**FREQUENT OUTPATIENT ATTENDERS – RECLAIM OF PARKING CHARGES**

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| **FREQUENT OUTPATIENT ATTENDERS PARKING CHARGE CLAIM FORM**  PLEASE READ THE GUIDANCE NOTES OVER THE PAGE BEFORE COMPLETING THE FORM | | | | | | | | | | | | | |
| **PATIENT DETAILS** | | | | | | | | | | | | | |
| Title |  | | First Name | | | | | | | | | |
| Surname |  | | | | | | | | | | | |
| Address |  | | | | | | | | | | | |
| Postcode |  | | | | Date of birth | | |  | | | | |
| NHS number |  | | | | Hospital number | | |  | | | | |
| **APPOINTMENT DETAILS** *Please attach parking receipts* | | | | | | | | | | | | | |
| Clinic | | | | Date of attendance | | | *Office use onl*y  Clinic check | | Parking charges claimed £p | | | *Office use only*  Parking charge evidence check | | |
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| **TOTAL CLAIM** | | | |  | | |  | |  | | |  | | |
| **DECLARATION** | | | | | | | | | | | | | |
| I confirm that I am eligible to reclaim parking fees from the Trust. | | | | | | | | | | | | |
| Full name of claimant |  | | | | | | | | | | | |
| Signature |  | | | | | Date of claim | | | | |  | |
| I acknowledge that the information on this form may be disclosed in confidence to other public bodies as appropriate for the purposes of checking entitlement and preventing or detecting fraud. I understand that providing false information or making a false claim may lead to prosecution or legal action. | | | | | | | | | | | | |
| **FREQUENT OUTPATIENT ATTENDERS PARKING CHARGE CLAIM FORM** | | | | | | | | | | | | | |
| **REFUND AUTHORISATION Office use only** | | | | | | | | | | | | |
| I confirm that appropriate evidence of claim and identification has been provided. | | | | | | | | | | | | |
| Receipt no. | |  | | | | | Amount | | |  | | | |
| Full name of authoriser | |  | | | | | | | | | | | |
| Job title | |  | | | | | | | | | | | |
| Signature of authoriser | |  | | | | | Date | | |  | | | |

**GUIDANCE NOTES**

**Who this scheme is for**

Parking fees can be reclaimed by out-patients who attend hospital for an appointment at least three times within a month and for an overall period of at least three months. Patients whose parking fees are reclaimed through the Government’s Travel Costs scheme may not claim parking fees from the Trust. The costs of parking fines may not be reclaimed.

**How the scheme works**

Use a separate form for each person who has paid parking fees at the hospitals of Sandwell & West Birmingham Hospitals NHS Trust. Take the completed form with proof of identification and evidence to support your claim to one of the offices listed below to reclaim the parking fees you have paid.

**Evidence to support your claim**

You will need to provide receipts from the Trust’s Q-Park parking machines from one of the Trust’s hospital sites: **City Hospital, Dudley Road, Birmingham**, **Sandwell Hospital, Hallam Street, West Bromwich; (**this does not include the Hallam Street Hospital operated by Black Country Healthcare NHS Foundation Trust) or **Rowley Regis Hospital, Moor Lane, Rowley Regis.** Parking charges for visits to other hospitals cannot be reclaimed from Sandwell & West Birmingham Hospitals NHS Trust. Parking receipts will be retained by the Trust.

You will also need to provide evidence of the hospital visits, such as clinic letters, for the dates for which you are claiming parking charges. Clinic letter will not be retained by the Trust.

**Claiming on behalf of someone else**

If you are filling in this form for someone who is physically incapable of doing so, ask them to tell you what to fill in for them. They should then sign or make their mark in the declaration.

If you are filling in the form for someone with learning difficulties or a condition that prevents them from managing their own affairs, you are responsible for making sure the information is correct. You should sign the form yourself in the declaration.

**Where to claim your refund**

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| City Hospital: | Cash Office, Main Corridor | Mon-Fri 10am-1pm and 2pm-3.30pm |
| Birmingham Treatment Centre: | Reception | Mon-Fri 8am – 6pm |
| Birmingham & Midland Eye Centre: | Reception | Mon-Fri 10.30am-12.30pm and 2pm-3.30pm |
| Sandwell Hospital: | Main Reception | Mon-Fri 8am – 6pm |
| Rowley Regis Hospital: | Main Reception | Mon to Fri 8am-5pm |