Concessionary Travel Scheme
Bus Pass Application Form

WOKINGHAM BOROUGH COUNCIL

Please read the guidance on our website before completing the application.

Part 1 — Your Details

Title

First Name **Surname**

Date of Birth ☐☐ - ☐☐ - ☐☐☐☐ Telephone No.

Email address

Address

Post Code

Please tick which documents you are supplying

Proof of Date of Birth ☐ Passport ☐ Birth Certificate ☐ Driving Licence ☐ Printed prescription

Proof of Address ☐ Council Tax / Utility Bill ☐ Bank Statement ☐ Driving Licence

Photograph ☐ one recent, colour, passport size photograph

Part 2 — Reason for Applying

☐ reached pensionable age **(proceed to Part 4)**

☐ disability **(complete Parts 3 & 4)**

Part 3 — Eligibility categories (for disabled applicants only)

a) Please select the category you are applying under

Automatic eligibility

☐ Receive Higher Rate Mobility Component of DLA

☐ Score minimum 8 points for moving around or communicating verbally component of PIP

☐ Receive War Pensioner's Mobility Supplement

☐ Hold a valid Blue Badge issued by Wokingham Borough Council

Discretionary eligibility

☐ Blind or partially sighted

☐ Profoundly or severely deaf

☐ Without speech

☐ Without arms or long-term loss of the use of both arms

☐ Unable to walk

☐ Unable to drive for medical reasons

☐ Learning disability

b) **Evidence**

☐ I confirm I enclose a proof of my disability as detailed in the guidance on WBC website

c) **Companion bus pass (optional)**

☐ I wish to apply for a companion buss pass. I confirm I am unable to travel alone and enclose the evidence to prove it

Part 4 — Declaration - to be signed by all applicants

Please remember: It is an offence to deliberately give false or incomplete information.

I declare that the information given on this form is true and complete to the best of my knowledge. I agree that the information I have given may be shared within Wokingham Borough Council for the purpose of administering your application and, where necessary, with external agencies to prevent and detect fraud and/or misuse of public funds. For more information please visit our website: www.wokingham.gov.uk/council-and-meetings/information-and-data-protection/privacy-statement/

Signature of Applicant: _____ **Date** _____

Please send the completed application along with your documents to us by email: ConcessionaryTravel@wokingham.gov.uk or by post: Concessionary Travel, Wokingham Borough Council, Shute End, Wokingham, RG40 1BN