

Permit APPLICATION Form

Please return form as soon as possible to the Transport Bureau

Transport Bureau Use Only

(Personal Details: **PLEASE ENSURE THIS SECTION IS COMPLETED FULLY AS DELIVERY OF YOUR PERMIT WILL BE TO YOUR INTERNAL DEPT**)

TITLE: MR/ MRS/ MISS/ MS/ DR/ OTHER

FIRST NAME:

LAST NAME:

JOB TITLE:

DEPARTMENT / SITE:

DEPT TEL NO:

E-MAIL ADDRESS **MANDATORY:**

Application number: _____

Permit Number: _____

Start Date: _____

Finish Date: _____

Date Processed: _____

Swipe access: _____

Assignment (Staff) Number: _____ / This can be found on your wage slip under assignment number. **Without this number you will not be issued with a permit.**

- If you are not a member of BSUH staff on BSUH payroll, we **cannot** issue you a permit unless we receive payment in advance. Only 3, 6 or 12 months payment can be accepted. Cheques/ postal orders are to be made payable to the BSUH NHS TRUST.
- Please be aware there are waiting lists for all permit types.

The charges for parking permits are shown on the attached sheet

Home Address:

_____ Postcode: _____ Contact Number: _____

Are you a Doctor on mandatory rotation? – YES/ NO If yes, please supply the following;

Start Date (Which site?): _____ Finish Date: (which site?) _____

There are 3 permit types available – please tick the one that you are applying for.

RSCH _____ PRH _____ BOTH sites _____ If you wish to receive a BOTH site pass, please indicate the frequency of times you go to each as BOTH site passes are only given to staff who attend both sites *regularly*. Please tick appropriate box:

Please be aware that if you require a BOTH Site Permit or use your car for Trust business you must have Business Insurance Cover. For more details please see Principle 2 below.

RSCH: Every day () Several times a week () Several times a month ()

PRH: Every day () Several times a week () Several times a month ()

Details of Vehicle(s) (Only 1 additional vehicle can be added to your permit if your registered vehicle is off the road. please email details to bsuh.transport.bureau@nhs.net or attach a separate sheet to your application)

Registration	Make and Model	Colour
Engine Size	Co2 emission (g/km)*	

***The Co2 emission amount can be found on your V5 document MANDATORY**

Criteria / Terms and Conditions

Principle – Mobility Are you a blue badge holder? **YES / NO** (If Yes please enclose copy of disabled badge)
Do you have a permanent mobility impairment but not eligible for a blue badge? **YES / NO** (If Yes, supporting evidence will need to be supplied by your GP/Consultant to verify this.)

2. Principle – Essential business use. How many days in a month are you contractually required to use your vehicle/car for Trust business? i.e. carrying equipment, community services, travelling to **both**/other sites etc.

If you use your vehicle to travel to BOTH sites, carry equipment, travel to other sites/places/community, please send the information requested on page 4.

_____ = No days _____ = < 5days/month _____ = 5-10 days/month
_____ = 10-15 days/month _____ = 15-25 days/month _____ = Daily

This is a requirement by law. Failure to provide this information will delay the processing of your application and may have serious implications in the event of a road traffic incident.

3. Principle – Hours of work.

- Do you work Full Time? **Yes / No** or Part Time? **Yes / No**
- Please be aware – if you work night shifts, parking is free between the hours of 16:45pm and 08:30am, Monday – Friday. Weekends and Bank Holidays, the staff car parks are free of charge for staff all day.
- Are you contracted to work between the core hours of 08:00am – 18:00pm. **Yes / No**
- Are you contracted to finish work after 19:00pm? **Yes / No**
- (Once a week, twice a week, three times a week, more – please circle).

IF YOU WORK SHIFTS – IT IS A MANDATORY REQUIREMENT THAT YOU SEND IN A COPY OF YOUR SHIFT ROTA WITH THIS FORM.

- Are you a Doctor on Rotation? **Yes/ No**

4. Principle – Equality and Diversity

Do you have specific caring responsibilities for a dependent immediately before, after or during the working day? Relationship to dependent? Age of dependent if child(ren)? Details of caring responsibility to be given on a separate sheet if necessary.

_____ = Number of children aged 0 – 11 years old.

_____ = Other dependents – please provide details on a separate sheet of paper.

5. Principle – Lack of suitable alternatives to the car

What other transport alternatives are available to you other than your car?

_____ = Bus/ Train available and no changes are required

_____ = Bus/ Train available - no changes required but poor service available

_____ = Bus/ Train available but 1 change required

_____ = Bus/ Train available but 2 or more changes required

_____ = No public transport service available

6. Principle – What is the distance between your home address and your work address?

_____ = Up to 5 Miles

_____ = Between 5-10 Miles

_____ = Between 10-15 Miles

_____ = Between 15-25 Miles

_____ = Between 25+ Miles

Application Agreement: (Please read criteria-terms and conditions carefully)

- I am employed by the Brighton & Sussex University Hospital NHS Trust (BSUH) or another organisation working in conjunction with the BSUH on one of its sites.
- The BSUH reserve the right to change parking permit charges at any time.
- If you decide to cancel your permit you will still be charged for the month you are cancelling in.
- Staff permits are only valid in areas designated as 'Staff Parking' at all BSUH sites (see permit letter for locations).
- I understand any penalty charges received will not be cancelled by the purchase of a permit.
- I understand I must e-mail the Transport Bureau immediately of any changes of personal details or vehicle details.
- If you are not on BSUH payroll please note that payment must be received before a permit can be issued.
- I authorise the BSUH Trust to deduct the charge for my permit, monthly from my salary.
- Any vehicle parked on the sites without a valid permit or car parking ticket may be issued with an enforcement notice and you will be liable to a £25 charge. Any vehicle found to be parked without the proper authority or in a non-designated area may also be issued an enforcement notice and will be liable to a £25 charge. An internal appeals procedure will be available in accordance with the arrangements agreed by the enforcement team.
- Persistent offenders may have their permit withdrawn. Speed restrictions are to be strictly adhered to; abuse may result in the withdrawal of the permit.
- I have read and agree to adhere to the criteria / terms and conditions explained in this application form.

Signature:

Print Name:

Date:

Principle 2 - Driving Licence Verification

If you use your vehicle to travel to BOTH sites, carry equipment, travel to other sites/places/community, please send the following information. We cannot process your permit without this information.

Failure to provide this information will delay the processing of your application and may have serious implications in the event of a road traffic incident.

- Copy of ID card driving licence. Must be copied front and back and signed by your manager.
- Copy of your driving licence information (explained below).
- Copy of motor insurance – must state that you are insured for 'Business Use'.

The green paper copy of the driving licence is now obsolete. Our department still needs to verify that your licence is still valid. To do this, please follow the instructions below to provide the information that we require.

Step 1 – please copy and paste the link below into your web browser (at the top of the screen).

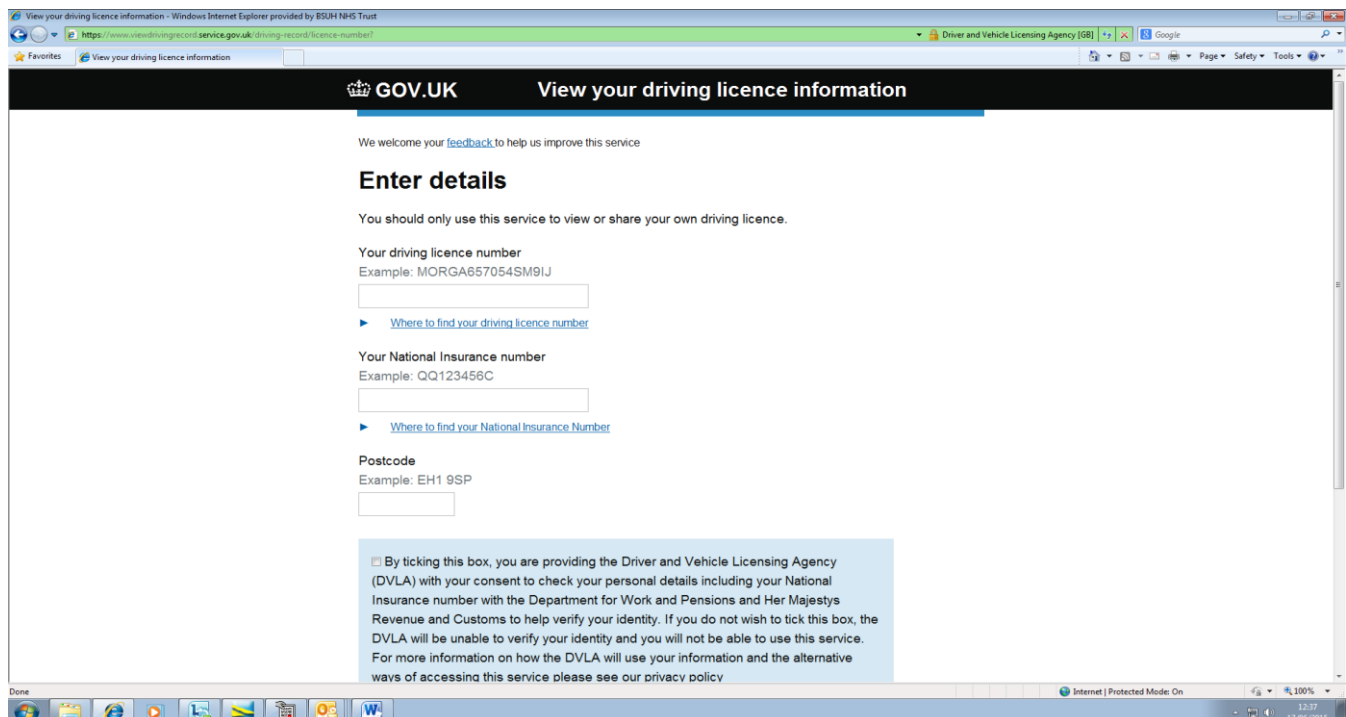
<https://www.viewdrivingrecord.service.gov.uk/driving-record/licence-number?>

Step 2 – please input the following details:

Your driving licence number - Example: MORGA657054SM9IJ

Your National Insurance number - Example: QQ123456C

Postcode - Example: EH1 9SP



The screenshot shows a web browser window displaying the GOV.UK website. The page title is "View your driving licence information". The main heading is "Enter details". Below the heading, there is a warning: "You should only use this service to view or share your own driving licence." The form contains three input fields: "Your driving licence number" (with example MORGA657054SM9IJ), "Your National Insurance number" (with example QQ123456C), and "Postcode" (with example EH1 9SP). Each field has a "Where to find your..." link below it. At the bottom of the form, there is a consent box: "By ticking this box, you are providing the Driver and Vehicle Licensing Agency (DVLA) with your consent to check your personal details including your National Insurance number with the Department for Work and Pensions and Her Majesty's Revenue and Customs to help verify your identity. If you do not wish to tick this box, the DVLA will be unable to verify your identity and you will not be able to use this service. For more information on how the DVLA will use your information and the alternative ways of accessing this service please see our privacy policy". The browser's address bar shows the URL: https://www.viewdrivingrecord.service.gov.uk/driving-record/licence-number?.

Please print and send a copy of the **Your details** tab (above).

Please print and send a copy of your **Penalties and Disqualifications** tab.

SALARY DEDUCTION FORM

ANNUAL BSUH PARKING PERMIT

(It is a mandatory requirement to complete and return this salary deduction form to the Transport Bureau).

I _____ Assignment (Staff) No. _____ confirm that I wish to accept the cost of my parking permit to the value of £_____ per annum to be taken monthly with effect from _____ (must be the 1st of a month)

Please complete by signing either A or B:-

(A) I do not wish for this to be taken as a Salary Sacrifice

Signed (by applicant) _____ Date _____

Signed (by Transport Bureau) _____ Date _____
On behalf of Brighton and Sussex University Hospitals NHS Trust

Please note – if you sign option A you do not have to sign the back of this form - entitled: **“Salary Sacrifice and its effect on the NHS Pension Scheme”**

(B) I do wish for this to be taken as a Salary Sacrifice

AMENDMENT TO CONTRACT OF EMPLOYMENT (Salary Sacrifice)

I understand that my salary will be reduced by a sum equivalent to the value of my annual parking permit and that I have no right to exchange this benefit for a cash sum.

This arrangement will be reviewed annually, one year from the date below or if I experience one of the following ‘life change events’

- change of working hours
- pregnancy
- long term sickness
- leaving the Trust

At which point the Trust will agree new terms and conditions with me.

I confirm that my salary after taking the amount stated above into account exceeds the national minimum wage level.

I understand that taking out a Salary Sacrifice will reduce my pensionable pay and could affect my pension.

I have received and read a copy of the terms and conditions of the scheme and accept the conditions as set out.

I undertake to notify the Trust in writing if there are any changes in my arrangements or circumstances that would cause me to cease being entitled to this benefit.

SALARY SACRIFICE AND THE NHS PENSION SCHEME.

If you choose Salary Sacrifice option B, you must read, sign and date the document overleaf entitled:

“Salary Sacrifice and its effect on the NHS Pension Scheme”

Please do not sign option B if you have already signed option A. If you sign below you are granting permission to have your deductions made by salary sacrifice.

Signed (by applicant) _____ Date _____

Signed (by Transport Bureau) _____ Date _____
On behalf of Brighton and Sussex University Hospitals NHS Trust

Salary Sacrifice and its effect on the NHS Pension Scheme

I am aware that from the 01 April 2015 the NHS Pension Agency is now operating a Career Averaged Revalued Earnings Scheme (CARE). This means my pension income at retirement will be based on pensionable pay for each year. Therefore paying into any Salary Sacrifice scheme will reduce my gross pensionable pay and will have a negative impact on the amount of pension I am able to build up and will reduce the amount of final pension benefits I receive.

Staff with full protection will retain current pension arrangements and will have pension income based on the best salary in the final three or ten years.

I understand that the Trust is not in a position to offer advice regarding the individual effect this may have on my personal financial situation.

I accept and agree that it is my own responsibility to determine and understand the effect participation in the scheme will have on my current or future financial position.

I undertake to notify the Trust in writing if there are any changes in my arrangements or circumstances that would cause me to cease being entitled to this benefit.

Name (PRINT): _____

Payroll Number: _____

Signed (by applicant) _____ Date _____

Signed (by Transport Bureau) _____ Date _____

(On behalf of the Brighton and Sussex University Hospitals NHS Trust)

Scale of Charges for Parking Permits

1	£185
2	£375
3	£440
4	£600

Salary scale 1: under £25,000

Salary scale 2: £25,001 to £38,000

Salary scale 3: £38,001 to £50,000

Salary scale 4: over £50,001

The discount for those who drive more environmentally friendly cars is **in addition** to this and means that BSUH is promoting the use of greener forms of transport and reducing carbon emissions, a legal requirement on all hospitals.

Salary Scale	CO2 emission (g/km)	Discount
All	Up to 150	15%
All	151-175	10%
All	176-200	5%
All	Over 200	0%

The CO2 level of your vehicle is indicated on your **Vehicle Registration Document (V5)**.

Or, visit the **Directgov** website and look up your Co2 emissions via **vehicle enquiry**. This website has all Co2's listed for cars from 2001.

IMPORTANT, PLEASE READ – Co2 emission discounts for cars pre-2001

To get your Co2 discount with us you must supply proof of low Co2 emissions and send it with this application/ renewal form.

Please be aware that if you do not supply proof of low Co2 the Transport Bureau will not recognise any low Co2 emission figure that you include on your application/ renewal form.

This means that you will receive no discount on the cost of your parking permit. Please note - If you supply proof/ details of low Co2 at a later date, we will not be able to refund you/ back-date you any Co2 discount monies.

IMPORTANT, PLEASE READ – Payroll deductions

It is the permit holders responsibility to check that the correct permit charge and correct Co2 discount are being deducted from their wages. If you think there is an error with the amount charged or the incorrect Co2 discount applied - please e-mail the Transport Bureau immediately with the details and we will endeavour to reimburse you.

If a Co2 discount does not appear on your wage slip and you notify us - the discount can only be backdated to the start of your current permit. For example - if your permit is valid from August 2013, the discount can only be back dated to August 2013. We do not backdate for previous permits that you had. Always check your wage slip.

Please return to: Transport Bureau, 2nd Floor, Sussex House, RSCH – or – Transport Bureau, Downsmere, PRH.