



Application for a disabled person's national bus travel pass.

Please complete using BLACK or BLUE INK and BLOCK CAPITALS.

Please attach a recent passport size photo here

PLEASE NOTE: paper applications are processed within 21 working days, online applications in 7 working days. To apply online go to www.travelsouthyorkshire.com/ticketspasses

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="text"/>	
Forename(s) <input type="text"/>				Surname <input type="text"/>		
Date of Birth <input type="text"/>			<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address <input type="text"/>						
<input type="text"/>			Postcode <input type="text"/>	Email address <input type="text"/>		

Proof of Age (please provide ONE of the below)

Passport or driving licence number

(At the bottom of your passport photo page there are two lines containing chevrons (>>). We require the first 28 characters from the bottom line.)

Other (If you can't provide a driver's licence or passport number, please enclose a copy* of some other official document that tells us your date of birth.)

What do you want us to do?

- ISSUE me with a disabled person's pass, I've never had one before, I enclose a copy of my proof of entitlement***
- RENEW my disabled person's pass, it's expired (or is about to), I enclose a copy of my proof of entitlement***
- REPLACE my disabled person's pass, I've lost or broken it and enclose a cheque/postal order for £7 (made out to SYPTE)**
- REPLACE my disabled person's pass, it was stolen, here is the crime reference number**
- OTHER (please state)**

*Your proof of entitlement may be:

- A DLA letter showing that you've been awarded Higher Rate Mobility Component,
- A letter from DWP showing that you've been awarded PIP with an award of at least 8 points in either 'Moving Around' or 'Communicating Verbally',
- Proof that you receive War Pensioners Mobility Supplement,
- Proof that you have been awarded a 'Blue Badge',
- A Mental Health Transport Concessions form signed and stamped by your psychiatrist (Barnsley only), or
- A letter of entitlement from your district council

*Photocopies only. DO NOT enclose originals.

Declaration:

I confirm that to the best of my knowledge the information on this application is true and complete. I understand that in the event of this pass being lost, there will be a charge to replace it.

Signature

Date

Post your completed form to:

Contact Centre, SYPTE, 11 Broad Street West, Sheffield S1 2BQ

We would like to keep your contact details to send you information on public transport, travel cards/ticketing, promotions or research activities. If you would prefer not to be sent such information please tick the box.

Your information is collected on behalf of the South Yorkshire Passenger Transport Executive. The information will be held and processed by the South Yorkshire Passenger Transport Executive. Please note we will not use your contact information for any other purposes or pass your information on to any organisation outside of the Travel South Yorkshire partnership. 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 the information with other bodies responsible for auditing or administering public funds for these purposes.

For further information, see sypete.co.uk/privacy-policy or contact the Information Officer.

OFFICE USE ONLY			
Cash/Cheque/Postal Order	Amount		
Address proof?	Yes	No	Initials
DOB proof?	Yes	No	Initials
Photograph Included?	Yes	No	Initials
Disability proof?	Yes	No	Initials
+Carer (MOB ONLY)	Yes	No	
Renew or Refer	Initials		
Pass expiry (MOB ONLY)	Date		



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