

Disabled person's bus pass

(also known as Diamond and Platinum Travelcards)



You may be eligible for a disabled person's bus pass if you:

- Are severely sight impaired or sight impaired (2.A).
- Are profoundly or severely deaf (2.B).
- Are without speech (2.C).
- Are a veteran or service person who has been seriously injured (2.D) and you receive:
 - The War Pensioners Mobility Supplement.
 - A lump sum benefit under the Armed Forces and Reserve Forces Scheme within tariff levels 1 -8 (inclusive).
- Have a learning disability. Reduced ability to understand new or complex information, a difficulty in learning new skills, and may be unable to cope independently. These must have started before adulthood and have a lasting effect on development (2.E).
- Do not have arms, or you have long-term loss of use of both arms (2.F).
- Have a disability or have suffered an injury, which has a substantial and long term adverse effect on your ability to walk, are of fee paying age (over 5) (2.G) and you receive:
 - The Higher Rate of the Mobility Component of Disability Living Allowance.
 - A current Personal Independence Payment (PIP) for moving around activity of at least 8 points
 - Have a Blue Badge.
- Are of legal driving age and have been or would be refused a driving licence on certain medical grounds. You will not qualify if your condition is related to the persistent misuse of drugs or alcohol (2.H).

See our website www.bristol.gov.uk/buspass for further information about using a disabled person's bus pass

Section 1: Your details

Mr Mrs Miss Ms Other

First name

Last name

Date of birth / / (DD / MM / YYYY)

Address

.....

Postcode

If you currently hold a bus pass. Pass Number

Expiry date / / (DD / MM / YYYY)

Please provide an email and phone number in case we need to contact you:

Email address

Telephone number

Preferred contact method:

No preference Email Telephone Letter

Proof of identity

You need to provide a copy of one of the following (please tick box):

Birth / Adoption Certificate

Valid Photo Driving Licence (this can also prove your address)

EU Identity card

Current passport

Proof of address

We need to check you are a resident within the Bristol City Council boundary. We can do this if you give us consent to check your details against our council tax database.

Please tick box if you agree to Council tax details check

If you are not on the Council Tax Bill you will need to provide a copy of one of the following (please tick box):

Valid Photo Driving Licence

Current TV licence

Bank statement dated within the last three months

Utility bill dated within the last three months e.g. gas, water, electricity

Passport standard photograph

If you have a Blue Badge issued after 01 January 2012 we can use the photo from your Blue Badge application.

You have a Blue Badge and give permission for us to use the photo. Yes No

If you do not have a Blue Badge or want to send another photo see below for guidelines.

If you are emailing your application you will need to attach a digital passport standard photograph. If you are posting your application please write your name and date of birth on the back of the photograph and attach to your form.

It must be:

- Taken within the last three months.
- Standard passport size 45mm high x 35mm wide.
- Taken against a light background.
- Front facing. You must be looking straight towards the camera.
- No head covering, unless worn for religious beliefs or medical reasons.
- Nothing covering your face.
- With eyes open, visible and without reflection or glare from glasses.
- With eyes not covered by sunglasses, tinted glasses, glasses frames or hair.

For more information you can go to www.gov.uk/photos-for-passports

Go to section 2

Section 2: Eligibility Criteria

Complete one of the sections 2.A to 2.G.

Provide as much information as possible for us to make a decision. If we need more information we will either contact you or your doctor if you have provided details of one. Your doctor may charge you for providing us with a letter to support your application. The minimum age for a Disabled Bus Pass is five years old.

2.A. You are severely sight impaired (SSI) or sight impaired (SI) Yes No

You will be issued with a **'Platinum Card'** that allows you to use the bus at any time free of charge.

You are registered as SSI or SI with Bristol City Council Yes No

Registration card number

If you are not registered with Bristol City Council you need to attach a **copy of one** of the following (please indicate):

- Certificate of Visual Impairment (or DB8 form)
- Registration card (both sides) if you are registered with another local authority
- Letter from your eye specialist confirming that you would be considered SSI or SI should you wish to be registered.

Go to section 3

2.B. You are profoundly or severely deaf Yes No

You are registered as profoundly or severely deaf with Bristol City Council. Yes No

Registration card number

If you are not registered with Bristol City Council you need to attach a **copy of one** of the below (please indicate):

- your audiological report
- a report from an aural specialist that confirms that your hearing loss is within the eligible range or that I would be registered as severely or profoundly deaf.

Go to section 3

2.C. You are without speech

Yes No

You are unable to make clear or basic spoken requests in any language.

Yes No

This does not include anyone who is slow of speech or difficult to understand because, for example of a stammer, or where English is not their first language.

You are or have been in receipt of a Personal Independence Payment for communicating verbally and have attached a **copy** of your most recent award notice issued by the DWP.

Yes No

Your application will be considered automatic if your Personal Independence Payment (PIP) for communicating verbally is of 8 points or more.

If you have not been assessed by the DWP you have attached medical information to support your application such as a letter from a doctor on surgery notepaper or with a practice stamp verifying your disability and give permission for us to write to your medical professional if needed.

Yes No

Name of medical professional
Address
Telephone number

Go to section 3

2.D. Veterans and Service Personnel seriously injured

You receive a lump sum payment under the Armed Forces Compensation Scheme in Tariff 1-8 and have attached a **copy** of your reasons for decision letter.

Yes No

You receive the War Pensioners Mobility Supplement and have attached a **copy** of your WPMS letter issued in the last 12 months by Veterans UK (previously the Service Personnel and Veterans Agency).

Yes No

For further information about the scheme, including eligibility please visit the Veteran's UK website www.gov.uk/government/organisations/veterans-uk

Go to section 3

2.E. You have a learning disability

Yes No

A person with a learning disability has a reduced ability to understand new or complex information, a difficulty in learning new skills, and may be unable to cope independently. These must have started before adulthood and have a lasting effect on development.

You are currently receiving services from Bristol City Council’s Community Learning Disability Team (CLDT) and give permission for us to check with them to confirm you have a learning disability.

Yes No

You are not currently receiving services from the CLDT and you have attached medical information to support your application such as a letter from a doctor on surgery notepaper or with a practice stamp verifying your disability and give permission for us to write to your medical professional if needed.

Yes No

Name of medical professional
Address
Telephone number

Go to section 3

2.F. You are without arms, or have long-term loss of use of both arms

Yes No

This includes people with 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.

You have attached medical information to support your application, such as a letter from a doctor on surgery notepaper or with a practice stamp, and give permission to us to write to your medical professional if needed.

Yes No

Name of medical professional
Address
Telephone number

Go to section 3

2.G. Mobility: your ability to walk is permanently and severely impaired

Yes No

To qualify you need to have a long term and substantial disability that means you cannot walk or find walking very difficult.

Typically someone would qualify if they cannot walk more than 100 meters, (walking stick, crutches / frames / artificial limbs if used).

You will get a bus pass without the need to be assessed if you can provide **one** of the following;

- You have provided your award notice from the Department of Work and Pensions (DWP) stating that you receive Higher Rate Mobility Component of Disability Living Allowance.
- You have provided a **copy** of your award notice (or uprating letter) from the Department for Work and Pensions (DWP) that states you are in receipt of a Personal Independence Payment (PIP) for moving around activity of at least 8 points.
- You have a Blue Badge and would like to apply for a Disabled Bus Pass under the same criteria your Blue Badge was issued.

By ticking this box you give us permission to use the information provided to the Blue Badge team.

Your Blue Badge number is

Your Blue Badge expiry date is

The Local Authority your Blue Badge was issued by

If you do not have any of the above, you will need to complete the following questionnaire:

1.1 Your disability;

Please tell us about your disability.

If you know them, please state the medical terms for the condition or disability you have been diagnosed with.

Describe any walking aids (crutches, walking stick, frame), or if you require a wheelchair outside the house, or if you cannot walk at all. (Continue on a separate sheet if necessary)

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1.2 What medication do you take in relation to the condition / disabilities you have described (include any pain relief)?

Medication	Dosage	Frequency
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1.3 Describe any surgery or courses of treatment you have undergone or specialist clinics you attend or have attended related to the medical conditions or disabilities you have mentioned.

Surgeries / courses of treatment	Dates you received this treatment
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.....
.....
.....

1.4 Please tick the box that best describes the way you walk;

- I am able to walk, but struggle with longer distances or hills
- I am able to walk, but get breathless if I walk for more than a few minutes
- I am able to walk, but find it too painful to walk for more than a few minutes
- I am able to walk, but use a wheelchair for longer trips outside the home
- I am able to walk around my home, but too breathless to leave my home, or after dressing
- I am unable to walk at all.

Other

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1.5 In your local area where can you comfortably walk (without severe discomfort) from your home? (please state a landmark, specific location that can be found on a map. i.e. a shop, street address or park).

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Or state a distance in metres or yards.

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For comparison the average bus is about 11 metres, or 12 yards long. A yard is about 1 step for an average adult. (100 steps = 100 yards or 90 metres)

How long would it take you to walk to the location you describe above?

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Please add any other information that might be important for your application?

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Please supply the name, address and telephone number of your medical professional we can contact;

Name of medical professional
Address
Telephone number

Go to section 3

2.H. You are unable to drive due to a medical condition Yes No

If you have been told by the Driver and Vehicle Licensing Agency (DVLA) that you cannot drive for medical reasons or you would be refused should you apply, then you may be entitled to a pass, examples are;

You have epilepsy Yes No
How often do you have seizures (if nocturnal epilepsy, please state this)?

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When was your last seizure?

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You have a severe mental disorder

You are liable to sudden attacks of giddiness and fainting (as a result of cardiac disorder or otherwise)

You are unable to read a registration plate in good light at 20.5meters (with glasses if worn. Including those with a restricted visual field)

You have another disability (including cardiac, renal, neurological disorder, autism or Asperger's)

You have been refused a licence by the DVLA licence on medical grounds and you have enclosed a letter from the DVLA, Swansea, (D206) refusing to issue a licence*

You have been told by your doctor that you would be refused by the DVLA if you applied for a licence and you have enclosed a letter from your medical professional, on surgery notepaper, or with a practice stamp, that you are medically unfit to drive, stating the medical reason*. We may need to contact your medical professional if we need more information from them.

***Note:** if medically unfit to drive on grounds of alcohol or drugs misuse you are not eligible.

If you do not have a letter from the DVLA, please describe your disability.

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Please supply the name, address and telephone number of your medical professional we can contact;

Name of medical professional
Address
Telephone number

Go to section 3

Section 3: Companion bus pass

If you are unable to travel on public transport for the whole journey without help from a companion, your card can include free travel for your companion. Free travel for a companion will be added to your bus pass. (You will not get a separate bus pass for your companion).

You must be 11 years or older to have a companion bus pass.

If you have been awarded the following you will automatically be eligible for a companion pass:

You have provided a **copy** of your award notice from the Department of Work and Pensions (DWP), stating that you receive Higher Rate Mobility Component of Disability Living Allowance.

You have provided a **copy** of your award notice from the Department for Work and Pensions (DWP) that states you are in receipt of a Personal Independence Payment (PIP) for moving around activity of at least 8 points.

You have provided a **copy** of your award notice from the Department for Work and Pensions (DWP) that states you are in receipt of a Personal Independence Payment (PIP) for communicating verbally of at least 8 points.

If you do not have any of the above and are applying for a companion bus pass you need to get the following section completed by your doctor (your GP) or consultant.

This section must be completed by your doctor (your GP) or consultant:

Patient name

Please provide details of the disability and why the applicant requires a companion to get to a bus stop and get on/off a bus;

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Name of doctor / consultant

Address Practice stamp:

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Signature

Agreement

You agree to the best of your knowledge, all the information you have provided is correct.

You understand that it is your responsibility to ensure the security of your card, and that no one else is allowed to use it.

You agree that we may contact your medical professional if we need more information from them.

Signature

Date

What to do now

To email:

Scan your completed application form and email it with your digital passport standard photo, scanned copies of proof of identity and proof of address (if required) and scanned copies of evidence if required to: **bus.passes@bristol.gov.uk**

To post:

Send your completed form with your passport standard photo (please write your name and date of birth on the back) and proof of identity and proof of address and copies of other evidence (if required) to: Travelcard Office (Brunel), Bristol City Council, PO Box 3176, Bristol BS3 9FS

If you would like this information in a different format, for example Braille, audio CD, large print, electronic, BSL DVD or community languages, please call 0117 922 2600 or email **bus.passes@bristol.gov.uk**

Equalities

Equalities information helps us check that everyone in Bristol is able to access our services and no one is discriminated against unlawfully. The information you give will be kept confidential and in line with the Data Protection Act 1998.

You can choose not to answer a question.

The answers you give won't affect the service we give you.

How would you describe yourself?

Age

Under 16 16 to 24 25 to 49 50 to 64 Over 65
Prefer not to say

Gender

Female Male Prefer not to say

Transgender

Yes No Prefer not to say

Ethnicity

White British background Asian / Asian British Prefer not to say
 Other White background Black / African / Black British
 Mixed / multiple ethnic group Other

Religion / Belief

Do you have a religion or belief?

Yes No Prefer not to say

Disability

Are you disabled?

Yes No Prefer not to say

Sexual orientation

Are you lesbian, gay or bisexual Heterosexual (straight) Prefer not to say

Privacy statement: what we do with your personal data

Your privacy is important to us and we take great care to protect it. You can visit our website without giving us your personal data.

Your rights

If you agree to share your personal details you still keep your rights given by the Data Protection Act 1998.

Your service from the council will not be affected if you decide not to allow your data to be shared in this way.

What we do with your personal data:

We collect your personal details when you fill in a form (on paper or on the website), write us a letter or send us an email. When you give us your information, you also agree to:

1. Allow your details to be used for other council services and combined into one single record containing your basic details and information about your transactions.

This will help you because you won't have to repeat the same basic information all the time. It also helps us to deal with your requests more quickly and tailor our services to meet your needs.

Only basic customer data will be shared across the Council. This will be your title, name, address, gender, date of birth and preferred contact details; email, home or mobile phone.

If you wish to opt out of the sharing of your basic details for this purpose, please contact the Data Protection/Freedom of Information Team at foi@bristol.gov.uk or by writing to The Data Protection Officer, Bristol City Council, City Hall, College Green, Bristol, BS1 5TR.

2. Allow us to give your details to contractors who work for us to deal with your request for the council. These contractors use the same security standards as the council.

3. Allow us to share your information with other councils and organisations. You will

be told about this or asked to agree to this first, if we decide to share services with these organisations.

4. We may also give your data to the Audit Commission and other bodies so they can use it to match against computer records held by other public bodies.

This data is usually your personal information. Data matching allows them to spot potentially fraudulent claims and payments. For more information about this please visit: <http://www.bristol.gov.uk/page/council-and-democracy/audit-commission-national-fraud-initiative-nfi-and-other-data-matching>

5. We may also share your information without asking you if:

- the law says we must
- there is a risk of serious harm or threat to life.

We will always ask you before we use it for any other reason or for marketing

To help answer any questions you may have about how we handle your information we have created a Frequently Asked Questions sheet which can be accessed via the privacy pages on our website <http://www.bristol.gov.uk/page/council-and-democracy/privacy-statement-what-we-do-your-personal-data>.

How to see the information we hold about you:

Under the Data Protection Act 1998, you can ask us for the following information:

- confirmation that your personal data is being processed by the council
- a description and copy of the personal data
- the reasons why the data is being processed
- details of who we have or might give it to.

If you wish to see information held by the council about you, please make a data protection request by email at foi@bristol.gov.uk or by writing to:

The Data Protection Officer, Bristol City Council, City Hall, College Green, Bristol, BS1 5TR.