



# Doctor's Parking Bay Permit

## You will need this form if you:

- are applying for a doctor's parking bay to be sited near your surgery;
- are applying for a permit to use a Doctor's bay associated with your surgery;
- are replacing a permit that has been lost, stolen or destroyed;
- have changed your vehicle (even if only temporary);
- have changed your vehicle's registration;
- have changed your name or surgery address.





## 1 How do I fill in this form?

Please write clearly in CAPITAL LETTERS and remember to tick all the relevant boxes. These notes will help you fill in the form correctly. We will return your form to you if you have not filled it in properly or enclosed the relevant original documents. This will delay us in issuing your permit.

## 2 Applications by post

You can post your form to the address in section three. Remember to enclose all the relevant original documents with your form.

Please enclose payment with your form. If you are paying by cheque, please write your name and address on the back of the cheque and make it payable to 'RB Kensington and Chelsea'. **Do not send cash in the post.**

We aim to process postal applications within seven working days, but you should allow at least 10 working days to make sure you receive your permit before your current one runs out. You can renew your permit any time in the month before it runs out. We only send permits to your practice address in the Royal Borough. We will return your permit and documents to you by normal post.

**Please see section eight of this form for the charge for a doctor's bay permit.**

## 3 Applications in person

You can bring your form into the Customer Service Centre and it can be dealt with while you wait.

Customer Service Centre  
The Town Hall  
Hornton Street  
London W8 7NX

### Opening hours:

Monday to Friday

8.30am to 5pm

Remember to bring all the documents you need with you. You can pay in cash, by cheque (made payable to 'RB Kensington and Chelsea'), or by credit or debit card (not American Express or Diners Card).

Because of the nature of the transactions in the Customer Service Centre, during very busy periods you may have to wait for up to one hour before being served. The Customer Service Centre is at its busiest in the days at the beginning and end of the month, as well as over the lunchtime period.

**Please see section eight of this form for the charge for a doctor's bay permit.**

## 4 Applications by night safe

You can leave your application and supporting documents in the night safe, 24 hours a day. The night safe is situated on the left of the north entrance of the Town Hall in Holland Street. Please enclose the relevant payment with your form. If you are paying by cheque, please write your name and address on the back of the cheque and make it payable to 'RB Kensington and Chelsea'. **Do not put cash in the night safe.**

If you have not filled in your application form correctly, or if you have not enclosed the relevant original documents, we will phone and ask you to drop the relevant documents in the night safe. Please allow seven working days for us to process the application.

**Please see section eight of this form for the charge for a doctor's bay permit.**

### Reporting fraudulent permit holders

As you know, there is a great deal of pressure on parking spaces in the Royal Borough. This is made worse by people getting permits using false information. We try to make sure that only eligible people hold a current permit, and we do everything possible to make it more difficult for people to get a permit that they are not entitled to.

If you think that someone is using a parking permit they are not entitled to, please call 020 7361 4231. This number is un manned, please leave a message with details of your allegation and we will act upon it. You may leave an anonymous message if you wish to do so.

We will keep your details confidential.

**We will take the necessary steps to prevent fraud. This is in line with data protection law. Failure to fully comply with the criteria outlined in this form will result in your application being rejected.**

**We will prosecute people who try to get a permit by knowingly giving false or misleading information.**

## 5 What should I do if I need help?

If you have any questions or need help filling in this form, please contact Customer Services on 020 7361 4381. We may record these calls for training purposes.

## 6 Who qualifies for a doctor's parking bay and permit?

General practitioners (GPs) can get a parking bay in certain circumstances.

New applicants applying for a doctor's parking bay will have to meet the following four conditions:

- You are a legally qualified GP who is a principal or partner with your own list of patients, or an assistant or trainee GP. As evidence an insurance indemnity document must show that you are engaged for at least three quarters of your time in the capacity of a general medical practitioner.
- You must provide at least 50% of your medical services, including a full-time emergency service, from a practice in the Royal Borough of Kensington and Chelsea. Your surgery must keep regular surgery hours on weekdays.
- It must be likely that you will be called away from the practice to deal with emergencies. The average number of emergency visits per month to be disclosed on the application form
- The Cabinet Member of the Council must agree that parking conditions in the area around your practice are particularly difficult compared with the borough as a whole. This decision can take several months to be approved.

You must send us original documents with your application as we will not accept photocopied, faxed or scanned documents.

If the Council agrees to create a new doctor's parking bay, you will receive a doctor's parking permit that allows you to park in that specific bay only.

**Every time you apply to renew your parking bay permit, we will review your need for it.**

## 7 Location of a doctor's parking bay

Although we will carefully consider each application, the Council's decision on where to put any particular bay is final.

- We consider the following main points when we decide where to place a parking bay and particular markings.
  - The effect on traffic flow in the borough.
  - The effect on people living or working in neighbouring properties.

- The effect on public places and facilities in the area.
- The need for people to have reasonable access to properties

- We will provide only one parking bay for each practice, and it will be enforced between 8.30am and 6.30pm from Monday to Friday.
- If we provide a parking bay, it will be as near as possible to your practice. However, when we consider your application we must remember our legal duties and powers

## 8 Prices of a doctor's parking bay and permit

- |   |      |
|---|------|
| a) A new doctor's bay with a new parking bay permit (see section 6) | £340 |
| b) Renewal of the permit for an existing bay, for 12 months         | £210 |

The above fees only apply for the first application and any permit renewals thereafter that we receive from your surgery.

### Additional vehicles

It is free to apply for a permit for additional vehicles to park in the relevant doctor's parking bay. To do so, the doctor will need to complete an application form for each additional vehicle. (A doctor's parking bay permit allows you to park in that specific bay only.)

**Every time you apply to renew your parking bay permit, we will review your need for it.**

## 9 Where do I put my permit?

You must put your permit on the passenger side of the vehicle's windscreen. You are responsible for making sure that the permit can be seen clearly at all times.

## 10 Driving licence

You must have an original, current driving licence and we need to see this along with anything else we ask for below. (If you have a new-style driving licence, we accept either the photocard or the paper copy you receive with it.) If you hold a non UK driving licence, this must show your full name and must be valid in the UK.

## 11 Proof of where I practise

You must produce a letter confirming that you are a practising general practitioner (GP) or trainee GP and that you work in the Royal Borough for at least half the week.

## 12 Proof that I own or use the vehicle

All documents must clearly show your name

### Owner

You will need to produce the original vehicle registration document (DVLA form V5) which shows your name.

### Hire and lease vehicles

If you hire, lease or rent a vehicle, you must produce the agreement which shows your name.

### Vehicles that are registered abroad

We will not issue a doctor's permit to a foreign registered vehicle. The vehicle must be registered with the DVLA. Registration takes approximately two to three weeks and you can get details by calling the DVLA office on 0870 600 6767.

## 13 Changing my name

If you change your name while your permit is still valid, you can continue to use the permit but you need to let us know so that we can update our records. You must produce one item to prove that you have changed your name, for example your original marriage certificate.

## 14 Changing my vehicle permanently

If you have changed your vehicle, you **must not** alter your existing permit. You must return your current permit, together with proof of your new vehicle details. You must produce original proof that you own or use the new vehicle, as shown in section 12.

We will only accept an invoice or bill of sale if you have very recently changed your vehicle. This must show your name and the new vehicle registration number. We will not charge you if you return your original permit. **You must also produce your driving licence.**

## 15 Changing my vehicle temporarily

We do not give permits to borrowed or shared vehicles except when your vehicle is off the road because of an accident or major repair, or if it has been stolen. In these cases we will give you a permit for a temporary replacement vehicle that is not registered in your name. You must produce your original permit with a letter from the garage or insurance company to confirm the damage or major repair. If you have borrowed the vehicle, you will also need to provide the vehicle registration document for the replacement vehicle, and a letter from the owner saying that you will be the only person using that vehicle. **You must also produce your driving licence.**

**You must display both the temporary permit and your normal permit in the temporary vehicle.**

## 16 Parking arrangements for locum doctors

If a locum offers the same service as the doctor they are temporarily replacing, the locum is allowed the same parking arrangements. The permanent doctor must give up their parking bay for the whole time that the locum replaces them.

The permanent doctor needs to send us a letter with the application, explaining why they will be absent and for how long. This arrangement is available for up to 20 working days a year for each permanent doctor. Once the locum has returned their permit, we will return the original permit to the permanent doctor.

## 17 Lost, destroyed or stolen permits

### Lost or destroyed permits

If your permit has been lost or destroyed and you need a replacement for the same vehicle, you will have to pay a £25 administration fee. The replacement permit will be valid for the life of the original permit that was lost or destroyed. If you need a replacement permit for a different vehicle, you will have to pay a £25 administration fee as well as the cost of a new permit. We do not take account of how long your original still had left.

### Stolen permits

If your permit has been stolen and you provide a crime reference number, we will charge a £10 administration fee for giving you a replacement. If you do not have a crime reference number, we will treat this as a lost permit and you will have to pay the £25 administration fee for a replacement permit for the same vehicle. If the permit is for a different vehicle, you will need to pay the relevant administration fee (as explained above) as well as the cost of a new permit.

## 18 Returning a permit

If you no longer need your permit, or are no longer eligible for a permit, you must return it to us at the address in section three. We will send you a refund within 28 days. If you do not return the permit, you will be breaking the rules of the Doctor Parking Scheme and committing an offence.

We will refund any unused time if you return your permit without being asked. We work out this refund from the day we receive the permit in our office.

If we have to ask you to return the permit, you will not receive a refund.

We will not refund any amount less than £5.

**Please read each point below carefully. You will sign to say you have read and understood them fully at the end of this form.**

**Warning:** It is an offence to give false or misleading information. If you do, we may prosecute you and you may be ordered to pay a fine of up to £2,500.

- I confirm that I am a legally qualified GP or a trainee GP, who is a principal partner with my own list of patients and I provide a full-time emergency service.
- I confirm that the address shown in section B on this form is my practice.
- I confirm that I keep and use the vehicle with the registration number given in section C of this form. If I stop practising in the borough, or stop keeping and using the vehicle, I will return my permit immediately.
- I confirm that the vehicle with the registration given in section C of this form is not designed for more than 12 passengers (not including the driver), and is less than 548.6 centimetres (18 feet) long and less than 208.3 centimetres (6 feet 10 inches) high.
- I understand and accept that you may ask to visit my practice before or after issuing a permit to make sure I have given the correct address. If I refuse, I understand it is likely that you will not give me a permit or that you will withdraw my permit. In these circumstances, I also understand that my vehicle may be removed if it is parked in the doctor's bay.
- I understand and accept that you may prosecute me if I have given any information on the form which I know is wrong or untrue.
- I understand that you will use the personal information I have given in line with the Data Protection Act 1998. You will use the information I have given to issue each doctor's parking permit. I accept that you will pass this information to other council departments and the DVLA, for this and related purposes.
- I understand that you have to protect the public funds you handle, so you may use the information I have provided on this form to prevent and detect fraud. You may share this information with other organisations who handle public funds for these purposes only.
- I understand that if I pay for a doctor's permit by cheque, credit card or debit card and my bank refuses to make that payment, you will consider the permit to be invalid and I risk having my vehicle ticketed, clamped or removed.
- I have read and understood the instructions and notes which accompany this application form.

**Please remove the application form from this booklet.**

**You should keep these notes as you may need to refer to them in the future.**



# Doctor's bay parking permit

Office use only

Date:

Initials:

Resident name:

Please tick all the relevant boxes and fill in all the details we ask for.  
Please write clearly in **BLOCK CAPITALS**.

- A Is this:**  a renewal of a doctor's parking bay permit (£210)?  
 an application for a new doctor's bay with a new parking bay permit (£340)?  
 an additional free permit for an existing bay (see section eight in the notes)?

## B Your details

Title (Mr, Mrs, Miss, Ms): \_\_\_\_\_ Surname: \_\_\_\_\_

First names (in full): \_\_\_\_\_

Home address and postcode: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone

home: \_\_\_\_\_ work: \_\_\_\_\_

mobile: \_\_\_\_\_

Practice address and postcode: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Average number of emergency visits per month are: \_\_\_\_\_

## C Proof that I own or use the vehicle

Vehicle registration: \_\_\_\_\_ Colour of vehicle: \_\_\_\_\_

Make and model: \_\_\_\_\_

Whose name is on the vehicle registration certificate?

- **Yours** (we need to see the following proof)
  - I enclose the original vehicle registration certificate (DVLA form V5)
- **Lease or hire company** (we need to see the following proof)
  - I enclose the original agreement (see section 12)
- **Your employer's** (we need to see the following proof)
  - I enclose the original vehicle registration document or lease agreement
  - I enclose a letter from my employer stating the vehicle is for my sole use and I am a full time employee

---

## D Proof of who I am

- I enclose my original, current driving licence**  
You must produce your original driving licence as proof you can drive. If you have a new-style driving licence, we will accept either the paper copy or the photocard.
- I enclose an original letter from the practice manager confirming the following.**
  - I am a general practitioner (GP) or trainee GP (not a receptionist, secretary or nurse).
  - I spend more than half my week working in the borough as a GP or trainee GP.
  - I enclose an insurance indemnity document as evidence I am engaged for at least three-quarters of my time in the capacity of a GP.

---

## E Change of address or name

Old address or name: \_\_\_\_\_  
\_\_\_\_\_

---

## F Change of vehicle (permanent or temporary)

Permanent change      Old car's registration \_\_\_\_\_

I am permanently changing my vehicle and have enclosed the following proof.

- Current permit from my old vehicle.
- Vehicle registration certificate (DVLA form V5) for the new vehicle.

Temporary change      Temporary vehicle's registration \_\_\_\_\_

I am temporarily using a vehicle that is not registered in my name and have enclosed the following.

- Current permit from my normal vehicle.
- A letter from the garage or insurance company.
- Current Driving Licence.

---

## G Night safe (see section 4)

If you are going to use the night safe for your application, please tick how you would like us to return the permit and original documents to you.

- Normal post
- Recorded delivery (You will need to sign for this delivery.)

If you do not tick either box, we will return your permit and documents through the normal post.

You can have your documents returned by recorded delivery even if you do not use the night safe.

## I Declaration (The person named in section B must sign this declaration)

Please read each section below carefully. You will sign to say that you have read and understood them fully, at the end of this form.

- I confirm that I am a legally qualified GP or a trainee GP, who is a principal partner with my own list of patients and I provide a full-time emergency service.
- I confirm that the address shown in section B on this form is my practice.
- I confirm that I keep and use the vehicle with the registration number given in section C of this form. If I stop practising in the borough, or stop keeping and using the vehicle, I will return my permit immediately.
- I confirm that the vehicle with the registration given in section C of this form is not designed for more than 12 passengers (not including the driver), and is less than 548.6 centimetres (18 feet) long and less than 208.3 centimetres (6 feet 10 inches) high.
- I understand and accept that you may ask to visit my practice before or after issuing a permit to make sure I have given the correct address. If I refuse, I understand it is likely that you will not give me a permit or that you will withdraw my permit. In these circumstances, I also understand that my vehicle may be removed if it is parked in the doctor's bay.
- I understand and accept that you may prosecute me if I have given any information on the form which I know is wrong or untrue.
- I understand that you will use the personal information I have given in line with the Data Protection Act 1998. You will use the information I have given to issue each doctor's parking permit. I accept that you will pass this information to other council departments and the DVLA, for this and related purposes.
- I understand that you have to protect the public funds you handle, so you may use the information I have provided on this form to prevent and detect fraud. You may share this information with other organisations who handle public funds for these purposes only.
- I understand that if I pay for a doctor's permit by cheque, credit card or debit card and my bank refuses to make that payment, you will consider the permit to be invalid and I risk having my vehicle ticketed, clamped or removed.
- I have read and understood the instructions and notes which accompany this application form.

**Warning:** It is an offence to give false or misleading information. If you do, we may prosecute you and you may be ordered to pay a fine of up to £2,500.

Your signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Your name (print): \_\_\_\_\_