APPLICATION FOR A DISABLED PERSON'S PARKING PLACE



Oxfordshire County Council operates a scheme whereby disabled residents may qualify for a disabled person's parking place near their home or place of work.

In order to apply for such a parking place, you will need to provide us with some information, so we can check that you are eligible. Please fill in this form. As you work through it, you may also be able to check your own eligibility. Please also check the Fact Sheet on Disabled Persons' Parking Places for the eligibility criteria.

If you are completing this questionnaire for someone else please note that the questions are aimed at the disabled person who requires the space (the applicant) and not yourself.

1.	Name:						
2.	Your home address:		Address for correspondence:				
		(if different from home address		ent from			
3. 4.		ephone number:	Postcode	e			
		Disabled Badge to qu o use such a space v	•		erson's Pa	arking F	Place
5.		here space is needed: t from that of applican					
6.	• ,	Post e holder of the disable e) live at the address	•	badge nur	 mber		
7.	•	ase go on to question e required outside you		work?		Yes/	/No*
	•	ase provide evidence er from your employer		•	work		

	If " no " please give reasons why you need to regularly park near the premises outside which the space is requested:	
8.	Is there a driveway, garage or any other off-street parking, within or adjacent to the property close to where the parking place is required?	Yes/No*
9.	Is there a garage or other off-street parking available elsewhere for the property near which the parking place is required?	Yes/No*
10.	Do you have a driving licence and use of a vehicle?	Yes/No*
11.	If "yes" please go on to question 13. Does your medical condition or disability make it unsafe for you to be left alone (within your home/place of work) while the driver parks the vehicle elsewhere?	Yes/No*
	If "yes" please give details:	
12.	Is there a vehicle, and someone to drive it, for your use at your address?	Yes/No*
	If " no " you will not normally qualify for a Disabled Person's Parking Place.	
13.	Please provide photocopies of driving licence and vehicle registra documents.	ation
lf you	r answer to question 10 was "no" please go on to question 15	j .
14.	Does your medical condition or disability make it impossible for the garage or other off-street parking to be used?	Yes/No*
	If "no" you will not qualify for a Disabled Person's Parking Place.	
15.	Do you receive the higher rate Disability Living Allowance (DLA) for mobility (help with getting around)?	Yes/No*
	If "yes" please supply evidence (e.g. a photocopy of an official let confirming award of the allowance, a Vehicle Excise Duty Exemp certificate or a Post Office Order Book for payment of the allowance on to question 19	tion
16.	Do you receive War Pensioners' Mobility Supplement?	Yes/No*
	If "yes" please supply evidence (e.g. a photocopy of an official let confirming award of the allowance) and go on to question 19	ter

17.	causes inal walking?	ve a permanent a bility to walk or verse go on to ques	ery considerabl	•	Yes/No*		
18.	What is the	maximum dista	nce the applica	nt can walk?		_	
19.	and longer	icle specially ada than 6 metres (a is fully extended	pproximately 2		•	_	
20.		us when you find that our Highway Around Mid-day			e of work is most lem at its worst: At Night		
21.	What is the	more than one to name and address that will actitioner that will	ess of your fam	ily doctor, consi	ultant or other		
	Name: Address:						

I declare that to the best of my knowledge all the information on this form is true and I agree to Oxfordshire County Council contacting my family Doctor or other Health Care Professional if necessary for the purpose of obtaining information in connection with this application.

PLEASE NOTE: providing false or misleading information will delay the processing of your application and may lead to your application being refused.

Signed:	Date:	
Name (block capitals):		

Please return to: Mike Ruse

Traffic Regulation Order Team

(DPPP)

Environment & Economy Oxfordshire County Council

Speedwell House Speedwell Street Oxford OX1 1NE



This form is available in larger print on request.