

Blue Badge Application Form

Driver with severe disability
in both arms



Please complete all relevant sections of the application form and supply the appropriate documents to confirm your 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.

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 unable to complete the form themselves, please provide their details in the appropriate sections and sign the form on their behalf.

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)

Place of birth
(town and country)

National Insurance Number

Driving Licence Number

Current address & postcode

Telephone (home)

Telephone (mobile)

Email address

Information about the applicant

Previous address,
if different in the last
three years

Do you currently hold
a Blue Badge, or have
you held a Blue Badge
before?

Yes No

If yes:

Which local authority issued you with the last badge?

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

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What is the expiry date of the last badge?

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Proof of your address

We need to check that you are a resident in this local authority area
before we can process your 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

Information about the applicant

Proof of your identity

We need to check your identity to reduce the potential for fraudulent applications for a Blue Badge. You must attach a **photocopy** of **one** of the following as proof of your 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 your application is successful you will receive a letter/email/telephone call requesting payment of £20 for your badge. Your Local Authority will only issue successful applicants with a Blue Badge once payment has been received.

Payment information specific to Dumfries & Galloway Council

Dumfries & Galloway Council do not currently charge for blue badges.

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

The following questions are intended for people who drive a vehicle regularly, have severe disability in both arms and are unable to operate, or have considerable difficulty in operating parking meters. You will need to satisfy all three conditions in order to obtain a badge.

1. Do you drive regularly? Yes No

2. Do you have severe disability in both arms? Yes No

3. Please describe your medical condition/ disability:

4. Are you unable to operate, or have considerable difficulty operating a parking meter or pay and display machine due to upper limb disability? Yes No

If **yes**, please describe the difficulties you have with operating parking meters and pay and display machines:

5. Do you drive a specially adapted vehicle? Yes No

If **yes**, please describe how the vehicle has been adapted for you, and enclose a photocopy of your insurance details to verify this.

I can confirm a copy of my insurance details are enclosed with this application form.

Should you wish to supply additional medical letters or documents which could support your application, please include copies of these with your application.

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 a regulated healthcare professional for the purpose of obtaining further information in support of my application.
- I understand that I may be required to undertake an 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 a copy 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(s) below to confirm all documents/photocopies provided are genuine:

Copy of adapted vehicle insurance details (if applicable)

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

Applicant's signature

Date of application
(DD/MM/YYYY)

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

Submitting your application

Applications for: walking difficulties; disability in both arms; applicants under 3; organisations; replacements; risk in traffic

Post code area	Social Work Office
DG1; DG2;	122-124 Irish Street, Dumfries, DG1 2PB
DG3; DG4; DG10; DG11; DG12; DG13; DG14; DG16	Mill Hill Centre, Corseig Crescent, Kelloholm, DG4 6EL
DG5; DG6; DG7, DG8	Garden Hill Primary Care Centre, 2 Garden Hill Road, Castle Douglas, DG7 3EE
DG9	Ashwood House, Sun Street, Stranraer DG9 7JJ

Automatic applications/renewals: your nearest customer service centre or library