Have your say on blue badge parking in Hackney



Questionnaire

The consultation started on **Monday 13 August**, for 12 weeks and closes on **Monday 5 November** and we would like to hear your views about how we can improve blue badge parking.

We will accept one response per person, therefore we need your name and postcode to validate your response. The Council will not share your personal information with any other third party organisation. Please see more information on the General Data Protection Regulation (GDPR) on page four.

Your postcode (this field is require	d):
Full name (this field is required):	
Name of organisation	
(If business owner)	
Email	

I am a (please select one only):				
Blue badge holder and Hackney on-street parking resident				
Blue badge holder and Hackney estate resident				
Blue badge holder and Hackney business owner				
Blue badge holder non-resident				
Blue badge holder and worker in the borough				
Hackney on street parking resident				
Hackney estate resident				
Hackney business owner				
Visitor				
A worker in the borough				
Other (please state if you wish):				





located around town centres? Please tick one answer only.	
Yes No Don't know	
2) Do you support the proposal to change the current companion badge parking permissions? Please ticl	one
answer only.	
Yes No Don't know	
3) Do you have any other comments on the proposals set out in this consultation?	
4) Do you have any feedback on other aspects of Hackney's parking provision for blue badge holders?	

1) Do you support the proposal to personalise disabled bays - this does not include general use disabled bays

Why do we monitor?

To help us continually improve our services. You can help us find out who we're reaching by providing the following details. It is your choice whether you answer these questions. Your replies will not be used in a way that identifies you however they will help us to understand how community needs may vary; and helps us make informed decisions on how we develop services and target resources.

E) Ago: What is your ago group?									
5) Age: What is your age group? Under 16									
Under 16 16-17 18-24 25-34	35	-44	45-54	55-64	65-84 85) +			
				6.1.		- •			
Caring responsibilities: A carer is someone who spends a significant proportion of their time providing unpaid support to a family member, partner or friend who is ill, frail disabled or has mental health or substance misuse problems.									
6) Do you regularly provide unpaid support caring for someone?									
Yes No									
7) Disability: Do you consider yourself to be disabled?									
Yes No									
Under the Equality Act you are disabled if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.									
8. Ethnicity: Are you:		1							
Asian or Asian British		Other (ethnic group						
Black or Black British		Other,	please state i	f you wis	h				
Mixed background									
White or White British									
9) Gender – Are you? Male Female									
a) If you prefer to use your own term please provide th	nis he	re							
b) Is your gender identity different to the sex you were to be at birth?	e assu	ımed	Yes it's diffe	rent	No it's the same	9			
					·	·			
10) Religion or belief: Are you or do you have:									
Atheist/no religious belief		Buddhist							
Charedi		Christian							
Hindu		Jewish							
Muslim		Secular beliefs							
Sikh		Other, please state if you wish							
14) Cannal animatettana Assaura									
11) Sexual orientation: Are you: Bisexual Heterosexual									
Bisexual				f vo	h				
Lesbian or gay woman		Other,	please state i	r you wis	II				
Gay man									

How to have your say

Complete this questionnaire, fold it and return it to us in the envelope provided by Monday 5 November.

For further information please visit, email or call:

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Visit: consultation.hackney.gov.uk/parking-services/bluebadge

Email: consultation.parking@hackney.gov.uk

U Call: **020 8356 8877**

If you would like to be notified on the outcome of the consultation and invited to apply for a personalised disabled bay if approved, please leave your contact details here.

First name:									
Surname:									
Address:									
Email:									
Phone:									
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You can read mo Protection Regul Data Protection Council's Privacy	lation and Dat Officer, how lo	a Protection A	Act 2018 by mation is h	going to	o <mark>www.hackney</mark>	.gov.uk/pri	vacy. This inc	ludes how to	
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Telephone: