

Blue Badge Application Form

Risk in Traffic



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

When completing this form you may find useful information on Blue Badge eligibility at: www.mygov.scot/apply-blue-badge/eligibility.

Please note there is a 'Counter Signatory Questionnaire' at the end of this application form which must be completed by a healthcare, social work or teaching professional who have seen the applicant during the last 12 months and who is not the applicant's GP. Please ensure this questionnaire is completed and enclosed along with this application.

The local authority may refuse to issue a badge if you do not provide adequate evidence that the eligibility criterion is met.

If you are completing the form on behalf of an applicant who is under 16 years old or someone not able to complete it on their own, you should provide your details in the section directly below and **their details thereafter** and sign the form on their behalf.

Information about the person completing this form

Title (Mr, Mrs, Ms, other)

First name(s) (in full)

Surname

Surname at birth
(if different)

Telephone (home)

Telephone (mobile)

Email address

Relationship to
applicant

Local Authority
of residence

Information about the applicant

Title (Mr, Mrs, Ms, other)

First name(s) (in full)

Surname

Surname at birth
(if different)

Date of birth
(DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y
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Place of birth
(town and country)

**National Insurance
Number** (16 and over)/
NHS Number (under 16)
The NHS number is made
up of 10 digits, usually
shown in a 3-3-4 format)

**Current address &
postcode**

**Previous address,
if different in the last
three years**

Telephone (home)

Telephone (mobile)

Email address

Information about the applicant

Does the applicant currently hold a Blue Badge, or have they held a Blue Badge before?

☐ Yes ☐ No

If they have:

Which local authority issued you with the last badge?

What is the serial number on the last badge? (The serial number can be found on the front of your badge.)

What is the expiry date of the last badge?

Proof of address

We need to check that the applicant is a resident in this local authority area before we can process their application. Please select one of the following options and **provide copies of the original documentation** where relevant:

Either ☐ I have enclosed a Council Tax bill bearing my name and address, dated within the last 12 months

Or ☐ I have enclosed a Utility bill bearing my name and address dated within the last 3 months

Or ☐ I do not pay Council Tax, am over the age of 16 and submit a copy of my lease as proof of my address

Or ☐ I give consent to the local authority to check my personal details on the local authority's Council Tax/Assessor and Electoral Register or National Entitlement Card systems to confirm my address

Or ☐ I am applying on behalf of an applicant who is under 16 and submit a copy of an NHS letter to prove their address

Or ☐ I am applying on behalf of an applicant who does not pay Council Tax and is under the age of 16. I give my consent to the local authority to check school records to confirm their address

The name of the applicant's school is:

Information about the applicant

Proof of applicant's identity

We need to check the applicant's identity to reduce the potential for fraudulent applications for a Blue Badge. Please attach a **photocopy** of one of the following as proof of the applicant's identity. Do not send original documents as these will not be returned.

☐

Birth/Adoption certificate

☐

Marriage/Divorce certificate

☐

Passport

☐

Civil Partnership/Dissolution certificate

☐

Valid driving licence

Photograph

Please enclose a recent passport-quality photograph of the applicant. The photograph needs to show the applicant's full face so that the holder can be easily identified. No one else should be in the photograph.

Applicants who are unable to access photo booths can provide a suitable clear photograph taken by other means (*e.g, mobile phone, tablet or digital camera) which can be cut down to an appropriate size.

Please ensure that the applicant's name is on the back of the photograph and complete the declaration at the back of the form to confirm that the photograph is a true likeness.

Badge Fee

If this application is successful the applicant will receive a letter/email/telephone call requesting payment of £20 for the badge. Your Local Authority will only issue successful applicants with a Blue Badge once payment has been received.

Payment information specific to East Lothian Council

There are three ways to pay:

- Online at
- By calling
- By cheque

You must know your reference number when making a payment

Where possible, please nominate the vehicle registration number(s) for the main cars in which you intend to use the Blue Badge:

(Up to three registration numbers should be nominated, but please remember that other vehicles can be used)

Confirming your eligibility

Please note that you will only qualify for a Blue Badge under this criterion if you have a mental health, cognitive or behavioural condition which means you lack awareness of danger from traffic which is likely to compromise your safety or the safety of others. This includes any mental health problem, personality disorder or learning disability, however caused or manifested. Examples are Dementia, Autism or Down's Syndrome.

If the applicant is still driving they will not qualify for a Blue Badge under this criteria.

1. What condition do you have?

You must provide adequate evidence to support your application. This can include information from medical professionals, teachers, social workers, carers, psychologists, or others who know you or your child well and can describe the difficulties experienced. If you are re-applying on the basis of the same condition and your circumstances have not changed, you do not need to provide new evidence.

Have you enclosed the required documentation?

☐ Yes

2. Receiving Disability Benefits

Providing information about the disability benefits you receive will help the local authority make a full assessment of your application.

Confirming your eligibility

Tick the box next to the benefits you currently receive.

- ☐ You get the higher rate of the care and/or mobility component of the Disability Living Allowance or Scottish Adult Disability Living Allowance
- ☐ You get the higher rate of the mobility component of Child Disability Payment or enhanced mobility component of Adult Disability Payment
- ☐ You get the middle rate of the care component of the Disability Living Allowance or Scottish Adult Disability Living Allowance
- ☐ You get the higher rate of Attendance Allowance
- ☐ You get the lower rate of Attendance Allowance
- ☐ You get Personal Independence Payment and have been awarded a total of at least 12 points in respect of the following:
 - communicating verbally
 - reading and understanding signs, symbols and words
 - engaging with other people face-to-face
 - planning & following a journey
- ☐ You get Personal Independence Payment and have awarded a total of at least 8 points in respect of the following:
 - communicating verbally
 - reading and understanding signs, symbols and words
 - engaging with other people face-to-face
 - planning & following a journey

If you receive any of the benefits listed in the previous question, you should enclose a copy of the original letter of entitlement to the benefits dated within the last 12 months. If you're enclosing a Personal Independence Payment letter of entitlement, you have to enclose a letter showing the breakdown of points you receive. We may also check that you are in receipt of this award with the Department for Work and Pensions.

Have you enclosed benefit documentation?

☐ Yes

Background to your condition and why you require a badge

Providing information about your condition will help the local authority to make a full assessment of your application.

Confirming your eligibility

3. Please describe:

- Any courses of treatment you have undergone or specialist clinics you have attended in relation to the condition you have mentioned.
- Please state when you underwent any relevant surgery or treatment or attended specialist clinics.

Surgeries/courses of treatment/specialist clinics	Dates you received this treatment

4. What medication do you currently taking in relation to the condition you described above?

Medication	Dosage	Frequency

5. Why do you require a Blue Badge? How is a Blue Badge going to help you?

Please describe what benefit you seek to get from having a Badge. You may want to give examples.

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Confirming your eligibility

6. How would the use of a Blue Badge reduce the risk in comparison to current strategies?

7. Do you anticipate that your condition will improve in the next three years?

☐

Yes

☐

No

☐

Don't know

If you ticked **yes**, please describe how much you expect your condition to improve.

Declarations and Signatures

The following questions are mandatory and are intended to be answered by all Blue Badge applicants.

Please read the following declarations thoroughly and tick all of the relevant boxes to indicate that you have read and understood each declaration. Not ticking one of these declarations may mean we are unable to issue you with a Blue Badge. Providing fraudulent information may result in prosecution and a fine.

All documents relating to this application will be dealt with in line with the Data Protection Act 2018, UK General Data Protection Regulation (GDPR) and may be shared within the local authority, with other local authorities, the police and parking enforcement officers to detect and prevent fraud. We also have our own Privacy Policy, details of which can be found on our website.

Any medical information that you have supplied to support this application is deemed, under the Data Protection Act 2018, to be “sensitive personal data” and will only be disclosed to third parties as necessary for the operation and administration of the Blue Badge scheme, and to other government departments or agencies, to validate proof of entitlement or as otherwise required by law.

Declarations to be completed by applicant

- ☐ I can confirm that, as far as I know, the details I have provided are complete and accurate. I understand that action may be taken against me if I have provided false information in this application form.
- ☐ I understand that I must promptly inform my local authority of any changes that may affect my entitlement to a Blue Badge.
- ☐ I confirm that the photograph I have submitted is a true likeness.
- ☐ I understand that, if my application is successful, I must not allow any other person to use the Blue Badge and I must only use the Blue Badge in accordance with the rules of the scheme as set out in the Rights and Responsibilities leaflet that will be sent to me with my Blue Badge.
- ☐ I understand I must not hold more than one valid Blue Badge at any time.
- ☐ I consent to the local authority contacting the NHS, school or social care services for the purpose of obtaining further information in support of my application.
- ☐ I understand that I may be required to undertake a mobility assessment with a regulated healthcare professional who is independent of my existing care and treatment, in order to determine my eligibility for a Blue Badge.
- ☐ I consent to the local authority having access to my medical notes where their systems allow.

Misuse of a Blue Badge is a criminal offence.

Your consent to use your information to improve the service you receive

Please read and tick the following declarations that you consent to. Ticking these boxes will help us to improve the service we can offer.

☐ I consent to my local authority checking any information already held by their Social Services department on the basis that:

- It can help determine my eligibility for a Blue Badge.
- It may speed up the processing of my application.
- It may enable a decision to be made without the need for a mobility assessment.

☐ I agree to the disclosure of information included in this form to other local authority department/service providers so that I can be informed about other services that may be of benefit to me.

Checklist of documents you may need to disclose

Please ensure that you have enclosed copies of all of the relevant documents for the sections of this application form. Copies should be true likeness of the originals. Please tick the relevant box(es) below to confirm all documents/photocopies provided are genuine:

☐ If applicable, copy of documentation proving the relevant benefits you receive

☐ Supporting information confirming the condition

☐ Counter Signatory Questionnaire completed by a healthcare, social work or teaching professional

☐ Document to prove your address, as listed in the 'Information about the applicant' section

☐ Document to prove your identity, as listed in the 'Information about the applicant' section

Your signature against the declarations

Signature

Date of application
(DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y
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Please print your name

If the applicant is unable to sign themselves and you are their proxy, please sign above and provide the information below.

Please indicate your relationship to the applicant:

Submitting your application

Completed applications can be sent to:-

East Lothian Council – Transport Services
Penston House
Macmerry Industrial Estate
Macmerry
East Lothian
EH33 1EX

Alternatively you can attend any Local Area Office. Further information can be obtained by:

Tel: 01620 827 827

Email: bluebadge.admin@eastlothian.gov.uk

Web: www.eastlothian.gov.uk
