



## Blue Badge application form – Risk in traffic criteria

Use this form to make an application for a Blue Badge where, because of a mental condition, the applicant lacks awareness of danger from traffic and is likely to compromise their safety or the safety of others. You should only use this form if you live in Fife.

If you are completing the form on behalf of an applicant who is under 16, or who cannot complete the form themselves, please provide their details in appropriate sections and sign the form on their behalf at the end.

If you would like support to complete this application, please contact the Blue Badge Team on 03451 555555 ext 446556.

**Note: Blue Badges will be subject to a £20 charge. This charge will be requested upon approval of your badge. Payment should not be sent with your application.**

### Section 1 – Information about the applicant

Please complete the following boxes.

Title (Mr, Mrs, Miss, Ms, Dr, Prof, other):	
First names (in full):	
Surname:	
Surname at birth:	
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth (DD/MM/YYYY): <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Place of Birth:	Town:
	Country:
National Insurance Number / NHS/CHI number (if under 16) <i>(see Section 1 of the guidance notes)</i>	<input type="text"/>
Current address and contact details:	Address:
	Town:
	Postcode:
	Home telephone:
	Mobile telephone:
	Email address:

**Previous address, if different in the last three years:**

Postcode:

**School details (if applicant under 16):**

Name:

Address:

Contact telephone:

**If you now hold, or have ever held, a Blue Badge:**

Local authority that issued the last badge:

Serial number of the last badge:

Expiry date of the last badge:

**Proof of your address, dated within the last 12 months:**

We need to check that you are a resident in Fife before we can process your application. Please select one of the following options and provide documentation where relevant: ***Do not send original documents through the post.***

**Either:**            I have enclosed a Council Tax bill bearing my name and address, dated within the last 12 months.

**Or:**                  I have enclosed a housing benefit notification letter, a pension or benefit letter from the DWP, a bank or building society statement or a utility bill bearing my name and address, dated within the last 12 months.

**Or:**                  I am applying on behalf of an applicant who does not pay Council Tax and is under the age of 16. I have enclosed a Child Benefit letter/letter from a Health Care Professional for that child showing their address or a confirmation letter from their school.

**Proof of your identity:**

We need to check your identity to reduce the risk of fraud. ***Do not send original documents through the post. You must attach a copy of one of the following as proof of your identity:***

- Passport
- Birth or adoption certificate
- Marriage or divorce certificate
- Civil Partnership or dissolution of Civil Partnership certificate

**Photographs:**

You will need to enclose a recent colour passport standard 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. The photograph will be placed on the back of the badge and will not be visible when the badge is being displayed in the vehicle.

Please ensure that the applicant's name is on the back of the photograph and that you complete section 4 of this form to confirm that the photograph is a true likeness.

I attach a photograph

Or

I agree to Fife Council using the photograph from my Myfife (National Entitlement Card) file

**Badge issue fee:**

There will be a £20 charge for a successful Blue Badge Application.

Payment will only be taken if your application for a Blue Badge is successful. You will only be issued with a Blue Badge once your payment has been received.

Please don't make payment now.

**Please nominate the vehicle registration number(s) for the main vehicles in which you intend to use the Blue Badge:**

(Up to three registration numbers can be nominated, but please remember that other vehicles can be used).

## Section 2 – Information about why you need a Blue Badge

Please complete all the following sections.

### Your diagnosis

To be eligible you must have a diagnosed mental health, cognitive or behavioural condition. This includes any mental health problem, personality disorder or learning disability, however caused or manifested, e.g. dementia, autism or Down's Syndrome.

**What is the condition you have been diagnosed with?**

**Proof must be provided from a health care professional that you have been diagnosed with this condition. You should attach a letter confirming the diagnosis to this form unless you are re-applying for a Badge on the basis of the same diagnosis, and the condition is not going to improve, you don't need to send in another letter.**

### Receiving social security benefits

Providing information about the social security benefits you receive will help the local authority make a full assessment of your application.

Please attach a copy letter dated in the last 12 months, of entitlement to your benefit

**Tick the box next to the benefit you currently receive.**

- You get the higher rate of the care component of the Disability Living Allowance
- You get the middle rate of the care component of the Disability Living Allowance
- You get the higher rate of Attendance Allowance
- You get the lower rate of Attendance Allowance

You get Personal Independence Payment and have been awarded a total of at least 12 points in respect of the following:

- section 7 (communicating verbally)
  - section 8 (reading and understanding signs, symbols and words)
  - section 9 (engaging with other people face-to-face)

You get Personal Independence Payment and have been awarded a total of at least 8 points in respect of the following:

- section 7 (communicating verbally)
  - section 8 (reading and understanding signs, symbols and words)
  - section 9 (engaging with other people face-to-face)

## Background to your condition and why you require a badge

Providing information about your condition will help the local authority make a full assessment of your application.

### Please describe:

- Any courses of treatment you have undergone or specialist clinics you have attended in relation to the condition you have mentioned above.
- Please state when you underwent any relevant treatment or attended specialist clinics.

Courses of treatment / specialist clinics attended:	Dates you received this treatment:

### What medication do you currently take in relation to the condition you described above?

Medication	Dosage	Frequency

**Why do you require a Blue Badge? How is a Blue Badge going to help you?** Please describe what benefit you seek to get from having a Badge. You may want to give examples.

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### Do you anticipate that your condition will improve in the next three years?

Yes:  No:  Don't know:

**If you ticked yes, please describe how much you expect your condition to improve.**

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## Section 3 – Countersignatory questionnaire

These questions are intended for a healthcare or social work or teaching professional who has seen the applicant at some time over the last 12 months and who is not the applicant's GP.

You should therefore pass this part onto a healthcare or social work or teaching professional, who should complete the questions, **providing examples to support their answers**, and then sign this section.

<b>Professional contact details:</b>	Name
	Job title:
	Registration number:
	Organisation:
	Work telephone:
	Email address:

The purpose of this questionnaire is to gather information about whether the applicant meets the Blue Badge criteria **of being someone who, because of a diagnosed mental disorder within the meaning of the Mental Health (Care and Treatment) (Scotland) Act 2003, lacks awareness of danger from traffic and is likely to compromise their safety, or that of others.**

**Can the applicant follow the route of a familiar journey on their own?**

Yes:  No:  Sometimes:

Please explain your answer with reference to examples. In particular, if the answer is no, does the applicant show any evidence of being able to learn this?

**Can the applicant follow the basic instructions such as “slow down”, “stay here” or “stop”?**

Yes:  No:  Sometimes:

Please explain your answer with reference to examples. In particular, please indicate how the applicant responds when given such instructions.

**Has the applicant put themselves at risk as a result of being unaware of the dangers from traffic?**

Yes:  No:  Sometimes:

Please explain your answer with reference to examples. In particular, if the answer is yes, please give an example of what has happened.

**Does the applicant require continual supervision while travelling in the community (and in the case of children, over and above that normally required for children of that age)?**

Yes:  No:  Sometimes:

Please explain your answer with reference to examples. In particular, if the answer is yes, please give an example of what has happened when the applicant did not receive this supervision?

**Can the applicant deal with unexpected changes in their journey?**

Yes:  No:  Sometimes:

Please explain your answer with reference to examples. In particular, if the answer is no, please describe any behaviours that are putting the applicant or others at risk as a result of unexpected change.

**Does the applicant wander off when exiting a vehicle, causing danger to themselves or others?**

Yes:  No:  Sometimes:

Please explain your answer. In particular, if the answer is yes, please give an example of what has happened.

**If the applicant is a child, has an NHS buggy been provided?**

Yes:  No:  Not applicable:

If the answer is yes, please give the reasons for receiving it. In particular, was it provided for difficulties in keeping the child safe?

**What coping strategies are currently in place to ensure the applicant's safety?**

**In your professional opinion, having considered the actual risk to this individual applicant, not the potential risk associated with the condition, does the applicant regularly place themselves or others in danger?**

Yes:  No:

Please explain your answer, and provide any other information that might be useful.

**Your signature:**

**Date of signature:**

(DD/MM/YYYY):   /   /

**Please print your name here:**

## Section 4 – Declarations and signatures

Should be completed by all applicants for a Blue Badge

### 4a) Privacy Statement about the information you have provided and the application process

- The information provided by you on this form will be used by Fife Council in order to process your Blue Badge application.
- For further details on how your information is used and why, please go to [www.fifedirect.org.uk/privacy/bluebadge](http://www.fifedirect.org.uk/privacy/bluebadge) . Alternatively you can request a paper copy of the Privacy Statement by calling 03451 550066 or request this from your local Council Customer Service Centre.

### 4b) Declarations to be completed by all applicants

- 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.
- 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 confirm that the photograph I have submitted with my application is a true likeness, or I confirm that I have given permission for my photo provided for my Myfife (National Entitlement Card) to be used.
- 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 in Scotland: Rights and responsibilities of a Blue Badge holder” 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.
- I understand that the local authority may contact the NHS, school or social care service for the purpose of obtaining further information in support of my application.

**4c) Your signature against the declarations that you have ticked above**

<b>Your signature:</b>	
<b>Date of application:</b>	(DD/MM/YYYY): <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>Please print your name here:</b>	
If the applicant is unable to sign themselves and you are their proxy, please sign above and provide the information below.	
<b>Power of Attorney</b> <b>Guardianship</b> <b>Benefit Appointee</b> <b>Other – please state</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <i>(Please select one and enclose supporting documentation)</i>
<b>Please indicate your relationship to the applicant:</b>	
<b>Preferred contact details (if different from page 1)</b>	

***A charge of £20 will be made if your application is successful – do not send payment with this application, you will be contacted with instructions on how to pay. Please ensure you have selected the preferred method of contact.***

email (ensure you have recorded your email address)       letter

#### 4d) Checklist of documents you need to enclose

Please ensure you have enclosed all of the relevant documents for the sections of this application form that you have completed. We have provided a checklist below to help remind you of what you need to enclose.

- Proof of the applicant's address, dated within the last 12 months.
- A copy of proof of the applicant's identity.
- A colour passport standard photograph of the applicant with their name on the back, or that consent has been given to use the Myfife (National Entitlement Card) photo.
- A letter from a healthcare professional confirming applicant's diagnosis, unless they are re-applying and the condition they have will not improve.
- A benefit decision letter dated within the last 12 months

#### Returning this form

You should return this form to your council's Blue Badge service. Here are their contact details:

**Blue Badge Team  
Fife Council  
Bankhead Central  
Bankhead Park  
Glenrothes, KY7 6GH**

**Telephone: 03451 555555 ext 446556**

**E-mail: [European.ParkingBadges@fife.gov.uk](mailto:European.ParkingBadges@fife.gov.uk) (for advice/enquiries only)**

**Please note you will need to pay "Large Letter" postage when posting this form**

# Blue Badge application form

## Risk in Traffic criteria

### Guidance notes

These notes have been produced to help you complete the application form.

***A charge of £20 will be made if your application is successful – do not send payment with this application, you will be contacted with instructions on how to pay.***

#### Section 1 - Information about you

- ✓ This section should be completed by all individual applicants for a Blue Badge. All fields should be filled in.
- ✓ The form asks for a National Insurance or in the case of children under 16, the NHS/CHI number. This can be found on an NHS Medical Card or you can ask the child's GP for it. If an adult applicant does not have a National Insurance Number then please provide an explanation.
- ✓ While you're asked to provide information about up to three vehicles in which the Blue Badge will be used, you can use a Blue Badge in other vehicles too. This information helps local authorities with enforcing the rules of the Blue Badge Scheme.
- ✓ A local authority may refuse to issue a badge if they have reason to believe that the applicant is not who they claim to be or that the badge would be used by someone other than the person to whom it has been issued. For this reason, the local authority needs to check your identity, and information is given on the form about how to provide the necessary information. The local authority may ask to see your identity documents to be sure they're valid.

#### Section 2 – Checking the applicant meets the qualifying criteria

- ✓ This section should be completed by all individual applicants for a Blue Badge. All fields should be filled in.
- ✓ If you want to check the benefits you currently get, or need a specific letter to be issued again, call the Department for Work and Pensions disability benefits helpline on
  - 0800 121 4600                      Disability Living Allowance
  - 0800 121 4433                      Personal Independence Payment
  - 0800 731 0122                      Attendance Allowance

### Section 3 – Countersignatory questionnaire

- ✓ This section should be completed by a healthcare, teaching or social work professional who has seen the applicant at some time over the last 12 months and is not the applicant's GP.
- ✓ You should get one of the following kinds of professional to complete the form:

- A doctor with a current licence to practice
- An arts therapist
- An occupational therapist
- A practitioner psychologist
- A speech and language therapist
- A nurse who is a specialist practitioner in mental health nursing (SPMH)
- A nurse who is a specialist practitioner in learning disability nursing (SPLD)
- A nurse who is a specialist practitioner in community mental health nursing (SCMH)
- A nurse who is a specialist practitioner in community learning disabilities nursing (SCLD)
- A social worker registered with the Scottish Social Services Council
- A class teacher registered with the General Teaching Council for Scotland

- ✓ If you can't get someone on this list to complete the questionnaire, talk to your council's Blue Badge service on 03451 555555 ext 446556. It may still be possible to make an application.

### Section 4 – Declarations and signatures

- 4a) Further information on how your information is used to process your Blue Badge application can be found at [www.fifedirect.org.uk/privacy/bluebadge](http://www.fifedirect.org.uk/privacy/bluebadge)
- 4b) Read and tick the declaration as failure to do so means that we are unable to process your application.
- 4c) All applicants must sign and date the form and select preferred method of contact prior to submitting it. If a representative is signing on an applicant's behalf, eg, Power of Attorney, Guardianship or Benefit Appointee, they should specify their relationship to the applicant and enclose the relevant supporting documentation confirming this. A parent can sign the form if a child is under 16.
- 4d) Check you have provided relevant supporting documents.

**If you post the form, please note you will need to pay "Large Letter" postage**

**The return address is: Blue Badge Team  
Fife Council  
Bankhead Central  
Bankhead Park  
Glenrothes KY7 6HG**

Telephone: 03451 550066  
E-mail: [European.ParkingBadges@fife.gov.uk](mailto:European.ParkingBadges@fife.gov.uk) (for advice/enquiries only)

*Correspondence Address only : Blue Badge Team, Fife Council, Bankhead Central, Bankhead Park, Glenrothes, KY7 6GH*