

# London Dial-a-Ride Application Form

For Office use only.  
Membership no.

Eligibility	<input type="text" value="A"/>	<input type="text" value="B"/>
Essential Escort	<input type="text" value="Y"/>	<input type="text" value="N"/>
Media	<input type="text" value="U"/>	<input type="text" value="B"/>
	<input type="text" value="CD"/>	<input type="text" value="EM"/>
Mailing	<input type="text" value="M"/>	<input type="text" value="AC"/>

Please read the guidance notes carefully before completing the form. If you need help, an alternative format or a telephone-based language translator please call us on **0343 222 7777**.

## Part One – Personal details of the applicant

### Everyone must complete this section.

Please include your mobile phone number and email address if you have them.

Title: Mr  Mrs  Miss  Ms  Other:

Last name:

First name(s):

Address:

Postcode:  Date of birth:

Home phone:  Mobile:

Email address:

Please provide any other information about where you live that might help our drivers, for example: 'I live on the 10th floor'.

Which London Borough do you live in?

TfL restricted (when completed) May 2018

## Part One – Personal details of the applicant, continued

### Alternative contact details.

If you want all correspondence (such as the membership pack and members newsletters) sent to someone other than the applicant detailed overleaf please give the alternative mailing details below.

Title: Mr  Mrs  Miss  Ms  Other:

Last name:

First name(s):

Address:

Postcode:

Email address:

Relationship to the applicant:

### If you are completing this form on behalf of someone else:

One of the special features of Dial-a-Ride is the door-to-door assistance we provide. However, unlike some council-provided door-to-door services, our buses are not staffed with passenger escorts, so there are some differences in the level of assistance we are able to give. **Our drivers sometimes have to leave passengers alone on the bus for up to 10 minutes** with the doors open whilst they go to the home of another passenger to help them to or from the vehicle.

**This means that someone who needs to be supervised must always travel with another person (an ‘essential escort’).**

If you are the carer of someone who cannot be left unattended on a bus, for example because they are experiencing confusion, memory loss or at risk of exhibiting disruptive behaviour whilst on their journey or when they arrive at their destination, and who will therefore need to travel with an ‘essential escort’, please let us know by indicating on page 9 of this form that the applicant must be supervised when travelling with Dial-a-Ride.

## Part Two – Assessment of eligibility

### Section 2a Automatic eligibility

This section is for people who are automatically eligible for the Dial-a-Ride service.

**You will need to provide a photocopy of a relevant document to support your application.**

Please tick as many boxes as apply **but you only need to provide evidence for one** (please see page 2 of the guidance notes). Choose the one that is easiest for you to provide.

I am a member of Taxicard

My Taxicard number is

I receive Higher Rate Mobility Component of Disability Living Allowance

I receive the Standard or Enhanced Mobility Rate of the Personal Independence Payment (PIP)

I am registered blind/partially sighted

I receive Higher Rate Attendance Allowance

I receive Mobility Supplement of War Pension

I am aged 85 or over

**Please do not send original documents**

## Part Two – Assessment of eligibility, continued

### Section 2b Non-automatic eligibility

This section is for people who are not automatically eligible for the Dial-a-Ride service and will be used by our trained assessors to review your eligibility.

**You will need to provide some written proof from a healthcare professional of the mobility problems that you describe below with your application form.**

Further details can be found in the guidance notes.

**In the last three months, how often have you used:**

	Often	Sometimes	Never
Buses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Underground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Docklands Light Railway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
London Tramlink	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Choose the statement that best describes your abilities today:**

I don't have any difficulty standing

I have difficulty standing

I cannot stand

If you have difficulty in standing, how long are you able to stand?

What prevents you from standing longer?

## Part Two – Assessment of eligibility, receipt of other benefits, support

### Section 2c Non-automatic eligibility

This section is for people who are not automatically eligible for the Dial-a-Ride service and will be used by our trained assessors to review your eligibility.

**You will need to provide photocopies of relevant documents to support your application.**

Please tick as many boxes as apply.

**Do you receive any of the following?**

	Medium Rate	Lower Rate
Disability Living Allowance (Care)	<input type="checkbox"/>	<input type="checkbox"/>
Disability Living Allowance (Mobility)	<input type="checkbox"/>	<input type="checkbox"/>
Attendance Allowance	<input type="checkbox"/>	<input type="checkbox"/>
	Enhanced	Standard
Personal Independence Payment (Daily Living)	<input type="checkbox"/>	<input type="checkbox"/>

**Do you have adaptations or aids provided/fitted to your home?**

Yes No

If yes, please explain:

<input type="checkbox"/>	<input type="checkbox"/>
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**Do you receive any other form of benefits or care?**

Yes No

If yes, please explain:

<input type="checkbox"/>	<input type="checkbox"/>
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**Part Three - To be completed by all applicants**

**Please tell us about any existing long-term condition or disability that you live with and how it affects your mobility.**


**Please explain how your mobility problems make it difficult for you to use public transport. Include as many factors as you feel are important (you can continue on a separate sheet if you like).**


This information will be used by Dial-a-Ride for all applicants to help us to take into account your personal accessibility needs when you travel with us. If you are not automatically eligible our assessors will also use this information to help confirm your eligibility, in addition to the information you have provided in Section 2b and c.

**When travelling with Dial-a-Ride, will you be using:**

	Always	Sometimes	Never	Make and model
A manual wheelchair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
An electric wheelchair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
A scooter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

**Please note that you cannot travel on our vehicles in a ‘sports style’ wheelchair. Please note that we cannot process your application form if you have not provided us with the make and model of your wheelchair.**

**Does your wheelchair/scooter have any non-standard features or attachments, or any other adaptations we might need to know about?** For example: extended footrests, tray, oxygen bottle. **Is the wheelchair/scooter very large or is it tailor-made?** Please give details.

  
  
  

**If a healthcare professional advised you to get your wheelchair or scooter please give their name and professional position below.**

**Part Three – To be completed by all applicants**

**Do you:**

Yes

No

Weigh more than 16st (103kg)?

**When travelling with Dial-a-Ride, will you be using:**

Always

Sometimes

Never

A walking frame

Sticks or crutches

If a healthcare professional advised you to get your walking aid please give their name and professional position below:

**Will you be travelling with:**

Always

Sometimes

Never

A shopping trolley

A guide dog

**Can you get into:**

Yes

Not sure

No

A saloon car

A people carrier style car

A London black taxi

**Part Three – To be completed by all applicants**

**Is there any other information you would like us to know when arranging your transport?**


**Emergency contact details:**

Is there someone we can contact on your behalf in case there is a problem with your journey and we cannot contact you directly (eg family member, friend, neighbour)?

Contact name:	
Home phone number:	
Mobile (if they have one):	
Relationship to you:	

## Part Three – To be completed by all applicants

### Sending you information about the service

In what format would you prefer to receive information about the service?

Normal print  Large print  Email   
USB/memory stick  Audio CD  Braille

If you have chosen email or USB/memory stick, we will provide information in Word, PDF and MP3 format.

If you have chosen to receive information by email please ensure you have included your email address on the front page

Request for any other format (please specify)

### Proof of identity

You must provide proof of your identity to support your application.

Please enclose a **photocopy** of one of these documents

Driving licence  Passport  Marriage certificate

NHS medical card or GP letter

Statutory declaration of change of name

Asylum registration card (ARC) or standard acknowledgement letter (SAL)

Birth certificate (Note: if you are married and have changed your name, you cannot use your birth certificate as proof of identity)

**Please do not send original documents**

## How did you hear about Dial-a-Ride?

To help us monitor the best ways in which we can make people aware of the Dial-a-Ride service we would be grateful if you could indicate below how you heard about the service.

### Health/Social Services professional

Nurse/Doctor  Social worker  Occupational therapist

Other (please specify)

### Group or organisation

Older people's organisation (please specify)

Disabled people's organisation (please specify)

War Veterans' association (please specify)

Other (please specify)

### Transport for London/Dial-a-Ride publicity or contact

Dial-a-Ride bus  Dial-a-Ride driver  Dial-a-Ride staff (other)

Dial-a-Ride or Transport for London speaker at a meeting

Transport for London pension fund

Other (please specify)

### Other

Existing Dial-a-Ride customer

Department for Work and Pensions

Local council

Other (please specify)

## Privacy notice

Transport for London (TfL), its subsidiaries and service providers will use your personal information for the purposes of customer services and administration (including assessing and reviewing your eligibility to receive the Dial-a-Ride service), the provision of travel-related information, customer research and fraud prevention. By providing us with your personal data, including sensitive personal data about your health, you consent to the collection and use of any information you provide in accordance with the purposes listed above. Your personal information will be properly safeguarded and processed in accordance with the requirements of privacy and data protection legislation.

In certain circumstances, TfL may also share your personal information with the police and other law enforcement agencies for the purposes of the prevention or detection of crime.

### Declaration

Please sign and date the following declaration:

I declare that the information given is true in all respects and that I am unable (or almost unable) to use public transport services including buses, trams, London Overground and Underground trains, some or all of the time. If any changes occur to my mobility needs I will let Dial-a-Ride know immediately.

Signed:

Date:

If you cannot sign the declaration yourself, your relative/spouse/person of authority/friend can sign it below on your behalf. If you are under 16 years of age, your parent or legal guardian must sign this form below.

Signature:

Date:

Print name:

Relationship to you:

Please return this form to:

London Dial-a-Ride  
PO Box 68799  
London  
SE1P 4RD

### Final checklist

Have you included your proof of automatic eligibility if you are applying under this criteria (page 3 of application form and page 2 of the guidance notes)?

Have you included your proof from a healthcare professional for an application under non-automatic eligibility? (see page 3 of guidance notes)

Have you included your proof of all benefits received for an application under non-automatic eligibility (see page 5 of the application form and page 3 of the guidance notes)?

Have you provided us with the make and model of your wheelchair?

Have you included your proof of identity (page 10 of application form)?

Have you signed the declaration on page 12?

Have you used the correct postage? (An A4 envelope needs a 'large' first class stamp or it will not be delivered by the Post Office)

**Please now turn over to complete the Equal opportunities monitoring form**



## Equal opportunities monitoring

Dial-a-Ride aims to provide its services in a fair and equal way to everybody in the community. To help us with this, we ask you to please complete this section of the form. The information you provide will only be used for the planning of services and will not be reproduced in any way that enables you to be identified. This information will be separated from your application form when we receive it and will not be used as part of the application process.

**Are you:**

Male

Female

**Main ethnic group**

**Cultural background**

**White**

British

Irish

Any other white background (please specify):

**Mixed**

White and black Caribbean

White and Asian

White and black African

Any other mixed background (please specify):

**Asian or Asian British**

Indian

Pakistani

Bangladeshi

Any other asian background (please specify):

**Black or black British**

African

Caribbean

Any other black background (please specify):

**Chinese or other ethnic Group**

Chinese

Any other ethnic group (please specify):

**Prefer not to say**

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