HOW WE USE THE INFORMATION YOU GIVE US

The information you provide will be treated confidentially and will only be shared with other organisations where it is legal to do so. The information will be used to assess your eligibility for a Disabled Parking (Blue Badge), and may be used to assess your eligibility for other Camden accessible transport schemes you may apply for.

PART 1 – PERSONAL DETAILS – To be completed by ALL applicants

Photograph

A photograph of passport size and quality is required for the Blue Badge scheme. Your picture will appear on the reverse of the Badge itself and should be a good likeness. If you have provided a photograph previously, either for this scheme or any other accessible transport scheme, we will have stored it electronically and should be able to re-use it. However, if your appearance has changed, or the photograph we have was provided some time ago, please include an up-to-date photograph with your application.

Below are some examples of acceptable photographs:

You can find more helpful information about photograph standards on Camden's website

www.camden.gov.uk/accessibletravel

Examples

Your photograph must be:

– passport-sized (35mm x 45mm)
– a recent photograph (a true likeness of you as you are now)
– in colour
– clear and in sharp focus, with no shadow
– taken against a light grey or cream background
– in daylight or a bright white light

Acceptable But preferable to remove spectacles to avoid any possibility of your photograph being rejected

Acceptable Head coverings for religious or medical grounds are allowed

Acceptable But preferable to remove spectacles to avoid any possibility of your photograph being rejected
Unacceptable Photographs

Below are examples of photographs that will not be accepted:

- **Not acceptable** Portrait style photographs are not permitted
- **Not acceptable** Dark glasses and smiling are not permitted
- **Not acceptable** Covering of facial features is not permitted
- **Not acceptable** Any dummies should be removed before the photograph is taken
- **Not acceptable** Hair covering the face is not acceptable
- **Not acceptable** The spectacles cover the eye
- **Not acceptable** The scarf creates a shadow
- **Not acceptable** Hats are not permitted
- **Not acceptable** The photograph is blurred
- **Not acceptable** Opening the mouth
- **Not acceptable** The photograph contains more than one person
- **Not acceptable** Even a slight smile distorts normal facial features
- **Not acceptable** The subject is too far from the camera
- **Not acceptable** The subject is too close to the camera
- **Not acceptable** The background is not light grey or cream

Please **do not** send a damaged or poor quality photograph. When having your photograph taken, you should:

- be facing forward and looking towards the camera
- keep your eyes open and make sure they are visible (no sunglasses)
- keep your mouth closed, with a natural expression (not grinning or frowning)
- show your full head, with no hat, face covering or head covering (unless this is for medical or religious reasons)
PART 1 – PERSONAL DETAILS – continued

Your Residential Address

When you request an application form we will automatically check your residential address. We will not issue a Blue Badge to an applicant who is not resident in the London Borough of Camden. If we are able to verify your address through this check we will not ask you to provide any further proof that you live in the Borough.

Please check the address we have printed on the application form. If this is incorrect please write the correct address in the space on the right. As Blue Badges are sent out in the post, it is important that we have your correct postal address. We may ask you to provide proof of address if we cannot verify your address ourselves.

Client Reference Number

This number is unique to every Blue Badge applicant and remains the same no matter what, or how many, accessible transport schemes you become a member of. Please keep this number handy when you contact us as it helps us to find your information quickly.

Required Information

The following information is marked with an asterisk * on the application form and must be provided:

• Gender
• Surname at birth (if different)
• Date of birth
• Country and Town of birth
• National Insurance OR Child Benefit Registration Number*
  *This can be found on child benefit documentation and is required if the applicant is:
    – aged under 16
    – aged 16 or over but under 20 – and is in education or training that counts for Child Benefit
    – under 18 and has recently left education or training – but they must have registered for work, education or training with a careers service, Connexions or local authority support services, Ministry of Defence or similar.

Without this information the Council will not be able to order a Blue Badge should your application be successful.

Telephone Number and Contact Details

It is helpful if you are able to provide a daytime contact telephone number. This could be a landline or a mobile. If your telephone is a Text Phone, please state this in Part 1 of the application form, in the Text Phone box.
PART 1 – PERSONAL DETAILS – continued

Current Blue Badge information

If you are a current Blue Badge holder, whether issued by Camden or by another local authority, please provide the details requested.

If you have an “old” style Badge, the serial number will begin with the letter “P” followed by seven numbers and ending in a “D” or an “M”. This will appear in the centre of the Badge underneath the Camden logo.

If you have a “new” style Badge, the serial number is 16 characters long and looks similar to this:

No: 101E1F 0 0931Y0115

It appears directly underneath the expiry date on the front of the Badge.

PART 2 – PAYMENT DETAILS – To be completed by ALL applicants

Please tick the boxes provided to indicate which method of payment you will use to make payment. Please do not send cash. Payment is only required if your application is successful. The cost of the Badge is £10.00.

Payment by telephone – Call 020 7974 5919

If you intend paying by telephone, please do not contact the Council until the outcome of your application is known.

Payment by postal order or cheque

If you pay by cheque, please write the cheque number in the box provided. For cheque and postal order payments, please write your name and address on the reverse. Your remittance will not be cashed until your application is approved; otherwise it will be returned to you.
PART 3 – HEALTH DETAILS – To be completed by ALL applicants

Medical Condition

Please state the diagnosis or name of your medical condition relevant to your application. It is not necessary to include medical conditions that do not affect your eligibility for the scheme. For example, if you are applying because you have considerable difficulty in walking, you should not include conditions that do not affect your ability to walk.

Medication

If you take regular medication to manage your condition, please provide a copy of your prescriptions covering the last six months. You do not need to include medication for conditions not related to the disability for which you are applying for a Blue Badge. However, include any medication you are unsure about.

If you do not have copies of your prescriptions, please list the relevant repeat medication in the box provided. We may wish to verify this with your GP.

PART 4 – MOBILITY BENEFITS

Mobility Benefits Eligibility

You may qualify for a Disabled Person’s Parking (Blue) Badge if you are in receipt of:

- Higher Rate Mobility Component of Disability Living Allowance (HRMC DLA)
- War Pensioner’s Mobility Supplement
- 8 points or more under the “Moving Around” descriptor for the Mobility Component of Personal Independence Payment (PIP)
- Armed Forces and Special Forces (Compensation) Scheme

Please note that you must provide a current copy of your entitlement letter. Please include the front page which confirms the entitlement, (dated within 12 months) with your name and Camden address.

If you are in receipt of Attendance Allowance or Care Allowance, this does not automatically entitle you to a Disabled Person’s Parking (Blue) Badge.

Benefits Contact Details

If you have lost or misplaced the letter confirming your current entitlement, copies of entitlement letters can be obtained by calling the following numbers:

DWP - Disability Living Allowance or Personal Independence Helpline on 08457 123456, Text Phone 08457 224433 (or email dcpu.customer-services@dwp.gsi.gov.uk)

War Pensioner's Mobility Supplement – Veterans Helpline on 0800 169 2277

Armed and Special Forces Compensation – Ministry of Defence Helpline on 0800 757 3100

If you have ticked to confirm that you receive any of the benefits stated, please go to Part 6 (Walking Disability).
Eligibility

You may qualify for a Disabled Person’s Parking (Blue) Badge if you are blind or are severely sight impaired. Please note that you must provide a copy of your CVI or BD8 form to verify this.

If you are unable to supply either of the above documents but you are already known to Camden Councils Sensory Needs Team, or any other local authority’s service, please contact us on 020 7974 5919 and we will attempt to verify your entitlement using the information the Council already has.

If you have completed this section of the application form, please go to Part 10 (Medical / Health Professionals) and complete the section(s) that apply to you.

PART 6 – WALKING DISABILITY

Please complete this section if you have a permanent and substantial disability that affects your ability to walk AND you do not qualify for a Disabled Person’s Parking Badge under Part 4 or Part 5.

Please note that medical conditions such as autism, psychological / behavioural problems, Crohn’s disease/incontinent conditions and Myalgic Encephalomyelitis (M.E.) are not in themselves a qualification for a badge. You may be eligible for a badge, but only if you are unable to walk or have very considerable difficulty in walking, in addition to your condition.

People with epilepsy will need to show that any fits were brought about by the effort required to walk.

Mobility

1. Please provide details of any disability and explain how this affects your ability to walk, or causes very considerable difficulty in walking. Please provide as much detail as possible, including any information on any mobility aids you use to assist your mobility. If your condition is variable please say, as far as you are able, how frequently and to what extent your mobility varies.

2. Please tick the box that best describes your mobility. If your mobility varies please tick the box that best describes your mobility when it is most restricted, and indicate the frequency in the box in question 1.

Distance

3. Please state the number of metres that you can walk before experiencing pain or severe discomfort. This is not always easy to judge so as a guide:

- The new London Bus is 11 metres long
- An underground platform is usually between 110 and 140 metres long
Steps

4. Please state the number of steps that you can climb before experiencing pain or severe discomfort. This should include with the help of handrails.

Mobility Aids

5. Please tick the relevant box if you use a wheelchair, whether manual or electric, to get out and about. If you use any other mobility aids, please use the space provided to state what aids you use. Please indicate whether your wheelchair or mobility aid was prescribed by a social care or health professional, by ticking the relevant box.

Falls

6. Please tick the relevant box to confirm whether you have had any falls due to your disability in the last 12 months, and please state the number of occasions. If any of your falls necessitated treatment please state either the injury you sustained and/or the treatment you needed.

Treatment

7(a). If you are awaiting surgery or other medical procedures, or you are subject to medical investigations for your condition or disability, please indicate by ticking the “yes” box, otherwise tick the “no” box.

7(b). If you are recuperating from surgery or any other medical treatment, please indicate by ticking the “yes” box, otherwise tick the “no” box. You should only answer “yes” to this question if your mobility is affected.

8. Please give any details of any relevant treatment that you have received in the past 12 months that has affected your mobility, and describe the effects it has had in the box provided. Please answer this question whether or not the treatment has been beneficial. Examples include physiotherapy, occupational therapy, dialysis, surgery or chemotherapy.

Occupational Therapy

9(a). Please tick the relevant box to confirm whether you have been assessed by an Occupational Therapist (OT) in your home.

9(b). Please tick to confirm if the OT has approved any mobility aids or home adaptations. If you have ticked ‘Yes’, please use the space provided to give further details. In particular we would like to know how these aids or adaptations help you move around.

If you have completed this section, please go to Part 9 (Drivers and Vehicles)
## Part 7 – Upper Limb Disability

### Eligibility

Please complete this section if you have a severe disability in both arms that prevents you from turning by hand the steering wheel of a vehicle, even if the vehicle is fitted with a turning knob, or makes it very difficult to operate some types of parking meters.

1. Please tick the relevant box to confirm if you have a severe disability in **both** arms. A disability affecting one arm will not qualify you for a Blue Badge under this criterion.

2. Please provide details of any disability, treatment or therapy that you are currently receiving or have received within the last 12 months relevant to your application in the box provided.

If you are making an application under this criterion, you will need to satisfy all three of:

- Regularly driving an adapted or non-adapted vehicle; **and**
- Having a severe disability in **both** arms; **and**
- Being unable to operate, or have considerable difficulty operating, all or some types of parking meter.

### I do not have an adapted vehicle – am I eligible?

If you do not have an adapted vehicle, only if you have the most severe disabilities in both of your arms are you likely to be considered eligible. This may cover, for example: a limb reduction deficiency of both arms; bilateral upper limb amputation; muscular dystrophy; spinal cord injury; motor neurone disease; or a condition of comparable severity. This criterion **does not** cover psychological conditions that may affect the use of your arms unless accompanied by physical dysfunctions as described above.

## Part 8 – Children Under Three Years of Age

### Eligibility

Please only complete this section if the applicant is under **three years of age**.

Applicants will only qualify for a Disabled Person’s Parking (Blue) Badge if:

**A.** They have a condition that requires that they must always be accompanied by bulky medical equipment which cannot be carried around with the child without great difficulty, for example ventilators, suction machines, feed pumps and oxygen administration equipment.

**OR**

**B.** They have 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 be taken in the vehicle to a place where they can be treated.
PART 9 – DRIVER AND VEHICLES – To be completed by ALL applicants

Vehicle Adaptations

Please tick to confirm whether you have a specially adapted vehicle. If you have ticked “Yes”, please use the space provided to give details of the adaptations that you currently have on your vehicle.

Vehicle Registration

In the table please register up to 3 vehicles you intend using with a Blue Badge and whether you will be the driver or the passenger. (Please note you can use your Badge in any other vehicle).

For the purposes of the prevention and detection of fraud, you should specify your driver status.

PART 10 – MEDICAL CONTACTS – To be completed by ALL applicants

Doctor’s Details

Please provide your GP and any other relevant Health Professional details in this section. The Council will not contact your GP as a matter of course as in most cases this is not necessary. You may provide the Council with information from your GP if you wish. However, the Council will not pay any costs associated with information supplied by your GP, or any other health professional, unless we have specifically requested it. Where we do require such information, we will contact your GP direct.

Please tick the relevant box if you DO NOT consent to us contacting your GP.

Other Relevant Health Professionals

Please provide the contact details of any other health professionals that may be able to provide information regarding your condition or disability, e.g. Medical Specialist, Consultant, Social Worker, Community Nurse, Occupational Therapist.

If we need more information about how your health affects your mobility, we may write to your Doctor or consultant, or ask you to attend a Mobility Assessment. All applicants may submit additional information with their application if they wish. This can be a letter from your Doctor, a Medical Specialist / Consultant, your Social Worker, Occupational Therapist or other health professionals to support your application.

Additional Supporting Evidence

Please complete this section if you are providing supporting evidence not covered elsewhere on the application form. Please continue on a separate sheet if necessary. If you are providing documentary, photographic or other evidence separate from the application form please refer to it here.
PART 11 – IDENTITY – To be completed by ALL applicants

Proof of Identity

For audit purposes the Council needs to establish the identity of all applicants. We will accept a photocopy of one of the following:

- Passport (photo page)
- Photo card driving licence
- Birth Certificate/Adoption Certificate
- Marriage/Divorce Certificate
- Civil Partnership/Dissolution Certificate
- National Insurance Card
- NHS Medical Card
- CRB Disclosure
- Asylum Registration letter

Change of Name

If you have changed your name since the issue of any of the above document(s) which you are using as proof of identity, you will need to provide evidence of the change.

We will accept copies of the documents listed below.

- Copy of Marriage Certificate
- Copy of Deed Poll Certificate
- Copy of Statutory Declaration confirming change in name

Please tick the relevant box to indicate which documents you will be enclosing with your application (if applicable).

PART 12 – ETHNICITY DETAILS – To be completed by ALL applicants

Ethnic Group

Please complete the section to describe your ethnicity. By filling in this section you will help the Council to ensure that the service is widely used by all members of the community regardless of gender, age, ethnic background, religion or sexual orientation.

The groups listed on the form reflect the largest ethnic groups in Camden. You are requested to choose the ethnic group that is closest to how you see yourself and specify a more specific group if you wish. If you are not able to adequately represent your ethnic group by just ticking one of the options, tick “other” and write in your ethnic group in the space provided.
**PART 13 – TERMS AND CONDITIONS OF ISSUE – To be completed by ALL applicants**

### The Terms and Conditions of Issue

Please read this section carefully. The Terms and Conditions of Issue are supported by statute and apply to the Blue Badge scheme nationally. Misuse of the Blue Badge may leave you liable to prosecution. If another person misuses your Badge, he or she may also be prosecuted and subject to a fine of up to £1,000.

If your application is successful you will receive a copy of the Department for Transport’s booklet *The Blue Badge Scheme: Rights and Responsibilities in England* which gives guidance on how the Blue Badge should be used.

Please sign and date if you agree with the terms and conditions stated.

**PART 14 - DECLARATION - To be completed by ALL applicants**

### Signing the Declaration

Please note that by signing the declaration, you are declaring the information provided on the form is true in all respects and that you will notify Camden Council immediately of any changes. Please also note that Camden Council may prosecute you if you have given any information on the form which is knowingly inaccurate or untrue, or any supporting documentation which is false or fraudulent.

If you are signing on behalf of the applicant (e.g. if the applicant is under 3 years of age or is unable to sign the form themselves), you must state clearly your relationship with the applicant. All applications for children under 16 must be signed by an adult with parental responsibility. The person signing the declaration must also sign the signature box on the foot of the page.

**RETURNING THE COMPLETED FORMS**

Please check your application ensuring that you have ticked all the relevant boxes and have enclosed all the additional information you wish to submit.

Please do not forget to include the £10 fee but **only** if you are paying by cheque or postal order (made payable to *London Borough of Camden*). Please **do not** send cash.

Please ensure that you sign in the signature boxes on Page 8 of the application form.

Please **return the completed application and other relevant documents to:**

Camden Accessible Travel Solutions
London Borough of Camden
PO BOX 64175
London
WC1A 9BY
CONTACT US

You can contact us in the following ways: (Monday-Friday 9am-5pm)

☎️ **By telephone**

Blue Badge enquiries: 020 7974 5919
Freedom Pass enquiries: 020 7974 6435
Taxicard enquiries: 020 7974 6435
PlusBus enquiries: 020 7974 3716
ScootAbility enquiries: 020 7974 2420 / 6435
Camden Shopmobility enquiries: 020 7482 5503
(9.30am and 4.30pm, Monday to Saturday)
Disabled Drivers Assessment enquiries: 020 7974 6435
Minicom / Textlink: 020 7974 6866

fax By fax: 020 7974 5540

✉️ By email: cats@camden.gov.uk

💻 Our website: www.camden.gov.uk/accessibletravel