

Accessible Parking Permit Application Form - New & Renew

Ref number:

How to apply for a permit

Renewing an existing permit or making an application for an Accessible Parking Permit can be made online at www.accessibleparking.vic.gov.au or by completing this form. Start by selecting what you wish to do in Section 1 and then complete the relevant sections. Applications for new permits and renewal of existing permits require a functional assessment to be completed by a general practitioner (GP) or occupational therapist (OT) (section 7).

If you are seeking a permit on the basis of a cognitive, behavioural or neurological impairment you must be assessed by your GP (not an occupational therapist), who may refer you to a specialist practitioner. Once this application form is complete, mail, email or deliver it in person to your local council who will compete your application.

Allow 10 to 15 days to receive the outcome of your application via mail. If successful it will include a permit.

This application form is for applicants who are individuals only. Renewing or making an application for an Accessible Parking Permit for an organisation, can be made online at www.accessibleparking.vic.gov.au.

To find out more about the Accessible Parking Permit Scheme visit www.vicroads.vic.gov.au/app.

OFFICE USE: Once the information has been entered into the online platform and checked for accuracy, this form should be imaged and securely destroyed, consistent with applicable public records requirements. It should not be filed or archived in hard copy.

1. I want to (select one)

Apply for an Accessible Parking Permit	<input type="checkbox"/>	Complete sections 2 and 4 and have your GP or OT complete section 7
Renew an existing Accessible Parking or Disabled Parking Permit	<input type="checkbox"/>	Complete sections 2, 3 and 4 and have your GP or OT complete section 7

Data entry sequence key: council administration only	
New application	2, 4, 7
Renewal	3, 2, 4, 7

2. Personal details

2.1 Applicant details – this section must be completed by the applicant or their nominated representative. *The applicant is the person with impaired mobility.*

First name

Middle name(s) (optional)

Family name

Date of birth

Sex M (Male) F (Female) X (Indeterminate/Intersex/Unspecified)



Accessible Parking Permits are issued by Victorian local governments using the Accessible Parking Permit Scheme. The Victorian state government, through VicRoads, provides technology support to councils to coordinate permits at a state level. All applications must be made to your local municipal council.

Accessible Parking Permit Application Form - New & Renew

Contact details

Updates relating to your application will be sent to the mobile number you provide.

Email address (optional)

Mobile number

(mobile numbers are used for SMS communication regarding your application)

Landline

Residential address

This must be your current home address, not a PO Box. It must be located in Victoria.

Street address

Suburb

Postcode

Mailing address *(if different from residential address)*

Mailing address can be a PO Box or Locked bag.

Street address

Suburb

Postcode

Hold driver's licence or learner permit?

 Yes No

Accessible Parking Permit Application Form - New & Renew

2.2 Nominated representative details –

The nominated representative is the person who is assisting the applicant complete this form (to be completed by nominated representative).

First name

Family name

Relationship to the applicant Carer Family Friend Other

Email address (optional)

Mobile number

2.3 Outcome delivery preference

How do you want to receive the outcome of this application?

- I (or my nominated representative) will pick up from my local council
- Send to applicant residential address
- Send to applicant mailing address

Please note that when collecting the permit from council the applicant must provide proof of identity and where a nominated representative is to pick up the permit on the applicants behalf, they will need to provide proof of identity as well as provide evidence to council that they have been authorised by the applicant to collect the permit. To find out more visit www.vicroads.vic.gov.au/app

3. Current Permit Details – (renewal only) – Only complete this section if renewing an existing permit

Important - If you are renewing a Blue (Category 1) or Green (Category 2) permit please note that since you applied for your permit the Disability Parking Permit Scheme has changed. As the eligibility criteria and application process has been refined your eligibility may have changed and when you renew you could receive a different permit type or no longer be eligible for a permit. To find out more about the Accessible Parking Permit Scheme visit www.vicroads.vic.gov.au/app.

Permit number

Permit type

- ADP (Victoria) Double Time Category 1 (old) Category 2 (old)



Permit expiry date

Issuing council

Accessible Parking Permit Application Form - New & Renew

4. Declaration

Applicant

By proceeding with this application, you consent to Council and the Department of Transport collecting your personal or medical information provided in and with the application ('data'). The data may be used to determine your eligibility for an Accessible Parking Permit. There may be a circumstance where your medical practitioner or occupational therapist submits data on your behalf for which you give consent.

Nominated representative

If you are applying on behalf of the applicant, by proceeding with this application, you warrant that:
you have legal authority to act on the applicant's behalf; and
you can produce evidence of this if required.

On behalf of yourself and the applicant, you consent to Council and the Department of Transport collecting personal or medical information provided in and with this application ('data'). The data might be used to determine the applicant's eligibility for an Accessible Parking Permit. There may be a circumstance where the applicant's general medical practitioner or occupational therapist submits data on the applicant's behalf for which you give consent on the applicant's behalf.

Name

Signature

Date

I am the applicant

I am the applicant's nominated representative

Accessible Parking Permit Application Form - New & Renew

5. Conditions of Use

The following Accessible Parking Permits are issued subject to the general conditions and permit-specific conditions outlined below:

- Australian Disability Parking Permit (for individuals)
- Victorian Double Time Accessible Parking Permit (for individuals)

General conditions

These general conditions apply to all Accessible Parking Permits:

- The permit may be attached to the vehicle by any method that does not obscure any of the permit details or the vision of the driver when the vehicle is in motion.
- The permit is valid until the end of the date of expiry, unless it is cancelled.
- The permit must not be transferred, reproduced, copied, defaced, altered or destroyed.
- The details on the permit (e.g. permit number, expiry date, people with disabilities symbol) must be legible and unaltered.
- The permit may be confiscated by an authorised officer and/or cancelled by council for misuse or breach of any of the Conditions of Use.

Permit-specific conditions

Permit-specific conditions apply to Accessible Parking Permits as follows:

Australian Disability Parking Permit (for individuals)

- A person is only entitled to one permit.
- The permit must only be displayed when the permit holder is using (parking) the vehicle.
- The permit must be clearly displayed so the expiry date and permit number are visible from the exterior of the vehicle.
- The permit entitles the permit holder to park in a parking bay marked with the people with disabilities symbol.
- The permit entitles the permit holder to park for up to twice the maximum allowable time on a length of road or in an area, to which a permissive parking sign applies.
- When displaying the permit and parked on a length of road, or area, where a fee applies, the fee must be paid according to the duration of the intended stay, up to the maximum amount payable.
- The permit can be used in another State or Territory, in accordance with the relevant local parking rules.

Victorian Double Time Permit (for individuals)

- A person is only entitled to one permit.
- The permit must only be displayed when the permit holder is using (parking) the vehicle.
- The permit must be clearly displayed so the expiry date and permit number are visible from the exterior of the vehicle.
- The permit only entitles the permit holder to park for up to twice the maximum allowable time on a length of road, or in an area, to which a permissive parking sign applies.
- When displaying the permit and parked on a length of road, or area, where a fee applies, the fee must be paid according to the duration of the intended stay, up to the maximum amount payable.
- The permit can only be used in the State of Victoria.
- The permit does not entitle the permit holder to park in a parking bay marked with the people with disabilities symbol.

6. Privacy Statement

The Department of Transport or Council may use or disclose personal or medical information it collects from you, but only as permitted by law, including the Road Safety Act 1986, the Privacy and Data Protection Act 2014, and the Health Records Act 2001.

This may include disclosing the information to the Department's or the Council's employees or contractors, other councils, medical experts, law enforcement agencies, other road and traffic authorities, the Transport Accident Commission, vehicle manufacturers (for safety recalls), road safety researchers, courts and other organisations or people authorised to use the personal or health information.

The most likely use of your information will be to assess your application for an accessible parking permit, or in the context of a parking infringement or the administration of the Accessible Parking Permit Scheme.

Failure to provide the information could result in your application not being processed, or records not being properly maintained.

Accessible Parking Permit Application Form - New & Renew

7. Functional Assessment

This section must be completed by a general practitioner or occupational therapist.

Occupational therapist please note: If your client is seeking a permit on the basis of a cognitive, behavioural or neurological impairment which is associated with the requirement for the continuous support of another person in order to maintain their safety, then please refer the applicant to their GP for assessment.

7.1 Practitioner details

The practitioner is the general practitioner or occupational therapist who is assessing the applicant.

Practitioner first name	<input type="text"/>
Practitioner family name	<input type="text"/>
AHPRA registration number	<input type="text"/>
Practice name	<input type="text"/>
Practice address	<input type="text"/>
Practice phone number	<input type="text"/>
Practice email address (optional)	<input type="text"/>

7.2 Assessment questions

How have you verified the patient's identity? They are a regular patient I have viewed appropriate photo identification

Does the patient hold a driver's licence or learner permit? Yes No

Does the patient have a significant mobility impairment such that:

They are required to use a mobility aid or device? Yes No

Mobility aid or device: means an aid which has more than one contact point with the ground, such as a pair of crutches (used in both upper limbs), a walking frame, a walking stick with three or more feet, motorised mobility device (e.g. motorised scooter or wheelchair) and manual wheelchair.

A parking bay (not designed for people with disabilities) is insufficient in size to allow them access to and from their vehicle? Yes No



Accessible Parking Permit Application Form - New & Renew

If yes, which mobility aid does the patient use?

Callipers

Crutches

Scooter

Walking frame

Wheelchair

Other (please specify)

Does the patient require the continuous supervision of a carer to help them get in and out of a vehicle?

Yes

No

An occupational therapist cannot assess 'Yes' for a client. Refer patient to a GP for cognitive impairment assessment.

I am an OT and have not assessed my client's cognitive impairment

The patient is unable to move safely without the continuous support of a person or carer due to a significant cognitive, behavioural or neurological impairment, they are a danger to themselves or others, and/or they are a minor.

Select the option that best describes the patient's ability to walk

Walking up to 100 metres causes the patient to stop several times.
The person has either an acute or chronic medical condition associated with a mobility impairment such that walking (up to 100 metres) causes them to stop several times due to any of the following – severe pain, extreme fatigue or balance disturbance – which may endanger their health acutely or in the long term.

The patient can walk more than 100 metres and requires rest breaks.
The person has a significant mobility impairment or severe illness that does not affect their ability to walk more than 100 metres AND does require rest breaks when continuous walking is undertaken.

The mobility impairment or severe illness has little impact on the patient's ability to walk.

Approximately how long will the patient's mobility impairment last?

Less than 6 months

6-12 months

1-2 years

2-5 years

More than 5 years and the patient's condition is permanent

Note: Permanent means a medical condition or disability that is considered to have a permanent or irreversible impact on mobility.

Selecting '**permanent**' means an applicant eligible for an accessible parking permit would not be required to return to their medical practitioner/ occupational therapist for assessment on renewal of their permit.

Accessible Parking Permit Application Form - New & Renew

7.3 Practitioner Declaration

I make this declaration in the firm belief that all information on this form for the applicant is, to the best of my knowledge, true and correct. I am aware that false declaration may be punishable by law.

I consent to council collecting personal and medical information provided in and with this application for the purpose of applying for an Accessible Parking Permit. I understand that the personal and medical information provided in and with this application will be used by council in determining my patient's or client's eligibility for an Accessible Parking Permit. I have read and understood the Privacy Statement in section 6 of this form.

Name

Signature

Date