirm your name and address, one (1) of which must be dated within the last three (3) months (please tick). If you are applying on behalf of a child under two (2) years of age refer to guidance notes.

- Council tax bill
- DWP letter of benefits or pension entitlement
- Utility bill e.g. gas, electricity, land line phone, water
- Bank statement
- Rent book
- Tenancy agreement or contents insurance agreement
- Letter confirming you are on the electoral role
- Domiciliary care bill

2. Proof of your identity.

Proof needed ✓

Please provide a **photocopy** of one (1) of the following documents (please tick).

- Driving licence photo card or paper copy
- Passport photo page (current or expired)
- Birth certificate
- Marriage certificate
- Asylum seekers registration card or standard acknowledgement letter

3. Passport sized photographs.

Proof needed ✓

Please provide two (2) recent passport sized colour photographs. You must print your name and sign the reverse side of both photographs (please tick). If you are applying on behalf of someone else, ensure you sign for them and complete the representative or guardian declaration.

SECTION E	DATA PROTECTION NOTICE
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We will deal with the personal information you provide in line with the Data Protection Act 1998. We will use the information to assess whether you qualify for a disabled person's parking badge and manage our services. We will not use your information for any other purpose.

We may use the information that you have provided to prevent or detect fraud. We may also share the information you have provided with other sections in the council and with agencies such as the police or parking services.

We cannot discuss your application or personal details with anyone unless you give us permission to do so. If a representative or guardian has completed this form on your behalf we may discuss your application with them.

SECTION F	DECLARATION
	This section <u>must</u> be completed by the applicant or their representative or guardian.

1. I declare that to the best of my knowledge all the information I have provide is correct. I confirm that the photographs submitted are a true likeness of my current appearance. I understand that the council can take action against me if I provide false documentation.
2. I agree that if you issue me a Blue Badge it will only be displayed in a vehicle in which I am travelling. I will return it when I no longer need it, it expires or I collect a new badge upon successful renewal.
3. I will not misuse the Blue Badge by altering it, copying it, using it once it has expired or by allowing others to use it. I understand that misuse can result in the Blue Badge being withdrawn and a fine imposed upon conviction.
4. I understand that you will deal with all documents relating to this application in line with the Data Protection Act 1998, and you may share them with other agencies and the police to detect and prevent fraud.

Your signature, or your representative's or guardian's signature	
Date	

REPRESENTATIVE OR GUARDIAN

If a representative or guardian is completing this form they should print and sign their name below:

Name	
Signature	
Date	

Address

Your relationship to the applicant

Daytime phone number(s): Home

Work

Mobile

CHECKLIST

Please complete appropriate sections and enclose relevant documents.

Completed:

- Section A including consent to share information
- Section B or
- Section C if required
- Section D

Enclosures:

- Eligibility documentation from Section B or C
- Proof of residence
- Proof of identity
- Two passport photographs

Declaration:

- Section F
- Signature for Blue Badge

BADGE SIGNATURE

Please put your signature in this box in order for it to be copied and placed on your Blue Badge
Please sign twice keeping within the Lines.

This form is separated from the main application form and will not be used as part of your assessment. Your answers will be treated in the strictest confidence. The information you provide will only be used for monitoring purposes and to assist us with improving our processes to ensure we are reaching all sections of the community. How you complete this form has no connection to the evaluation of your application.

SEX: Male Female

ABOUT YOU Gender identity:	Is your gender identity the same as the gender you were born with? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you live and work full time in the gender role opposite to the one you were born with? <input type="checkbox"/> Yes <input type="checkbox"/> No
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ABOUT YOU	What is your ethnic group? Please choose one selection from (a) to (e) and then tick the appropriate box to indicate your cultural background.	
(a) White	<input type="checkbox"/> British <input type="checkbox"/> Irish <input type="checkbox"/> Other please specify: _____	
(b) Dual Heritage	<input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black Asian <input type="checkbox"/> White and Asian <input type="checkbox"/> Other please specify: _____	
(c) Asian	<input type="checkbox"/> British <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Other please specify: _____	
(d) Black	<input type="checkbox"/> British <input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Other please specify: _____	
(e) Chinese or other	<input type="checkbox"/> Chinese <input type="checkbox"/> Other please specify: _____	

ABOUT YOU Do you consider yourself disabled?	What do we mean by a disability? The Disability Discrimination Act defines disability as 'a physical or mental impairment with long term, substantial effects on the ability to perform day to day activities'. <input type="checkbox"/> Yes <input type="checkbox"/> No
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ABOUT YOU

How would you describe your sexual orientation? Please tick one box only.

- Heterosexual/straight
- Bisexual
- Gay
- Lesbian
- Other
- Prefer not to say

ABOUT YOU

What is your faith/religion/belief? Please tick one box only.

- Agnostic
- Atheist
- Buddhist
- Christian
- Hindu
- Jewish
- Humanist
- Muslim
- Sikh
- Other please specify: _____
- Prefer not to say

ABOUT YOU

Please select your age group.

- 18-25
- 26-34
- 35-44
- 45-54
- 55-64
- 65 and over

BLUE BADGE APPLICATION HELP NOTES

Please read the se notes before completing your application. Please also detach and retain these notes for your information.

1. Council and applicant's responsibilities.

The disabled person's parking scheme came into being on 01 December 1971 under Section 21 of the Chronically Sick and Disabled Persons Act 1970. The scheme is currently governed under the Disabled Persons Regulations 2000 (SI 2000/682 and subsequent amendments) as well as Local Authorities' Traffic Orders Regulations 2000 (SI 2000/683).

Salford City Council is authorised and required to administer the Blue Badge Scheme under the above statutory regulations and associated government guidance. The council is not permitted to issue Blue Badges to applicants that do not meet the specific eligibility criteria.

As an applicant you are responsible for providing adequate evidence to demonstrate that you meet the specific eligibility criteria required to qualify for a Blue Badge. If your application form is incomplete we will return it and your application will not be processed. If your eligibility is unclear you may be asked to attend a mobility assessment, this will be carried out by an independent occupational therapist. Please note that we cannot take responsibility for any travel costs you incur whilst your application is being processed, regardless of the outcome.

Your application and any other medical evidence you provide will be carefully considered. However the final decision rests with the council and will be based solely on whether the council is satisfied that the eligibility criteria has been met.

Please note that you responsible for allowing at least one (1) month for the renewal of an existing badge. Late applications for renewals cannot be given special priority. Until you have a valid Blue Badge it is the vehicle keeper's responsibility to ensure their vehicles are parked legally at all times.

Please review the checklist in **Section D** to ensure you have completed all relevant parts of the form and enclosed supporting documentation before returning to:

Salford City Council
Blue Badge Officer
Unity House
Chorley Road
Swinton
M27 5AW

Telephone enquires: 0161 793 2259

2. Terminally ill applicants.

Please contact the Blue Badge office on 0161 793 2259 for further details.

3. Section A: Your Details

Section A asks for your personal details including name, address, postcode, date of birth, national insurance (NI) number and contact telephone number.

NI numbers can normally be found on your NI card, P45, P60, notice letter from the DWP, tax letter from HM Revenue & Customs, wage slip, payslip or benefit book.

You will be asked to provide proof of your residency and identity, without this your application will be returned. See Section D for the list of acceptable proof.

Previous addresses and past badge information helps us to correctly identify you and process your application more quickly and efficiently.

We ask that you provide us with your GP and other health professional's details together with the consent to share information with relevant parties. If you are not automatically eligible this assists us with further enquiries without delaying your application.

4. Section B: Automatic Eligibility

You are eligible for a Blue Badge without further assessment if you are more than two (2) years old and receive the higher rate mobility component of the Disability Living Allowance (HRMCDLA), are registered blind or receive a War Pensioner's Mobility (WPMS).

- 1 If you receive the HRMCDLA you will have had an award letter from the Disability and Carers Service (DCS) or a vehicle with duty excise exemption. If you have lost this the DCS can provide another copy.

We ask that you provide an award letter that has been issued within the last six (6) months or, if you have an indefinite award, a copy of the original certificate.

- 2 The formal notification to register as blind (severely sight impaired) with your local authority is a Certificate of Visual Impairment (CVI) signed by a consultant ophthalmologist. The CVI was formerly known as the BD8 which is also acceptable documentary proof. Registration as blind with your council is voluntary.
- 3 If you receive the WPMS you will have an award letter from the Service Personnel and Veteran Agency.

Where entitlement is by way of HRMCDLA or WPMS the Blue Badge will be linked to the period of receipt of that allowance, but in no case will it exceed three (3) days.

5. Section C: Eligibility Subject to Further Assessment

You may be eligible for a Blue Badge subject to further assessment in three (3) specific situations.

- 1 People with severe disability in both arms who drive regularly and have a severe disability in both arms and are unable to operate, or have considerable difficulty, operating parking meters.

Only a small number of people will qualify under these criteria. The guidance specifically says that badges must not be issued unless all criteria are met and in particular should not be issued to a person who only has difficulty carrying parcels, shopping, luggage and other heavy objects.

- 2 People who are unable to walk or have very considerable difficulty in walking because of a permanent and substantial disability (i.e. a condition likely to last at least three (3) years) or the exertion to walk would constitute a danger to their life or would be likely to serious deterioration in their health

You should generally be physically incapable of visiting shops or public buildings unless allowed to park close to the destination. The degree of impairment should be comparable to that required to claim the HRMCDLA referred to earlier.

People with a behavioural or psychological disorder will not normally qualify unless their impairment causes very considerable difficulty in walking. Considerations such as difficulty in carrying parcels will not be taken into account.

Please describe the nature of your disability and give an estimate of the maximum distance you can walk without assistance or severe discomfort. We understand how difficult it can be to accurately work out the distance you can walk. There are several things that can help you:

Ask someone to walk with you and pace the distance you walk. The average adult step is less than one metre. For example, if the person walking with you took 100 steps, you would have walked about 90 metres.

- A size 9 shoe is about one third of a metre.
- The average double decker bus is about 11 metres long.
- A full size football pitch is about 100 metres long.

If you still find it difficult to work out the distance you can walk in metres please tell us:

- The number of steps you can take, and how long in minutes, it takes you to walk this distance.
- About your walking speed.
- The way you walk, for example shuffling, or small steps and so on.

- 3 Children under the age of two with a medical condition which means they must always be accompanied by bulky medical equipment which cannot be easily carried around or they need to be near a motor vehicle at all times for treatment or to be transported quickly to a location where they can be treated.

Examples of bulky equipment include ventilators, suction machines, feed pumps, parenteral equipment, syringe drivers, oxygen administration equipment, and continuous oxygen saturation monitoring equipment and casts and associated medical equipment for the correction of hip dysplasia.

Examples of highly unstable medical conditions which may require urgent transportation to a hospital or home include tracheostomies, severe epilepsy/fitting, highly unstable diabetes and terminally ill children who can only access brief moments of outside life and a need quick route home.

The above lists are not exhaustive to allow for new advances in technology and treatment equipment. Note that children will be issued with Blue Badges for a maximum of two (2) years ending the day immediately following their second birthday.

6. Section D: Residency & Identity Documentation

Blue Badges are increasingly the subject of fraud. The council is therefore required to satisfy itself as to the identity of the applicant and that they reside within Salford.

Acceptable evidence for residency and identity is listed. Please send photocopies and not original documents. Note that a mobile telephone bill is not accepted as proof of residence. If you are unable to provide evidence as per list please explain why this is the case or call the Blue Badge office on 0161 793 2259.

If the applicant is a child we also accept the following as evidence of residency:

- NHS Medical Card
- Child Benefit Notice from HM Revenue and Customs
- Disability Living Allowance Letter
- Birth Certificate

Photographs are required to ensure the correct use of the scheme, They do not need to be taken in a photo booth but must be approximately of the same dimensions and must show the applicants face clearly. If we have reason to believe the photograph is of someone other than the applicant or will be used by someone else then we will refuse to issue a Blue Badge.

7. Section F: Declarations

All applicants, or guardians and representatives on their behalf, must sign and date the form to confirm they have read, understood and agree with each of the statements.

Please also ensure that you sign the 'Signature' box, we will not be able to issue the badge without this.

8. Appeals

If your application is rejected you may appeal. In order for the council to undertake a further review of this decision you will need to provide new evidence or information concerning your disability and how it severely affects your ability to walk.

You do not need to submit another application form. Please write a letter clearly stating:

- Your name, address and date of birth.
- Your intention to appeal the council's decision.
- The reason for your appeal.
- The criteria (see above) that you believe you qualify under.

Appeals are accepted if made in writing within twenty-eight (28) days of an application being rejected. We aim to process appeal applications in approximately six (6) to eight (8) weeks. Only the information presented in your appeal can be considered so please ensure you notify us if you are seeking further information.

You may report your case to the Local Government Ombudsman if you feel that there have been procedural irregularities in dealing with your application.