

**Please complete in BLOCK CAPITALS**

Title (Mr, Miss, Mrs, Ms, Other):			
First Name:			
Surname:			
Date of Birth:	<input type="text"/>	<input type="checkbox"/> Male	<input type="checkbox"/> Female <input type="checkbox"/> Other
National Insurance No:			
Address (including postcode):			
Telephone Number			
Please tick to confirm you are applying as you are registered as Severely Sight Impaired (blind) or Sight Impaired (partially sighted).			<input type="checkbox"/>
If you are registered blind or partially sighted with South Gloucestershire Council please provide your registration number here:			
If you are not registered with South Gloucestershire Council, please enclose a copy of a Certificate of Vision Impairment (CVI) or a BD8 form, signed by a Consultant Ophthalmologist that states that you are blind or partially sighted.			
<p><b>Please read the declarations on the next page before signing.</b></p> <p>Signed by Applicant; or Signed by third party (if applicable)</p>			
Date:			
<p>Third Party Consent If you would like us to be able to discuss your application with a third party please give their details.</p>	<p>Name:</p> <p>Relationship:</p> <p>Home Tel No: <span style="float: right;">Mobile Tel No:</span></p>		

Please see the next page regarding supporting evidence required.

Along with your application form, you will need to provide a copy of proof of your identity and a passport sized photograph.

Your proof of identity can be one of the following:

A birth / adoption certificate; marriage / divorce certificate; passport; civil partnership / dissolution certificate; or a valid driving licence.

Our One Stops Shop staff have the facility to take a photograph of you and send it directly to the Concessionary Travel team.

Please email or scan this form to [contravel@southglos.gov.uk](mailto:contravel@southglos.gov.uk)

**Or post this form to South Gloucestershire Council, Concessionary Travel, PO Box 1953,**

**Bristol BS37 0DB. Contact Telephone Number: 01454 868004**

### **Declarations – Please read before signing**

I declare that all the information I have provided is correct.

I understand that I must inform South Gloucestershire Council of any changes that may affect my entitlement to a Concessionary Diamond Travelcard as soon as they happen. This includes change of names and/or address and if the travelcard holder is no longer eligible.

I am a permanent resident of South Gloucestershire and I accept the conditions of use.

I understand that if I give information that is incorrect or incomplete or if I fail to report changes that might affect my entitlement as soon as they happen or if I allow other persons to misuse the travelcard this may result in the travelcard being withdrawn by South Gloucestershire Council and I, or those who have misused the travelcard, may be prosecuted.

**Data Protection Act 2018.** The Council is under a duty to protect the public funds it administers, and will use the information you have provided on this form for the prevention and detection of fraud. It will also share this information with other bodies responsible for auditing or administering public funds and will use it for comparison across the council and with external organisations for the prevention and detection of fraud.