Disabled Persons Concessionary Bus Pass
Eligibility and supporting documentation required for application

- The table below indicates the type of disability you may apply under.
- Please ensure that the correct proof of disability is enclosed with your completed application.
- In all cases more details may be requested. It is the applicant’s responsibility to provide proof of eligible disability.
- Nottinghamshire County Council will not contact your Medical Professional to obtain information for you.
- Please note that you may be required to attend a Medical Assessment in support of your application.
- Nottinghamshire County Council will not be responsible for any costs incurred as part of the application process.
- Please DO NOT send original documents with your application.

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<tr>
<th>Disability</th>
<th>You will be eligible if:</th>
<th>Proving that you are eligible:</th>
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| 1 I am registered/eligible for registration as blind or partially sighted. | • You are registered, or entitled to be registered, as partially sighted, sight impaired or severely sight impaired / blind. | • Certificate of Visual Impairment (CVI) – this can be obtained from an eye specialist i.e. ophthalmologist showing evidence of being partially sighted, sight impaired or severely sight impaired / blind.  
• For a veteran, the ‘Reasons for Decision’ letter under the Armed Forces Compensation Scheme. |
| 2 I am registered/eligible for registration as profoundly or severely deaf. | • You are entitled to be registered as profoundly or severely deaf i.e. greater than 70 dBHL, in both ears. | • An audiogram or signed letter from a Medical Professional specifying the level of hearing loss which demonstrates that you have hearing loss of more than 70dBHL or worse, in both ears.  
• For a veteran, the ‘Reasons for Decision’ letter under the Armed Forces Compensation Scheme. |
| 3 I am registered/eligible for registration as a person without speech. | • You are registered, or entitled to be registered, as without speech.  
• You are unable to communicate orally in any language i.e. you are unable to make clear basic oral requests or you are unable to ask specific questions to clarify instructions. | • A letter from a Medical Professional.  
• Personal Independent Payment (PIP) with 8 points or more for the Communicating Verbally activity.  
• Child – Education Healthcare Plan.  
• The application form signed by a medical professional. |
| 4 I have a disability / have suffered an injury, which has a substantial and long-term adverse effect on my ability to walk. | • You are unable to walk at all.  
• You are unable to walk more than 64 metres without severe discomfort.  
• It takes an excessive amount of time to walk a short distance e.g. 5 minutes to walk 100 metres.  
• The exertion required to walk would constitute a danger to your life or would be likely to lead to serious deterioration in your health. | • Disability Living Allowance for mobility at higher rate – please ensure this states at what level this is received and dated within the last 12 months, or  
• Personal Independent Payment with 8 points or more for the ‘moving around’ activity and dated within the last 12 months.  
• War Pensioners Mobility Supplement dated within the last 12 months.  
• Evidence from a Medical Professional that your walking ability is long – term and substantially impaired stating that you cannot walk more than 64 metres without severe discomfort.  
• Evidence that you have a disabled parking badge (blue badge). |
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| **5** I am without the use of both arms (through loss of limbs) or long-term use of both arms. | • You have both arms but unable to use them to carry out day to day tasks.  
• You have a limb reduction deficiency of both arms  
• You have a bilateral upper limb amputation  
• You have a medical condition (muscular dystrophy, spinal cord injury, motor neurone disease or condition of comparable severity) which affects the use of your arms. | • A medical assessment may be required.  
• A letter from a Medical Professional.  
• A letter from the NHS Artificial Limb Unit.  
• The application form signed by a medical professional. |
| **6** I have a learning disability, that is, a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning. | • You have a learning disability which includes significant impairment of intelligence AND social functioning.  
• This includes Downs Syndrome, some autism spectrum disorders and other learning disabilities which mean that you have difficulty in understanding new and complex information, have difficulty learning new skills and may not be able to cope independently.  
• Your condition must have commenced prior to the age of 16 years.  
(The Transport Act 2000 defines learning disability as 'a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning'.) | • Proof of registration with Social Services  
• If not on the Local Authorities register, medical evidence to support a difficulty in learning new skills or being unable to cope independently.  
• For children – a letter from the head teacher at the special needs school confirming eligibility as defined or ECH plan.  
• Personal independent Payment (PIP) with 8 points or more for the Communicating Verbally activity or  
• Disabled Living Allowance for mobility at higher rate – please ensure this states at what level this is received and dated within the last 12 months. |
| **7** I have been refused a driving licence (or had it withdrawn) on medical grounds under part III, Section 92 of the Road Traffic Act 1988. | • You have had an epileptic episode within the last 12 months.  
• You have a history of epileptic episodes when asleep and have had one whilst awake within the last three years.  
• You are diabetic and have suffered a hypoglycaemic episode requiring the assistance of another person within the last 12 months.  
• You have a severe mental disorder which means you would be refused a driving licence or have your driving licence revoked.  
• You have another medical condition which means that you would be refused a driving licence or have your driving licence revoked. | • A medical assessment may be required.  
• A current letter from the DVLA indicating refusal for a minimum period of 12 months.  
• A letter from a Medical Professional indicating a driving licence would be refused.  
• In receipt of Disability Living Allowance at higher rate for care component (severe mental health).  
• People who would be refused a driving licence (or have had it withdrawn) due to alcohol or drugs misuse are not eligible for a disabled pass.  
• The application form signed by a medical professional. |