BLUE BADGE PARKING SCHEME - APPLICATION FORM						
Road Traffic (Disabled Persons) (Parking) (Jersey) Order 2002						
1.	1. Please complete the form in <b>BLOCK CAPITAL</b> letters and in ink.					
2.	Only people with the following will be eligible for a Blue Badge:					
	i) Have a permanent and substantial impairment which causes inability to walk or very considerable difficulty in walking; or					
	ii) Are registered with EYECAN, or have a certificate from that Society to the effect that you are blind.					
	As a guide to what is meant by 'very considerable difficulty in walking', a qualifying person who was capable of walking un need to rest after walking 100m. The intention is that only the very severely impaired will qualify under these conditions.					
	Badges will only be issued to people who would otherwise find it impossible to visit shops, public buildings or other places.					
3.	People with temporary impairments, such as broken leg, will not qualify for badges.					
4.	Please submit your application form to the Connétable of St Helier, PO Box 50, Town Hall, St Helier, Jersey JE4 8PA, providing:					
	<ul> <li>i) the fee of £15 - cash, cheque or credit/debit card (<i>Please note cheques payable to the Parish of St Helier</i>)</li> <li>ii) two passport photographs, each signed on the back by the applicant.</li> <li>iii) your current Blue Badge, if you have one. (<i>Please allow 7 working days for the processing of all applications</i>)</li> </ul>					
1. NAME AND ADDRESS OF APPLICANT						
Surname				Title		
Forenames (in full)				Date of birth:		
Parish	1:		Postcode:			
Telephone:			Email:			
If this is an application to renew your Dive Dedre places state:						
If this is an application to renew your Blue Badge please state: Expiry Date of previous badge:			Serial number of previous badge:			
2. IMPAIRMENT: COMPLETE EITHER A or B						
Α.		e a permanent and substantial impairment which is inability to walk or very considerable difficulty in ig	YES NO HISTORY NO HISTORY STATES NO HISTORY STATES NO HISTORY STATES TO SECTION 3.			
B.		egistered with EYECAN, or I have a certificate hat Society to the effect that I am blind	YES NO HISTORY NO HISTORY NO HISTORY AND A SECTION 4 and provide the necessary documentation to complete your application.			
3. COMPLETE THIS PART ONLY IF YOU CONSIDER THAT YOU HAVE A PERMANENT AND SUBSTANTIAL IMPAIRMENT WHICH CAUSES INABILITY TO WALK OR VERY CONSIDERABLE DIFFICULTY IN WALKING**						
1. Wh	at is yo	ur impairment?				
2. What is the maximum distance you can walk without stopping, severe discomfort, or help from another person?			Metres			
3. Do you regularly use a walking aid? YES please state the type of aid:			NO			
Speci	men si	ignature of applicant				

## 4. DECLARATION BY THE APPLICANT

I hereby declare, conscientiously believing it to be true, that I am an impaired person suffering from a permanent impairment that I have accurately described on this application form and I apply for a Blue Badge subject to the conditions specified in the Road Traffic (Disabled Persons) (Parking) (Jersey) Order 2002.

Signature:

Date:

\*\* if you have an impairment under Section 3 please hand the Medical Certificate Form to your doctor for completion.

## **BLUE BADGE PARKING SCHEME - MEDICAL CERTIFICATE FORM** DOCTOR'S DETAILS Doctor's name: Doctors Address: Email: Telephone: **APPLICANT'S DETAILS** Name (in full) Date of birth: Address: DOCTOR'S CERTIFICATION delete whichever is not applicable I confirm and certify that the applicant named above has, as declared on their application form a permanent and substantial impairment which causes inability to walk or very considerable difficulty in walking and is eligible for a Blue Badge in accordance with the Road Traffic (Disabled Persons) (Parking) (Jersey) Order 2002. OR I am unable to confirm or certify that the applicant named above has the condition declared on their application form and the applicant is therefore not eligible for a Blue Badge in accordance with the Road Traffic (Disabled Persons) (Parking) (Jersey) Order 2002. Remarks:.... Doctor's Signature: Official stamp of Doctor: Date: **OFFICE USE ONLY** Date received: Approved: Yes/No Comments (if any) Received by: Date approved: £15 Yes/No — Cash/Cheque/Card 2 photos - Yes/No Signed by Old Badge if required - Yes/No Money and photos returned date (if application refused) The parish is a 'controller' under the Data Protection (Jersey) Law 2018 and we process and hold your information in order to issue you with a valid blue badge in accordance with our statutory obligations. We may not be able to provide you with a blue badge if we do not have enough information or your permission to use that information. Below, we explain what we collect; how we will use your information; and what your rights are

Data we collect: We have collected your personal details (name; title; address; contact details; photo; signature; DOB; nature of disability) if you have a permanent and substantial disability and we collect a certificate from your medical practitioner or Eyecan. We do this in order to issue you with a Blue Badge in accordance with the Road Traffic (Disabled Persons) (Badges for Motor Vehicles) (Jersey) Order 1982, and , where necessary, for law enforcement functions or to protect individuals from harm or injury. How we use your information: We will endeavour to keep your information accurate and up to date, although we rely on you to inform us of any changes in accordance with the Road Traffic (Jersey) Law 1956. We do not keep your information for longer than is necessary. The Parish retains your application form for no more than 5 years from the date of issue. We will not pass any personal data on to anyone outside the Government of Jersey and other Parishes other than those who either process information on our behalf or because of a legal requirement, such as law enforcement agencies and driver licensing authorities in other jurisdictions, and we will only do so, where possible, after we have ensured that sufficient steps have been taken by the recipient to protect your personal data. We do not process your information overseas using web services that are hosted outside the European Economic Area. At no time will your information be passed to organisations for marketing or sales purposes or for any commercial use without your prior express consent.

Your rights: You can ask us to stop processing your information; to correct or amend your information; for a copy of the information we hold about you. You can also request that the processing of your personal data is restricted (in certain circumstances) and withdraw your consent to the processing of your information.

You can complain to us about the way your information is being used by contacting us at the Town Hall on 811733 or by email at townhall@sthelier.je). Alternatively you can complain to the Information Commissioner by emailing enquiries@dataci.org.