Barnet Travel Scheme for disabled people

BARNET
LONDON BOROUGH

Application form

Please note that the information given on this application form will be treated in confidence

PO Box 49065
Assisted Travel Section
London Borough of Barnet
London N11 1UZ

Please read the notes in the information leaflet. Then complete the form and sign the declaration.

For official use

Identity card no. _____

Date of issue _____

1 Surname (Mr/Mrs/Ms/Miss)

Forename

Address

Postcode

Date of birth

Telephone

2 Do you have a permanent or substantial disability which prevents you from walking?
Yes ☐ No ☐
If no, please go to question 3
Please give details of your disability _____

3 Are you registered blind or partially sighted? Yes ☐ No ☐

If yes, please go to question 8. You need not complete the other questions.

4 Can you walk more than 100 yards unaided? Yes ☐ No ☐

Can you climb steps/stairs? Yes ☐ No ☐

Does your disability prevent you from using minicabs? Yes ☐ No ☐

(Wheelchair accessible taxicabs are available for those unable to use minicabs)

5 Do you receive the Higher Rate mobility component of the Disability Living Allowance?

Yes ☐ No ☐

If yes, please produce evidence (such as an official letter of entitlement or copy of your order book)

Do you receive a War Pension Mobility Allowance? Yes ☐ No ☐

If yes, please produce evidence (such as an official letter confirming your entitlement)

continued on the other side

6 Do you own a car which you are able to use regularly or do you have regular access to a car owned by your partner/spouse or other person?

Yes ☐ No ☐

7 Do you have a Freedom Pass for disabled or elderly persons? Yes ☐ No ☐

Do you intend to keep this pass? Yes ☐ No ☐

Do you have a 'Blue Badge'? Yes ☐ No ☐

As you are applying for travel vouchers it is assumed that you are no longer able to use public transport and will not need your Freedom Pass.

8 I am a resident in the London Borough of Barnet and I attach a recent official letter or document (such as a gas or electricity bill) indicating my address.

Declaration

I wish to apply for the Barnet Travel Scheme for Disabled People.

- ❍ I accept that my application may be selected at random for assessment by the borough's occupational therapist.
- ❍ I am prepared to provide information about journeys I make using the scheme if required, on the understanding that it will be treated in confidence and used only to monitor the scheme.
- ❍ I declare that the information given above is true in all respects.

Please note that failure to provide true information may disqualify you from the scheme.

Applicant's signature _____ Date _____

If you are unable to sign the declaration yourself, it may be signed on your behalf by a relative/spouse/friend.

Name _____ Date _____