



Application for an Advisory Disabled Bay

Please use this form to apply for an on-street advisory disabled bay marking. Complete using black or blue ink and print. ALL sections must be completed providing as much detail as possible to support your application.

If you are applying on behalf of the applicant and wish to be the contact in relation to the application, please fill in the box below then move on to 'step 1' below.

If you are applying on your own behalf, please go straight to 'Step 1' below.

Contact information

If you are applying on behalf of the applicant and wish to be the contact in relation to the application, please fill in the following section. This contact information will be used for all subsequent correspondence.

First name(s)	
Last name	
House name or number	
Street	
Postcode	
Home telephone	
Mobile telephone number	
Email	

Step 1 – Applicant personal details

First name(s)	
Last name	
House name or number	
Street	
Postcode	
Home telephone	
Mobile telephone number	
Date of birth	
Email	

Step 2 – Blue badge details

Blue Badge Number	
Date issued	
Expiry date	

Is the blue badge registered at the address for which the application relates? YES NO

Step 3 – Vehicle details

Vehicle registration number	
Colour	
Make	
Driver of vehicle if different from applicant	

Step 4 – General information – TICK BOX

	YES	NO
Do you have a garage?		
Do you have a driveway?		
Do you have use of other off street parking?		

Step 5 – Documents to be attached to your application-please only send photocopies ensuring all documents are current.

Blue Badge	Photocopy of both sides
Disability living allowance mobility component at the higher rate or attendance allowance at the higher rate.	A copy of correspondence from the Department of Work and Pensions (DWP) detailing your entitlement such as your annual notification letter would be appropriate (bank statements are not sufficient).
Driving Licence of vehicle driver	Photocopy both sides
Vehicle registration document (V5) and insurance certificate	Photocopy of both documents
Proof of permanent residency – applicant and driver	Example: Council Tax bill/ letter from DWP (pensions)/ utility bill

Step 6 - Neighbours disclosure/ authority to share information

Each of the boxes below must be signed by the applicant or their representative.

By signing you are indicating you understand and agree to these actions being taken, as appropriate.

Notification of neighbours is necessary and may require disclosure of your disability status, this will only happen if we consider it to be relevant to your application

Sign here:.....

The applicant will notify the authority should any details provided on this form change i.e. medical status, benefits received, should you no longer own a vehicle, relocation etc.

Sign here:.....

The authority is duty bound to protect the public funds it administers, to this end the information you provide may be shared with other bodies to help prevent/detect fraudulent claims

Sign here:.....

Step 7 – Return of application

Please return your application, ensuring sufficient postage is attached, to:

Watford Borough Council
Planning & Transportation (Disabled Bay)
Room 62
Town Hall
Watford
WD17 3EX

For further enquiries please call or visit: www.watford.gov.uk/disabled
Telephone: **01923 278079** or **01923 278115**

Sign..... **Date**.....