

Special Permit

Supporting medical evidence form

If you receive regular care or support at home from friends, relatives, care or other support service organisations you may be entitled to a free permit.

You do not need to complete this form if you have a care plan in place. Please upload the care plan as evidence when applying for a special permit.



Section 1 – Resident Details

Name (BLOCK capitals)

Title

First name

Last name

Address

Telephone Number

Email

I declare that the information given above is, to the best of my knowledge, true and accurate and give permission to the Council to approach the Medical Practitioner(s) in order to verify the grounds for a special permit.

Signed

Date

Section 2 – to be completed by a registered medical practitioner

In your opinion does the above-named person, for medical reasons, require continued care or support from family, friends or care organisations within their home, for the next 12 months to assist them with essential daily living activities. Yes ☐ No ☐

Name (BLOCK capitals)

Signature

Date:

Professional title/role

Organisation address

Official Stamp:

Special Permit – Controlled Parking Zone (CPZ) On Street.

- **Eligibility:** For residents who require home visits for care or support.
- **Usage:** Non-vehicle specific physical permit will be given to display in the visiting vehicle. The permit allows parking in permit holder only areas or shared use bays within the specified controlled parking zone.
- **Limitations:** The permit must be clearly on display in the vehicle and must be returned to the resident after use. It is the resident's responsibility to ensure that the permit is returned.
- **Requirements:** Residential and Medical Evidence. One document from each list below must be provided.
- **How to apply:** Applications need to be made online via the council website and supporting evidence must be provided. <https://www.folkestone-hythe.gov.uk/parking-permits/special-permits> (We can issue a paper application upon request).
- **Renewal process:** Renewals must be made before the expiry date of the permit, if the permit has expired you will need to reapply for a new permit resubmitting the required evidence. A renewal invite will be sent to you one month prior to the expiry date of your permit with details and information on how to do this online. A new medical evidence form must be provided upon renewal.
- **Changes, cancellations and refunds:** The permit must be returned to the council offices upon cancellation. (Parking Services, Civic Centre, Castle Hill Avenue, Folkestone, CT20 2QY) Replacement of lost, damaged or stolen permits will be chargeable.

Types of accepted residential evidence:

- Current Council tax bill or comprehensive tenancy agreement
- Recent utility bill or bank statement
- Pension book, benefit book, housing association rent book, or current television licence
- Valid 12-month home or contents insurance document
- Most recent landline telephone bill
- Full drivers licence

Types of accepted medical evidence:

- A copy of your latest Care Plan/Support Package.
- Signed and stamped special permit medical evidence form from your medical practitioner.

Contact us:

Tel: 01303 853660

Folkestone & Hythe District Council, Civic Centre
Castle Hill Avenue, Folkestone, Kent, CT20 2QY

Email: Parking.services@folkestone-hythe.gov.uk

<http://www.folkestone-hythe.gov.uk>