Dorset Concessionary Travel Scheme Application Form

If you are a permanent resident in the Dorset area and **are of eligible age** or are **disabled**, you may be entitled to a bus pass.

This pass will allow you to enjoy free, off-peak travel on local buses anywhere in England.

There are several categories of disability, which will allow you to apply for the pass. This will be explained within this application.

For any further information or assistance with completing this form please contact:

Your local district council office

Dorset County Council

Age and disability categories and details of supporting evidence required

Please mark **X** in the box next to the category you wish to make your application under.

☐ **Aged 60 or over**
(see guidance notes on age related eligibility). Evidence of your age and permanent address.

☐ **Blind or Partially Sighted**
Pink or White Registration Card issued by Dorset County Council or a Certificate of Vision Impairment signed by a Consultant Ophthalmologist.

☐ **Profoundly or severely deaf**
Yellow Registration Card or a recent supporting letter either from Dorset County Council Social Services or from a medical professional (aural specialist) stating that your hearing is 70+ dBHL.

☐ **Without Speech**
Yellow Registration Card or a recent supporting letter either from Dorset County Council Social Services or from a medical professional.

☐ **Without arms or have a long-term loss of the use of both arms**
A recent letter from a G.P. confirming that you have lost the use of both arms. The letter must clearly state whether the loss is permanent or long-term. If long-term the letter must state how long the disability or injury is expected to last for.

☐ **Have a Learning Disability**
Blue Registration Card (not blue parking badge) or a recent supporting letter from a medical professional.

☐ **Have been or could be refused a driving licence for medical reasons** (other than the persistent misuse of drugs or alcohol).
A recent notification letter from the DVLA either refusing or withdrawing your driving licence for medical reasons, or a recent letter from your G.P. or a medical professional confirming that in their opinion a driving licence would not be granted under Part III of the Road Traffic Act 1988.

☐ **Have a disability or have suffered an injury which has a substantial and long-term adverse effect on your ability to walk**
All pages of the award notice of the higher rate mobility component of your Disability Living Allowance, or War Pensions Mobility Supplement, or Blue Parking Badge.

☐ **A Member/Veteran of the Armed Services seriously injured in service**
An award letter for a War Pensioners Mobility Allowance or an award letter for guaranteed income payment for tariff levels 1- 8 under the 2005 Armed Forces Compensation Scheme.

☐ **Companion Pass**
(for blind, partially sighted or disabled)
A recent letter from Dorset Social Services, a medical professional or a G.P. confirming that you are unable to travel alone due to your disability and explaining why you require a companion.

Evidence Box – for office use only

Checked by:

Dorset Concessionary Travel Scheme
Application Form

Please complete your personal details using BLOCK CAPITALS

Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other ☐

First Name (s) ☐

Surname ☐

Date of Birth ☐ Telephone No. ☐

National Insurance Number

☐☐☐☐☐

Full address and postcode

☐

I declare that to the best of my knowledge the information given in this application is true and complete. I understand that if I give information that is incorrect or I do not report any changes which may affect my entitlement, I may be prosecuted.

Signature: _____ Date: _____

Please enclose one recent passport compliant colour photograph of yourself. Old, poor quality photographs are not suitable and cannot be accepted. Please write your name and date of birth on the reverse of the photo.

Please ensure you provide the correct documents as proof of either your age or disability. If posting your application please do not send originals, a photocopy is acceptable.

Dorset County Council

What we need from you:

Proof of your permanent address in Dorset (for example, Council Tax Bill or Benefits letter, Driving Licence, State retirement pension letter from DWP, Medical Card or Utility Bill (less than 4 months old) – these must have an address in Dorset (not Bournemouth and Poole)

Proof of age (for example, Birth Certificate, Passport, Driving Licence, Pension Card, Medical Card or State retirement pension letter from DWP)

Data Protection Act 1998

Your personal information will be held and used in accordance with the Data Protection Act 1998. We may lawfully disclose information to other public sector agencies to prevent or detect any crime, including to support national fraud initiatives and to protect public funds.

We may also use this information about you if this helps you to access our services more easily, promotes the more efficient delivery of services or helps us to recover monies that you owe us.

You can ask to see a copy of the information that we hold about you.

For further information please contact the Council's Data Protection Officer or visit the Council's website **www.dorsetforyou.com**

Fair Processing Notice

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share information with other bodies responsible for auditing or administering public funds for these purposes.

Please note:

If you lose your bus pass or it is damaged and you need a replacement, we will charge you £7.00. We will not charge you for a replacement pass if it is stolen and you can provide us with a crime reference number.

We can supply this form in large print, in audio formats or have it translated into another language.