This form is only for organisations whose responsibility includes:

- The care and transportation of disabled people who would in themselves meet the eligibility criteria for a badge should they apply individually.
- Having a clear need for an organisational badge rather than using the individual Blue Badges of people it is transporting.

An eligible disabled person is defined as a person who is over two years old and

- Receives the Higher Rate of the Mobility Component of Disability Living Allowance; or
- Meets a “Moving Around” descriptor for the Mobility Component of Personal Independence Payment (PIP); or
- Is registered blind (severely sight impaired); or
- Receives a War Pensioner’s Mobility Supplement; or
- Received a lump sum benefit under the Armed Forces and Reserved Forces (Compensation) Scheme within tariff levels 1-8 (inclusive) and has been assessed and certified as having a permanent and substantial disability which causes inability to walk or very considerable difficulty walking; or
- Drives a vehicle regularly, has a severe disability in both arms and is unable to operate, or has considerable difficulty in operating, all or some types of parking meter; or
- Has a permanent and substantial disability which causes inability to walk or very considerable difficulty in walking.

In addition, eligibility covers children under the age of three who fall within either or both of the following descriptions:

- A child who, on account of a condition, must always be accompanied by bulky medical equipment which cannot be carried around with the child without great difficulty;
- A child who, on account of a condition, must always be kept near a motor vehicle so that, if necessary, treatment for that condition can be given in the vehicle or the child can be taken quickly in the vehicle to a place where treatment can be given.

In all circumstances, badges will be supplied to an organisation or department (e.g. Social Services Department) rather than to individual staff members.

All employees of the organisation who will be using the badge should be reminded that they must only use the badge for the purposes of transporting disabled people in their care who meet one or more of the eligibility criteria for a badge. These employees should be reminded that if they use the badge to take advantage of the concessions when there are no passengers in the vehicle who are eligible for a badge they will face a fine of up to £1,000.
If your application is successful, you will be issued with a copy of the Department for Transport’s (DfT’s) leaflet “The Blue Badge Scheme: rights and responsibilities”. There is now a separate rights and responsibilities leaflet for organisations. [https://www.gov.uk/government/publications/the-blue-badge-scheme-rights-and-responsibilities-for-organisations-that-have-blue-badges](https://www.gov.uk/government/publications/the-blue-badge-scheme-rights-and-responsibilities-for-organisations-that-have-blue-badges)

Please return your completed form to BlueBadgeApplication@dudley.gov.uk.

Alternatively post to: The Blue Badge Team
Brierley Hill Health & Social Care Centre
Venture Way
Brierley Hill
DY5 1RU

You can expect your application to be processed and receive notification of the next stage within 2-6 weeks of receipt of your form.

If your application is successful you will be required to pay the £10 fee. Do not send payment with this application, you will be advised how to make payment if your application is successful.

Forms will be returned to you if they are not completed correctly or the required documentation is not attached.
# BLUE BADGE APPLICATION

## Organisational

### Section 1 Information about organisation

**Do you currently hold a Blue Badge, or have you held a Blue Badge before?**

- [ ] No
- [ ] Yes

**Expiry date:**

- [ ] DD
- [ ] MM
- [ ] YYYY

What is the serial number on the badge?

____________________________________________________________________________________________________

**Name of organisation:**

____________________________________________________________________________________________________

**Main contact name:**

____________________________________________________________________________________________________

**Address:**

____________________________________________________________________________________________________

____________________________________________________________________________________________________

____________________________________________________________________________________________________

____________________________________________________________________________________________________

- [ ] Postcode: [______] [______] [______] [______] [______]

**Tel:**

____________________________________________________________________________________________________

**Alternate no:**

____________________________________________________________________________________________________

**Email:**

____________________________________________________________________________________________________

**Charity number of your organisation** (if applicable):

____________________________________________________________________________________________________

---

**Does your organisation care for disabled people who would themselves be eligible for an individual Blue Badge?** (see definition of eligible person on front page)

- [ ] No
- [ ] Yes

If YES, please give details of the nature of this care:

____________________________________________________________________________________________________

____________________________________________________________________________________________________

____________________________________________________________________________________________________

____________________________________________________________________________________________________
As part of that care does your organisation provide them with transportation?

No ☐ Yes ☐

If YES, please give details of the types of vehicles in which you wish to use the badge, their vehicle registration number and how often they are used to transport disabled people:

<table>
<thead>
<tr>
<th>Type of vehicle</th>
<th>Vehicle Registration Number</th>
<th>Frequency used to transport people</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

How many badges are you applying for? ☐ ☐

How many disabled people are in the care of your organisation? _______ people

How many of these people are already in receipt of a Blue Badge as individuals? _______ people

How many of these people do you estimate would be eligible to receive a Blue Badge if they applied as individuals? (see definition of eligible person on front page) _______ people

Please describe why your organisation is applying for a Blue Badge and the types of trips it will be used for:

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
**Section 2 – Mandatory declarations**

Please read the following declarations. They underpin the terms of applying for a blue badge.

**In order for us to process your application you must agree to and tick all the declarations.**

If you do not tick them all we will be unable to accept your application for a blue badge.

<table>
<thead>
<tr>
<th>Declaration</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>I can confirm that, as far as I know, the details I have provided are complete and accurate. I realise that you may take action against me if I have provided false information on this application form.</td>
<td></td>
</tr>
<tr>
<td>I understand that I must promptly inform my local issuing authority of any changes that may affect my organisation’s entitlement to a badge.</td>
<td></td>
</tr>
<tr>
<td>I understand that you will deal with all documents relating to this application in line with the Data Protection Act 1998, and you may share them with other local authorities, the police and parking enforcement officers to detect and prevent fraud.</td>
<td></td>
</tr>
<tr>
<td>I agree that, if my application is successful, I will not allow any other person to use the badge for their benefit and I agree that I will use the badge in accordance with the rules of the scheme as set out in the “Blue Badge scheme: Rights and Responsibilities” booklet which will be sent to me with the badge.</td>
<td></td>
</tr>
</tbody>
</table>

**Your signature against the declarations in sections 3 of the application form**

<table>
<thead>
<tr>
<th>Your signature: ____________________________</th>
<th>Print Name: ____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please print your name: ___________________</td>
<td></td>
</tr>
<tr>
<td>Role / Position in Organisation:</td>
<td></td>
</tr>
<tr>
<td>Date of application: DD □□ MM □□ YYYY □□□□</td>
<td></td>
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</tbody>
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