

**Please return to:** Blue Badge Service, Invicta House, County Hall, Maidstone, Kent, ME14 1XX

**Telephone:** 03000 416262, **Text Relay:** 18001 03000 416262

**Email:** bluebadgeteam@kent.gov.uk



Further Information is available at: [www.kent.gov.uk/bluebadge](http://www.kent.gov.uk/bluebadge).

This application form should only be used to replace a badge that has been Lost, Stolen, Damaged or if a current badge needs to be replaced due to a change of personal details. Badge expiry dates on any replacements will mirror your current badge expiry date.

## Replacement Blue Badge Application Form – Applicant Information

This application needs to contain information about the applicant (the person the badge is for), This should not be the details of anyone assisting them with their application.

<b>Title</b> (Mr, Mrs, Miss, Ms, Other):				<b>National Insurance Number</b>				
<b>First Names</b> (in full):				□ □ □ □ □ □ □ □ □ □				
<b>Surname:</b>								
<b>Surname at birth:</b>								
<b>Gender:</b>		Male <input type="checkbox"/> Female <input type="checkbox"/>		<b>Date of Birth</b> (DD/MM/YYYY):				
<b>Place of Birth:</b>	Town:			□ □ / □ □ / □ □ □ □ □ □				
	Country:							
<b>Email Address</b> (Required for Card Payments)								
<b>Applicant Home Address Details</b>			Postcode	□ □ □ □ □ □ □ □				
<b>Full Address</b>								
<b>Home Tel.</b>		□ □ □ □ □ □ □ □ □ □			<b>Mobile Tel.</b>		□ □ □ □ □ □ □ □ □ □ □ □	
<b>Photograph:</b> Please enclose a <u>recent</u> photograph of the applicant, taken within the last six months against a plain light background and showing the person's full face so that they can be easily identified. The photograph will be placed on the back of the badge and will not be visible when the badge is being displayed in the vehicle.  Please ensure that the applicant's name is on the back of the photograph. We check supplied photographs against any previous applications, and cannot accept photographs submitted for previous badges.								
<b>Badge fee: £10</b> You can pay by Credit / Debit Card or Cheque. Cash and postal orders are not accepted. To be able to pay by Credit / Debit card, you must provide us with a valid email address. We will contact you using this email address once we are ready to take payment for the badge. We are unable to complete credit or debit card transactions without a valid email address.  Payment by cheque must be provided with the initial application form. Application forms will be returned if you have indicated Cheque but have not included it, or if you do not provide a valid email address for card payments.								
<b>Payment Method</b>		Credit/Debit Card (must give email address for contact)					<input type="checkbox"/>	
		Cheque (to be made payable to Kent County Council)					<input type="checkbox"/>	

## Section 1 – Declarations and signatures

Please read the following declarations thoroughly as well as the Blue Badge privacy statement, which can be found at [www.kent.gov.uk/bluebadge](http://www.kent.gov.uk/bluebadge). Providing fraudulent information may result in prosecution and a fine.

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. Any medical information that you have supplied to support this application is deemed, under the Data Protection Act, to be “sensitive personal data” and will only be disclosed to third parties as necessary for the operation and administration of the Blue Badge scheme, and to other Government Departments or agencies, to validate proof of entitlement or as otherwise required by law.

1. **I 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 in this application form. I understand that I must promptly inform my local authority of any changes that may affect my entitlement to a badge.
2. **I confirm that** the photographs I have submitted with my application are a true likeness, taken within the last 6 months. I understand that, if my application is successful, I must not allow any other person to use the badge for their benefit and that I must only use the badge in accordance with the rules of the scheme as set out in the “Blue Badge scheme: rights and responsibilities in England” leaflet which will be sent to me with the badge.
3. **I understand** that I must not hold more than one valid Blue Badge at any time. I understand that the local authority may need to contact an accredited healthcare professional for the purpose of clarifying any information or documentation provided with this application form. I understand that I may be required to undertake an assessment with a healthcare professional who is independent of my existing care and treatment in order to determine my eligibility for a Blue Badge.

**Please provide your signature against the declarations in section 1 above. Applications will not be processed if this section is not completed.**

<b>Your signature</b>	
<b>Date of application</b> (DD/MM/YYYY)	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>Please print your name here</b>	

If you have signed on behalf of the applicant, please tell us the following:

Your name		Your relationship to the applicant	
Reason the applicant is unable to sign	Cognitive Impairment	<input type="checkbox"/>	
	Physical Impairment	<input type="checkbox"/>	
	Applicant is under 18	<input type="checkbox"/>	
	Other (please state in box)	<input type="checkbox"/>	

## Section 2 – Additional Information

### Proof of your address, dated within the last 12 months:

We need to check that you are a resident in this local authority area before we can process your application. Please select one of the following options and provide a **photocopy** of the original documentation where relevant. Original Documents will **not** be returned to applicants.

Please provided one of the following, bearing your name and address, dated within the last 12 months:

- Council Tax Bill
- Bank/Building Society statement
- Gas/Electricity/Water/Telephone Bill
- Benefit Letter (with Address shown)
- Driving Licence (if not used for Identity proof)
- Payslip (with Address shown)
- Pension/HMRC/Tax Credit Letter

### Proof of your identity:

We need to check your identity to reduce the potential for fraudulent applications for a Blue Badge. You must attach a **photocopy** of **one** of the following as proof of your identity. Do not send original documents as original documents will **not** be returned to applicants.

- Birth certificate / adoption certificate
- Marriage / Divorce certificate
- Civil Partnership/Dissolution certificate
- Valid Passport
- Valid driving licence (if not used for Address proof)

<b>Serial Number of Current Badge</b> (if known)		<b>Date of Current Badge Expiry</b> (if known)	
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### Section 3 – Reason for Replacement

Please indicate the reason why a replacement badge is required

- Badge has been Lost
- Badge has been Stolen Police Crime Number:
- Badge has been Damaged (you must include the damaged badge with this form)
- Other Reason Please state reason:

When was the badge last used? (if known)

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Where was the badge last used? (if known)

**Please explain in detail why the badge requires replacement**

**If Applicable, what actions have you taken to try and recover your badge?**

Please ensure you have enclosed all of the documents listed below. Please also ensure that you have included sufficient postage on the envelope. If you are unsure of the correct postage, please speak to the Post Office.

**We have provided a checklist below to help remind you of what you need to enclose**

- A copy of proof of your address, dated within the last 12 months.
- A copy of proof of your identity.
- A photograph
- Your damaged badge (if appropriate)
- An email address for Credit/Debit card payment communication  
(If this payment method has been selected)
- £10 Cheque (if this payment method has been selected)

Badge replacements will be issued within 5 working days of receipt of a complete application form and all required documents.

# Blue Badge Application Form – Additional Guidance Notes

The badge is for your use and benefit only. It must only be displayed if you are travelling in the vehicle as a driver or passenger. You should not use the badge to allow non-disabled people to take advantage of the benefits while you sit in the car.

Misuse of the badge could lead to a £1,000 fine and confiscation of the badge.

## Payments

Payment for the Blue Badge may be by Credit/Debit Card or Cheque. Cheques must be made payable to Kent County Council.

## Photograph

Applicant photographs should be similar to those required for passports, but do not need to be taken by a professional or in a photograph booth. These can be taken with a digital camera or smartphone and printed as a high quality image. To meet our requirements, photographs must:

- Show you on your own
- Be taken within the last 6 months
- Be in colour, not black and white
- Be clear and in sharp focus, with a clear difference between your face and the background
- Be taken against a plain light background
- Be of you forward facing and looking straight at the camera
- Not be torn, creased or marked
- Be printed as a high quality image
- Show your full head, without any head covering, unless you wear one for religious beliefs or medical reasons.
- Be a close-up of your head and shoulders.

## Section 1 – Declarations and signatures

A local authority may refuse to issue a badge if they have reason to believe that the applicant is not who they claim to be or that the badge would be used by someone other than the person to whom it has been issued.

## Processing Times

Please note, upon receipt of a fully completed application form and all relevant documentation, your replacement application form will be processed within 5 working days.

Applicants who do not send all relevant documentation, or do not complete the required sections on the application form will have the application form returned to them for full completion. The application cannot be processed until all documentation is received. This will delay your application.

## Information for All Applicants

Please note, any visitors to our Invicta House address will not be seen unless a prior appointment has been made.

If you require assistance filling out this form, you can attend your local Gateway, these are located throughout Kent. Care Navigators are also available throughout Kent and can assist with multiple types of care and benefit enquiries. The details for your local care navigator can be found on the Kent County Council Website, [www.kent.gov.uk](http://www.kent.gov.uk). Alternatively, there are number of other organisations who may be able to assist you with the completion of this form, including (but not limited to) Age UK, Kent Association of the Blind and the Citizens Advice Bureau.