

THE MORAY COUNCIL - DEPARTMENT OF COMMUNITY SERVICES

## The Blue Badge Scheme of Parking Concessions for Disabled and Blind People Application Form

\* Please  as appropriate. Type of Application:

**Part A**

Full Name of applicant

Address


Date of Birth


Postcode

Tel:

Registration mark(s) of vehicle(s) in respect of which badge is sought .....

**Part B**

**1** Are you registered as blind under the National Assistance Act 1948?

Yes  No  RegNo.

If **Yes**, please give the name of the local authority with which you are registered

**2** Do you receive Mobility Allowance or the higher rate of the mobility component of the Disability Living Allowance?

Yes  No

If **Yes**, please supply evidence (e.g. an official letter confirming an award of the allowance or a Vehicle Excise Duty Exemption Certificate).

**3** Was your vehicle supplied by the Department of Health and Social Security, the Scottish Home and Health Department, or the Welsh Office?

Yes  No

If **Yes**, please give details

**4** Do you receive a Government grant towards your own vehicle?

Yes  No

If **Yes**, please give details

**5** Do you receive War Pensioners' Mobility Supplement?

Yes  No

If **Yes**, please supply evidence (e.g. an official letter confirming an award of War Pensioners' Mobility Supplement).

**If you have answered Yes to any of the questions in Part B, please go to Part F.**

**If you have answered No to all questions in Part B, you may qualify for a badge under Part C or D.**

### **Important Notes - Please read before completing Parts C or D.**

- If you have answered No to all the questions in Part B you will qualify for a badge only if you cannot walk or can walk only with severe difficulty or if you hold a valid driving licence and have a severe disability in both upper limbs and are unable to turn by hand the steering wheel of a vehicle even if that wheel is fitted with a turning knob.
- The intention of the Scheme is that only severely disabled people will qualify under these conditions.
- It is essential that each application under part C or Part D is considered carefully. You may be asked to provide medical evidence of your disability or have a medical examination.
- Badges will only be issued to people who would otherwise find it impossible to visit shops, public buildings or other places; or to drivers who cannot turn by hand the steering wheel of a vehicle.
- People with temporary disabilities, such as a broken leg, will not qualify for badges.

**If after reading these notes you think you may still qualify for a badge, please read Part C and part D.**

#### **Part C**

**Complete this part only if you consider that you have a permanent and substantial disability which causes inability to walk or very considerable difficulty in walking.**

**1** What is the nature of your disability?

**2** What is the maximum distance you can walk without stopping, severe discomfort, or help from another person?

**3** Do you regularly use a walking aid?

Yes  No

If **Yes**, please state type of aid

**Now go to Part E.**

#### **Part D**

**Complete this part only if you hold a valid driving licence and have a severe disability in both upper limbs and are unable to turn by hand the steering wheel of a vehicle even if that wheel is fitted with a turning knob.**

**1** What is the nature of your disability?

**Part D**

2 Do you drive a specially adapted car?

Yes  No

If **Yes**, please state type of adaption

**Part E**

**Please complete this part if you have completed Part C or Part D.**

1 What is the name and address of your family doctor?

Name

Address

2 Are you willing to have a medical examination to determine the extent of your disability for the purpose of obtaining information to support your application?

Yes  No

**Part F**

**This part must be completed in all cases.**

Applications should normally be accompanied by 2 passport type photographs of the applicant. Both photographs should be signed on the back by the applicant. Your photographs will be returned if your application is unsuccessful. You may send photographs taken from self-service booths or any suitable photographs cut down to an appropriate size.

- I attach 2 photographs
- I declare that to the best of my belief all the statements I have made on this form are true and agree to the Local Authority contacting my family doctor if necessary for the purpose of obtaining information to support my application.

**Part G**

**This part must be completed in all cases.**

**The Blue badges have to display the signature of the badge holder. Please provide a specimen of your signature in the box below**

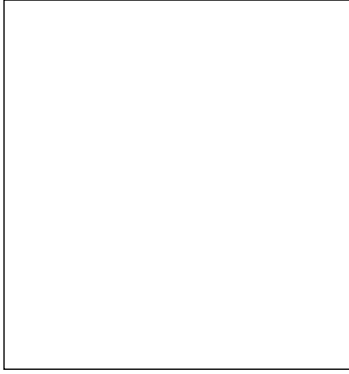
**FOR OFFICIAL USE**

Decision .....

.....

Date ..... Signature .....

Badge No ..... Designation .....



Applicant's second  
photograph

THE MORAY COUNCIL – COMMUNITY SERVICES  
THE BLUE BADGE SCHEME – CHARGING AGREEMENT

1. I agree to the charge of £20 for my Blue Badge, which will be valid for a period of 3 years and to the invoice for the charge being sent to me at the following address::

ADDRESS: .....

.....

2. I confirm that I have been advised that during the 3 year period, if I lose my blue badge, I will receive a replacement badge free of charge, however, any subsequent replacement badges I may request will incur a further £20 charge.

**IMPORTANT**

The renewal date and subsequent charge will be at the date of my original application and not the date I received my replacement badge.

3. In the event of a failure to make payment of the charge, I understand that legal action may be taken against me for recovery of the charge outstanding and that I may become liable for legal expenses and interest.

**PLEASE NOTE: PAYMENT SHOULD NOT BE FORWARDED AT THIS STAGE.  
AN INVOICE WILL BE SENT IN DUE COURSE BY MORAY COUNCIL FINANCE  
DEPARTMENT ONCE YOU ARE IN RECEIPT OF YOUR BADGE**

Signature .....

Print Name .....

Date .....

*Details of Person Signing if **NOT** applicant (eg Power of Attorney/Guardian)*

Please tick which applies: Power of Attorney  Guardian

Address .....

Signature .....

Print Name.....