Older Person's Bus Pass Application



If you are of pensionable age and resident in Bristol complete this form to apply for a concessionary bus pass.

Your details					
Title:		First name:		Surname:	
Date of Birth:					
Address:					
Post code:					
Telephone:					
Email:					

Proof of age

We need to see a copy of official proof of your date of birth.

This proof could be an official document which shows your date of birth, such as your birth certificate, passport or driving licence.

Proof of address

We need to see a copy of official proof that you live within the Bristol City Council Boundary.

This could be an official document with your current address, such as a bank statement, utility bill, council tax bill, valid photo driving licence, current TV licence or DWP award letter.

If you are liable for council tax in or registered to vote in Bristol, with your permission we can confirm your address for you:

□ Please tick this box if you agree for us to check your council tax or electoral register in order to gain proof that you live in Bristol.

Photo of yourself

You will need to supply a recent colour, passport sized photograph, or digital photograph.

Attach

photograph here if posting your

application

Your photo must:

- measure a standard passport size of 45 mm high by 35mm wide
- be taken within the last month
- be taken against a plain cream or light grey background
- be a close-up of your full head and upper shoulders

In your photo, you must:

- · be facing forward and looking straight at the camera
- have a neutral expression and your mouth closed
- have your eyes open, visible and free from reflection or glare from glasses
- not have hair in front of your eyes
- not have a head covering (unless it's for religious or medical reasons)
- not have anything covering your face
- not have any 'red eye'
- not have any shadows on your face or behind you

You can't wear sunglasses or tinted glasses. You can wear reading glasses but your eyes must show fully through clear lenses without glare or reflections.

Companion bus pass				
Do you	need someone to travel with you on public transport (this is called a Companion)?			
	∕es lo			
In order	to be issued a companion card you must be:			
□ lr □ lr "I □ lr	n receipt of Attendance Allowance, or n receipt of the higher rate of mobility for Disability Living Allowance, or n receipt of Personal independence Payment (PIP) with a score of at least 8 points for Moving around", and/or n receipt of Personal independence Payment (PIP) with a score of at least 8 points for Communicating verbally"			
C	Or Control of the Con			
	Providing evidence from a medical practitioner to confirm that you are unable to travel alone on a bus for medical reasons. – see appendix A			

Sharing ir	formation with others					
worker)	here is someone else helping you with your application (such as a friend, relative, or support orker) and you are happy for them to deal with us on your behalf, please provide their name d contact details:					
_	I give my permission for Bristol City Council to share information about my bus pass application with:					
Their n	Their name:					
Their co	Their connection with you:					
Their te	elephone/email details:					
Privacy st	atement: what we do with your personal data					
In order for Bristol City Council to process your concessionary travel application we will need to collect and hold some of your personal details, including your name, address, date of birth, and for some types of travel passes- details of medical conditions. This information will never be used for any purpose other than to validate your application, produce your concessionary travel card, renew it or respond to any queries you may have. See www.bristol.gov.uk/about-our-website/privacy-and-processing-notices-for-resource-services for full details of how your data will be held and used.						
Declaration	on					
my circun medical p Please no	that all the information I have provided is correct. Instances that may affect my application and unders rofessional for further information required to ascerte that Bristol City Council cannot reimburse any femedical evidence.	stand tha tain my	at the Council may write to my eligibility for the scheme.			
Signed:		Date:				

What to do now				
To email:	Scan your completed form and send it along with your photograph, proof of your age and proof of your address to: bus.passes@bristol.gov.uk			
To post:	Send your completed form along with your photograph, and a copy to show proof of your age and address to: Concessionary Travel (CH), PO Box 3399, Bristol BS1 9NE			

We will aim to process your application within 5 working days of receiving all evidence. In some circumstances this will be delayed if we need to contact you or your medical professional.

Please send clear photocopies of evidence only, do not send us original documents.

If you need help with this form or English is not your first language and you need a translation or you would like this form in a different format, for example braille, audio, large print, easy English, BSL video or plain text please call 0117 922 2600 or email bus.passes@bristol.gov.uk

Your d	etails					
Title:		First name:		Surname:		
Date o	f Birth:					
Addres	ss:					
Post co	ode:					
Teleph	one:					
Email:						
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	l Professiona					
		nedical profes unity Psychiat	sional (e.g. General l ric Nurse)	Practitioner, F	lospital Cor	nsultant or
1 Jyonn			110 140100).			
Name	of health prof	essional				
	-					
						Your
Address			Official			
	Stamp			Stamp		
Compa	nion bus pas	SS				
Can th	e applicant o	nly use public	transport with the ass	sistance of a	companion?	?
			·		•	
	Yes No					
If Yes p			e disability and why tl	ne applicant r	equires a co	ompanion in order
Signed					Da	ate