



**Concessionary Travel Team
PO Box 2929
Priory House
Brighton
BN1 1PS**

**Tel (01273) 291924
Email: busspasses@brighton-hove.gov.uk**

NATIONAL FREE TRAVEL - BUS PASS APPLICATION FORM

Title: _____

Surname: _____ First Names: _____

Address: _____

Postcode: _____ Tel: _____

Email Address: _____

Date of Birth: (d) _____ (m) _____ (y) _____

Have you held a concessionary bus pass before? Yes / No

For all applications you will need to provide:

- Proof that you are a permanent resident of Brighton & Hove. This can be a copy of your current council tax bill or another recent utility bill.
- A current passport size photo (head & shoulders only). Alternatively we can take a photo of you at Priory House.

Eligibility - please tick all boxes that apply

Age 60 plus

You will need to provide proof of age e.g. birth certificate, driving licence, passport etc

Or

Age 5 or over with one or more of these disabilities *:

Severe walking difficulties (you have a disability or have suffered an injury which has a substantial and long-term adverse effect on your ability to walk i.e are unable to walk, virtually unable to walk or the exertion to walk would constitute a danger to your life).

You will need to provide proof that you are currently receiving the Higher Rate Mobility Component of the DLA (disability living allowance) or the War Pensioner's Mobility Supplement.

Without the use of both arms.

You will need to provide proof that you are currently receiving the Higher Rate Mobility/ Care Component of the DLA (disability living allowance).

Blind or partially sighted.

You will need to provide proof of registration e.g. your registration card.

Profoundly or severely deaf.

You will need to provide proof of registration e.g. your registration card.

Without speech.

You will need to provide a letter from your doctor confirming your medical condition.

Learning disability (a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning).

We can cross check your application with the council's Adult Social Care register. If you are not registered please provide a letter from your doctor confirming your medical condition.

Age 18 or over and not permitted to drive (or likely to be refused a driving licence) due to a medical condition.

You will need to provide a letter from your doctor confirming your medical condition e.g.: That you have had an epileptic seizure within the last year or that you are an insulin dependent diabetic.

Please note this does not include the effect of any medication taken for the condition.

Digital images and other information collected for the production of concessionary travel passes will only be used for this purpose in accordance with the data protection act 1998.

*** The disability must be permanent or have lasted at least 12 months or be likely to last at least 12 months.**

I declare that I am eligible for a bus pass and will abide by the Conditions of Use, which I understand may be revised at any time.

Signature: _____

Date: _____

Office use only

Proof seen:

Council Tax Ref:

By Who:

Date:

Processed By:

Date:

Pass Number:

Expiry Date: