

# Blue Badge Application Form (1)

(Eligible Without Assessment)

This form should be completed by people who may qualify for a Blue Badge, who are more than two years old and fall within one or more of the following descriptions:

- are severely sight impaired (registered blind);
- receive the **Higher Rate of the Mobility Component** of Disability Living Allowance;
- receive **8 points or more under the 'moving around' activity of the mobility component** of Personal Independence Payment (**PIP**), or;
- receives the mobility component of PIP and has obtained 10 points specifically for Descriptor E under the 'planning and following journeys' activity, on the grounds that they are unable to undertake any journey because it would cause overwhelming psychological distress, or;
- receive the War Pensioner's Mobility Supplement; or
- receive a qualifying award under the Armed Forces and Reserve Forces (Compensation) Scheme.

If you are unsure whether these questions apply to you, then please read Section 2 of the guidance notes enclosed with this application form.

Important Note: (Government Guidance states only a PIP Score of 10 under Descriptor E meets Blue Badge Eligibility. A higher score, or 12 Points under Descriptor F, will not meet the criteria for 'automatic' eligibility. You can still apply for a Blue Badge using Application Form 2 if you think you may meet the criteria, and can provide evidence, listed on that form.)

You can apply for yourself or someone else, you'll need to provide proof of identity, address and other evidence of the criteria you think you meet, along with a recent photograph of the applicant's face including shoulders.

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

Visit: gov.uk/apply-blue-badge to apply on line

### Section 1 - Information about the applicant

<b>Who are you applying for?</b> Myself  Someone Else If you are applying for someone else, fill in the answers and sign the form on their behalf. Where the form says 'you' it is referring to the applicant.								
Do you currently hold a Blue	Badge, or have you held a	a Blu	e Badge before	?				
Enter 6 digit badge number	(if known)							
Full Name:								
Full name at birth if different fr	rom above:							
Gender:		Date	Date of Birth (DD/MM/YYYY):					
Identified in a different way, enter here:								
National Insurance Number/Child Registration Number: (see Section 1 of the accompanying guidance notes)								
Postal Address (where the badge will be posed to if it is issued):	Address							
				Postcode:				
	Main Phone Number:							
	Alternative Phone Number (optional):							
	Email:							
Previous address, if different								
in the last three years:				Postcode:				

If you are applying on behalf of	•				
Who should be contacted abo	• •				
(if you are the contact put yo	our full name here)				
Relationship to the applicant:					
Which of these are you provid	ing as proof of identity? (choose	one to attach as a certified co	ру)		
	f a document that has been verified nally confirming the documents sho		olds a certain position of		
"This copy is a true likeness of the alongside this information.	original" alongside their signature.	They should also print their name	, address, and occupation		
Birth or adoption certifictate	Marriage/Civil partnership/ Dissolution or Divorce Certificate	Passport	Driving License		
You must also attach a proof	of address. Which of these are	e you providing:			
Council Tax bill	Utility bill	Driving License	School Record		
Benefit letter					
Recent photograph of the ap	pplicant				
	inted on the back of the Blue Ba				
best to get someone else to ta	ke the photo. It must have the a		re on the back.		
		Make sure it:  • Was taken within a month of the application date			
		Has a plain, light background			
		• Includes face and shoulder			
		Shows the face clearly			
		• Is a true likeness			
		• Is in colour, free from red eye, shadows or reflections			
		Has nothing covering the face and a neutral expression			
	s about your eligibil	•			
You will need to provide inform your benefit to this application		ent and details of the benefits	you receive, and attach proof of		
2a) People who are seve	erely sight impaired (bline	d)			
Are you registered as blind (	severely sight impaired)? $\Box$	Yes No			
If YES, do you give consent to	us to check the local authority's	register of blind people to see	whether your disability is		
already known to the council?					
If NO, then please indicate whether you have enclosed a copy of your Certificate of Vision Impairment (CVI) or a BD8 form,					
signed by a Consultant Ophthalmologist and that you wish to be registered as blind:					
	the Higher Rate of the Mo	obility Component of			
Disability Living All	owance e of the Mobility Component of	Disability Living Allowance?			
1 your award has an end date effet it fiere:					

 $\square$  No

	If you are in receipt of the Higher Rate of the Mobility Component of Disability Living Allowance you must enclose a copy of the letter of entitlement to this benefit issued within the last twelve months or your original annual updating letter.				
If you have lost y	our award letter, please contact the Disability Benefits Centre for a copy:				
If you were borr	after 8 April 1948				
Telephone: 0800	0 121 4600				
Textphone: 080	0 121 4523				
_	open 8am to 7.30pm Monday to Friday.				
	on or before 8th April 1948				
Telephone: 0800					
This beloline is	open 8am to 6pm Monday to Friday.				
_	can be found online at www.gov.uk/disability-benefits-helpline				
2ci) People w	ho meet a 'Moving Around' descriptor for the Mobility Component of Personal e Payment (PIP)				
Did you score <b>8</b> p	points or more in the moving around part of the mobility assessment?				
☐ Yes	How many points were scored:				
□ No					
_	who Score 10 Points under Descriptor E - 'Planning and Following a Journey' of the essment of Personal Independence Payment (PIP)				
Did you score the assessment?	e specific 10 points under Descriptor E in the 'planning and following a journey' part of the mobility				
10 Points: You ca	nnot undertake any journey because it would cause overwhelming phsychological distress				
(Government Guidance states only a Score of 10 under Descriptor E meets Blue Badge Eligibility. A higher score, or 12 Points under Descriptor F, will not meet the criteria for 'automatic' eligibility.)					
☐ Yes	How many points were scored:				
□ No					
If you have ticked yes above in Ci or Cii, when is your award of this benefit due to end?  (DD/MM/YYYY):					
	yes to the 'Moving Around' or 'Planning and Following a Journey' descriptors of the Mobility Component of close a copy of your letter of entitlement to this benefit issued within the last twelve months.				
If you have lost y	our PIP decision letter, please contact Directorate of Work and Pensions for a copy:				
Telephone: 0800 121 4433					
Textphone: 0800 121 4493					
This helpline is open from 8am to 6pm Monday to Friday, further details can be found on line at www.gov.uk/pip					
2d) People w	ho receive the War Pensioner's Mobility Supplement				
Do you receive th	ne War Pensioner's Mobility Supplement? 🔲 Yes 🔲 No				
If YES, have you been awarded this benefit indefinitely?   Yes   No					
If NO, when is your award of this benefit due to end?  (DD/MM/YYYY):					
If you are in receipt of the War Pensioner's Mobility Supplement you must enclose a photocopy of original letter of entitlement to this benefit. You should have an award letter from the Service Personnel and Veterans Agency (SPVA). If you have lost this letter, then the agency can be contacted via the free-phone enquiry number: 0800 169 22 77.					

Scheme
Have you received a lump sum benefit under the Armed Forces and Reserve Forces (Compensation) Scheme within tariff levels 1 – 8 (inclusive) and have been certified by the SPVA as having a permanent and substantial disability which causes inability to walk or very considerable difficulty walking?
☐ Yes ☐ No
If you are in receipt of the above mentioned award under the Armed Forces and Reserve Forces (Compensation) Scheme, the Service Personnel and Veterans Agency (SPVA) will have issued you with a letter confirming the level of your award and also confirming that you have been assessed as having a permanent and substantial disability which causes inability to walk or very considerable difficulty in walking.
You must enclose a copy of this letter as proof of entitlement.
If you have lost this letter, then the agency can be contacted:
E-mail: veterans-uk@mod.gov.uk, or
Free-phone enquiry number: 0808 1914 2 18

2e) People who receive a benefit under the Armed Forces and Reserve Forces (Compensation)

#### Section 3 - **Declarations and signatures**

These questions should be answered by all applicants for a Blue Badge.

# 3a) Mandatory declarations about the information you have provided and the application process

• It may enable a decision to be made without the need for a mobility assessment.

- Please read the following declarations thoroughly.
- Please tick all 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) and may be shared within the local authority, with other local authorities, the police and parking enforcement officers to detect and prevent fraud. Any medical information that you have supplied to support this application is deemed, under the Data Protection Act, 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.

## entitlement or as otherwise required by law. Declarations to be completed by all applicants (if you are applying on behalf of someone else, you must agree to the following on behalf of the applicant) Please read the declarations carefully and only sign once you are clear. ☐ I confirm that, as far as I know, the details I have provided are complete and accurate. I realise that you may take action 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 badge. 🔲 I understand that, if my application is successful, I must not allow any other person to use the badge for their benefit and that I must only use the badge in accordance with the rules of the scheme as set out in the "Blue Badge scheme: rights and responsibilities in England' leaflet which will be sent to me with the badge. ☐ I understand that I must not hold more than one valid Blue Badge at any time. 3b) Your consent to use your information to improve the service you receive Please read and tick the following optional declarations that you consent to. Ticking these boxes will help to improve the service we can offer you. $\square$ I consent to the local authority checking any information already held by the local authority on the basis that: • It can help determine my eligibility for a Blue Badge; • It may speed up the processing of my application;

3c) Your signature against	t the declarati	ions that y	ou have ticked	in sectior	a 3a and 3b		
Your signature:							
Date of application:	): 🗆 🗆 / 🗆 / 🗆						
Please print your name here:							
Checklist: What you Need to Send Us							
☐ Photocopies of your docume	nts						
Section 2a – People who are severely sight impaired A copy of your ophthalmologists report / CVI / BD8 form (if you have not given us consent to check the blind register).							
☐ Section 2b – People who received the Higher Rate of the Mobility Component of Disability Living Allowance A copy of the letter of entitlement for the Higher Rate of the Mobility Component of Disability Living Allowance issued within the last 12 months or your original annual updating letter.							
Section 2ci – People who score 8 Points under the 'Moving Around' descriptor for the Mobility Component of Personal Independence Payment (PIP). A copy of the Personal Independence Payment decision letter issued within the last 12 months.							
Section 2cii People who Score 10 Points under Descriptor E - 'Planning and Following a Journey' of the Mobility Component of Personal Independence Payment (PIP). A copy of the Personal Independence Payment decision letter issued within the last 12 months.							
Section 2d – People who receive the War Pensioner's Mobility Supplement An original letter of entitlement for the War Pensioner's Mobility Supplement.							
Section 2e – People who receive an award under the Armed Forces and Reserve Forces (Compensation) Scheme An original award letter confirming receipt of tariffs 1-8 under the Armed Forces and Reserve Forces (Compensation) Scheme, which also certifies that you have a permanent and substantial disability which causes inability to walk or very considerable difficulty walking.							
Confirmation of address:							
(Photocopies only - we will not take responsibility for lost, damages or original documents). Please supply a copy of the following as proof you live in South Tyneside. Whichever one you provide, it must be dated within the last twelve months.							
Utility Bill C	ouncil tax bill		Prescription		Bank statement		
Driving licence B	enifit award lette	er	Other - please desc	ribe			
Confirmation of Identity:							
(Photocopies only - we will not take responsibility for lost, damages or original documents). Please supply a copy of the following as proof of your identity.							
Valid British passport B	irth/Adoption cer	n certificate Medical card			Valid driving licence		
Bus Pass N	Narriage/Civil Part	tnership or D					

If you require this form in an alternative version we can provide it in other languages, large print, Braille or CD. Please contact the Customer Contact Centre on 0191 4277000 and let us know which format you require.

Post completed applications to: Let's Talk Blue Badge Team, Town Hall and Civic Offices, Westoe Road, South Shields, NE33 2RL

Please note we have no facilities to see applicants at this office address.

PLEASE ENSURE THAT THE CORRECT AMOUNT OF POSTAGE IS APPLIED AS IT IS LIKELY TO BE MORE THAN A STANDARD 1ST OR 2ND CLASS STAMP

You may also send information by secure email to: bluebadge@southtyneside.gov.uk - please contact us before you send any personal information, so we can send you a secure link.