



PLACE PHOTOGRAPH HERE  
35mm X 45mm

# DISABLED PERSONS PARKING PERMIT LOST/STOLEN REPORT FORM

Please complete all sections and return to the address as indicated.

**PLEASE PRINT**

1. Surname: .....

2. Other Names: .....

3. Address: .....

.....

.....Postcode.....

4. Date of Birth ...../...../.....

5. Telephone: 020.....

6. Please provide as much information regarding how the pass was lost/stolen, including approximate date and place.

.....

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.....

.....

7. Crime reference number: .....

8. Has your permit been lost/stolen before? \*YES/NO

9. No of losses .....

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**10. DECLARATION**

- a) I confirm that the information provided is accurate and true to the best of my knowledge.
- b) I accept that Hounslow Council may make further inquiries to confirm that the details I have provided are true.
- c) If my \*lost/stolen badge should come back into my possession, I undertake to return it to the Council forthwith for cancellation.
- d) I undertake to comply with the 'Conditions of Use'

**On the basis of the above statement I am requesting the issue of a replacement badge.**

SIGNED: ..... DATE.....

**Please sign in the box below.  
This signature will be used on the badge:**

**Please place your stamp/logo in the box below. This will be used on the badge.  
(INSTITUTIONS ONLY)**

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**THIS FORM SHOULD BE RETURNED TO:**

**Transport Inclusion Unit  
LONDON BOROUGH OF HOUNSLOW  
THE CIVIC CENTER  
LAMPTON ROAD  
HOUNSLOW, TW3 4DN**

**Telephone Enquiries Regarding Lost or Stolen Permits: 020 8583 3073/5208/4111**

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**OFFICE USE ONLY**

**BADGE NUMBER ..... EXPIRY DATE .....**

**DUPLICATE BADGE ISSUED...../...../..... ISSUED BY.....**

**CHEQUE/POSTAL ORDER No. ....**