South Tyneside Council

Disabled Person's Concessionary Travel Pass Application Form

Disabled Concessionary Travel passes are awarded to people of fare-paying age who qualify under any of the seven categories of disability defined by the Transport Act 2000. The qualifying conditions of the seven categories are very specific and your disability must be long-term or likely to last at least 12 months.

To be eligible applicants must reside permanently in South Tyneside and meet one or more of the following eligible categories of disability: -

1. Registered Blind or partially sighted
2. Severely or profoundly deaf
3. Without Speech
4. Loss of the use of both arms /without arms
5. Disability or injury which has a substantial and adverse effect on the ability to walk
6. Significant Learning Disability
7. Would be refused a license to drive a motor vehicle, or have had a license withdrawn on the grounds of physical fitness, other than on the grounds of persistent misuse of alcohol or drugs, for example: -
    i. Uncontrolled epilepsy
    ii. Severe mental disorder
    iii. Liability to sudden attacks of giddiness or fainting (whether because of cardiac disorder or otherwise)
    iv. Inability to read a registration plate in good light at 20.5 meters (with lenses)
    v. Other disabilities (for example vascular dementia, locomotor, renal or neurological disorder)

Please complete all relevant sections of the application form below and supply the appropriate documents to confirm your address, identity, and evidence of eligibility. South Tyneside Council will be unable to issue a pass if you do not provide adequate evidence that you meet the eligibility criteria, or your application may be returned

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Section 1 – Personal Details			
Title: (Mr, Mrs, Miss, Ms)			
First names (in full):			
Surname:			
Date of Birth (DOB):			
Ethnicity:			
Current address :			
Contact Details:	**Postcode:**		
	Home Tel:	**Mobile Tel:**	
	Email:		
Do you currently hold a Blue Badge?	**Yes:** ☐	**No:** ☐	
If Yes, please give the Blue Badge number and expiry date ***(Then Complete Section 3)***	**Blue Badge Number:**		
	Expiry date:		

Section 2 – Qualification and Evidence

To be eligible for a Concessionary Travel Pass you must be able to answer **YES** to one of the following questions and provide **COPIES** of the evidence required ***(do not send original documents as they cannot be returned).***

Where you are unable to answer **YES,** please complete ***(Section 4 - Declaration by Medical Professional.)***

In receipt of the Higher Rate of the Mobility Component of the Disability Living Allowance **OR** **In receipt of Personal Independence Payment showing one of the eligible descriptors of the 'Moving Around' activity of the Mobility Component.** You will need to show that in the mobility component, you get at least 8 points or more for the moving around the part. **OR** **Receiving War Pensioners Mobility Supplement**	YES ☐ NO ☐	**Higher Rate of Mobility -** You will need to provide either: • An award notice letter from the Department for Work and Pensions (DWP) which is less than 12 months old • An annual uprating letter which says you get DLA For any questions, you can contact the Disability Service Centre (Telephone 0800 121 4433) **PIP** -You will need to provide: Your PIP decision letter from DWP shows: • you get PIP (front page) • the assessment scores (second to the last page) the mobility scores (last page) **War Pensioners Mobility Supplement -** You will need to provide: • your official letter from Veterans UK which shows you get the grant if you have lost this letter, contact Veterans UK: Email: veterans-uk@mod.gov.uk Or Telephone: 0808 191 4218

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Section 2 – Qualification and Evidence Continued		
Are you registered blind or partially sighted? Blind means having a high degree of vision loss i.e., seeing much less than is normal or perhaps nothing at all. 'Partially sighted' is a less severe loss of vision. Partially sighted people can see more than someone who is blind, but less than a fully sighted person.	YES ☐ NO ☐	**You will need to provide either:** • Certificate of Vision Impairment from an Ophthalmologist OR evidence of registration with an appropriate association (e.g. Social Services)
Are you profoundly or severely deaf? Hearing loss is measured in decibels across the normal hearing spectrum, as dB HL (Hearing Level). People are generally regarded as having severe hearing loss if it reaches 70-95 dB HL and a profound loss if it reaches 95+ dB HL. The Department advises that the statutory minimum concession should be made available to people in these categories	YES ☐ NO ☐	**You will need to provide either:** • A report signed by a clinical audiologist shows you are profoundly deaf • Your PIP decision letter shows that you've scored 8 or more points in communicating verbally in the daily living activities component
Are you without speech? Included within this category are people who are unable to communicate orally in any language. Those people will be: **A**. unable to make clear basic oral requests e.g. to ask for a particular destination or fare; **B**. unable to ask specific questions to clarify instructions e.g. 'Does this bus go to the High Street?'	YES ☐ NO ☐	**You will need to Provide:** • Evidence of registration with an appropriate association (e.g. Social Services) OR a letter from a Health Care Professional confirming that you are without speech
Have you lost the use of both your arms? This category 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. In the Department's opinion, it also covers both people with deformities of both arms, and people who have both arms, if in either case, they are unable to use them to carry out day-to-day tasks.	YES ☐ NO ☐	**You will need to provide:** • A medical summary from your doctor or specialist that shows your name, and address and confirms your condition or conditions

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Section 2 – Qualification and Evidence Continued		
Have you or would you have been refused a driving license on medical grounds? Other than on the grounds of persistent misuse of drugs or alcohol: - i. Uncontrolled epilepsy ii. Severe mental disorder iii. Liability to sudden attacks of giddiness or fainting (whether because of cardiac disorder or otherwise) iv. Inability to read a registration plate in good light at 20.5 meters (with lenses) v. Other disabilities (for example vascular dementia, locomotor, renal or neurological disorder)	YES☐ NO☐	**You will need to provide:** • Letter from the DVLA confirming the refusal of a driving license **OR** the completed Declaration by a Medical Professional ***(Section 4 - Declaration by Medical Professional.)*** confirming that you would be refused a driving license due to your medical condition. **(This does NOT include those excluded from holding a license due to persistent misuse of drugs and/or alcohol)**
Have you had a disability or injury which has a substantial and long-term diverse effect on your ability to walk? To qualify under this category, a person would have to have a long-term and substantial disability that means they cannot walk, which makes walking very difficult.	YES☐ NO☐	**You will need to provide:** • Letter from a Health Care Professional ***(Section 4 - Declaration by Medical Professional.)*** confirming that your walking ability is permanently and substantially impaired and that you are unable to walk without severe discomfort Distance Applicant can walk in Metres (M) need to be completed in ***(Section 4. "Declaration by Medical Professional")***
Have you been assessed as having a learning disability? A person with a learning disability has a reduced ability to understand new or complex information, difficulty learning new skills, and may be unable to cope independently. These disabilities must have started before adulthood and have a lasting effect on development. The person should be able to qualify for specialist services and he or she may have had special educational provision	YES☐ NO☐	The Adults Learning Disabilities Team may contact you to discuss further

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Section 3: Mandatory declaration about the information you have provided and the application process.	
Please ✓ (tick) each one to indicate you have read, understand, and agree with each declaration. Should this be incomplete, we may be unable to issue you with a Certificate of Eligibility	
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 you will deal with all documents relating to this application in line with the Data Protection Act 2018, and you may share them with the Department of Transport, Nexus and other Council Departments.	☐
Print Name: _____	
Signature: _____ **Date:** _____	

The form can be saved and then attached to the email, or printed & scanned and attached to the email, or printed and hand /post delivered.

Please submit your completed application form online to the following email address
Business.SupportASC-Adults@southtyneside.gov.uk

Send Email

If applying by post please return to the address below, or visit the reception to deliver by hand:

To:

Adult Social Care
Business Support
Adult Social Care
South Tyneside Council
South Shields Town Hall
Westoe Road
NE33 2RL