
POLICY FOR PERSONALISED RESERVED PARKING BAYS FOR BLUE BADGE HOLDERS

Effective Date: 1st March 2025 (Supersedes policies from 1st July 2024, 01/03/2023, and 01/11/2018)

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1. Administrative Procedure

1.1 Definition

Personalised Reserved Parking Bay is a designated parking space for persons with disabilities, authorized by Transport Malta, in line with L.N. 113 of 2024.

1.2 Contact Information

For queries, contact:

- **Address:** Transport Malta, Traffic Management Division, Second Floor, Triq Pantar Lija, LJA 2021
- **Email:** bluebadgeholders.tm@transport.gov.mt

1.3 Application Process

- Applications must be submitted electronically via the online system- <https://workflow.gov.mt/RuntimePublic/Runtime/Form/Reserved+Parking+for+Disabled+Blue+Badge+Holders/> or by email sent to: bluebadgeholders.tm@transport.gov.mt
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- The Traffic Management Division (TMD) evaluates applications based on eligibility criteria.

2. Eligibility Criteria

Personalised Reserved Parking Bays are granted under the following conditions:

- To be implemented in the **closest legal on-street bay** from the front access door of the registered residence of the applicant.
- Must be **marked with the Blue Badge or Vehicle number** and painted with the **international access icon** in a white-on-blue design.
- The applicant **must not have a garage, drive-in, or parking space** within 20 meters of their residence.
- For those with a **summer residence**, the bay must be designated for a specific period (e.g., June–September for summer; October–May for winter).
- Applicants with **severe conditions** affecting mobility or behavior may require their vehicle to be registered at the same address as the reserved bay.
- Certification from **Agenzija Sapport** is to be recommended.

Exceptions:

- Parking bay exceptions can be granted only:
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 - **If the garage is more than 20 metres away from residence, or**
 - **If there is a demonstrated difficulty accessing the garage** due to disability-related reasons, or
 - **The garage has steep inclines, there are severe parking shortages, or on roads where temporary parking disrupts traffic flow.**

3. Design Criteria

3.1 Parking Dimensions

<u>Type</u>	<u>Minimum Width</u>	<u>Minimum Length</u>
Parallel to Kerb	2.0m	6.0m
Perpendicular to Kerb	2.2m	5.0m
Van Accessible Space (2.3m headroom)	2.9m (where possible)	7.3m

3.2 Car Parking Areas & Lots

Allocation of spaces for disabled persons depends on the total number of parking spaces:

<u>Total Spaces Available</u>	<u>Vehicle Spaces</u>	<u>Van Spaces</u>
<u>3–10</u>	1	-
<u>11–25</u>	2 OR 1	-
<u>26–50</u>	2	1

<u>Total Spaces Available</u>	<u>Vehicle Spaces</u>	<u>Van Spaces</u>
<u>51-75</u>	3	1
<u>76-100</u>	4	1
<u>101-150</u>	5	1
<u>151-200</u>	6	1
<u>201-300</u>	7	1
<u>301-400</u>	8	1
<u>401-500</u>	9	2
<u>501-1000</u>	2%	3
<u>>1000</u>	<u>20 spaces + 1 per additional 100 spaces 1 per 8 disabled spaces</u>	

3.3 Location Restrictions

Reserved bays **cannot** be placed:

- **On private roads** or restricted areas.
- **On double/single yellow or white lines.**
- **In bus lanes, cycle lanes, pedestrian crossings, or no-parking zones.**
- **Obstructing traffic flow or causing hardship to third parties.**

4. Withdrawal Criteria

Personalised Reserved Parking Bays may be withdrawn if:

- The space is **used by unauthorized persons, vehicles, or objects.**
- The registered vehicle is **not being parked regularly in the bay.**
- **Reported Abuse.**
- The applicant **has a garage or accessible parking space** nearby.
- The **Blue Badge Holder is deceased** or moved to an elderly **home.**

Procedure for Withdrawal

- If any **abuse is confirmed**, the **Traffic Management Division** will revoke the permit and notify:
 - The applicant
 - Agenzija Sapport
 - The Local Council



Transport Malta

Application for a Personalised Reserved Parking Bay for Blue Badge Holders

Applicant's Information

Surname _____ First Name _____

Address _____

Locality _____

Date of Birth _____ Tel/Mob No _____

Blue Badge No _____ ID. No _____

Email Address: _____

Details of the person who filled in the form (if not the applicant)

Surname _____ First Name _____

Address _____

Locality _____

Date of Birth _____ Tel/Mob No _____

Identity card/Passport No _____

Relation to the applicant _____



Transport Malta

Medical Information (Mark as applicable)	YES	NO
The Applicant is a wheelchair user who drives a vehicle specifically modified to be driven solely by the applicant.		
The Applicant has a substantial and long-term physical impairment that results in an absolute inability to walk more than 20 metres.		
The Applicant has a substantial and long-term physical impairment due to a condition wherein walking for more than 20 metres could be life threatening and/or severely detrimental to his health and well-being.		
The Applicant has long-term mental intellectual or psychosocial disability manifesting among others in behaviours of concern for which continuous human support is required.		

Logistic Information (Mark as applicable)	YES	NO
Does the applicant have an interconnected garage or one which is within a distance of less than 20metres?		
Is the application being filled in relation to a summer/winter residence?		

Documents required:

- a) Copy of the Applicant's Identity Card or Passport.
- b) Copy of the Identity Card or Passport of the person who filled this applicatio on behalf of the applicant (if applicable)
- c) Copy of the Identity Card or Passport of the owner of the vehicle (if the applicant does not own a vehicle)
- d) Copy of the vehicle logbook
- e) Copy of the Applicant's Blue Badge issued by Aġenzija Sapport (more information can be found by accessing) https://sapport.gov.mt/wp-content/uploads/2024/01/Application-for-EU-Disability-Card-Blue-Badge_EN.pdf
- f) Medical Report from a licensed Medical Doctor (form provided by TM) dated not more than two months from submission of application

Declaration

I confirm that the information provided is correct and that I shall inform Transport Malta without delay should any information contained in this application be no longer correct;

I understand that Transport Malta reserves the right to withdraw all permits without prior advice if it results that any of the above information is incorrect.

I _____ have read and undestood the above and whilst applying for a Personalised Reserved Parking Bay, declare that all the information that I have provided is correct.

Applicant's Signature

Date



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Informazzjoni dwar il-kundizzjoni medika (fejn huwa applikabbli)	IVA	LE
L-Applikant juża sigġu bir-roti għall mobilita' tiegħu u jsuq vettura modifikata apposta li tinstaq biss mid-detenitur tal-Blue Badge.		
L-Applikant għandu nuqqas fiżiku fit-tul u sostanzjali li jkun jirrizulta fl-inabilita' assoluta li jimxi aktar minn għoxrin (20) metru.		
L-Applikant għandu kundizzjoni li jekk jimxi aktar minn għoxrin (20) metru dan jista' jkun ta' theddida għal hajtu u, jew ta' detriment qawwi għas-saħħa u l-benesseri tiegħu.		
L-Applikant għandu diżabilità mentali, intelletwali jew psikosoċjali fit-tul li timmanifesta, <i>inter alia</i> , f'imġieba ta' tħassib u li minħabba tali imġieba huwa jirrikjedi sapport uman kontinwu.		

Logistika (Immarka fejn japplika)	IVA	LE
L-Applikant għandu garaxx mad-dar jew li qiegħed f'distanza ta anqas minn 20 metru?		

L-Applikazzjoni qed tintalab għal residenza fis-sajf/xitwa		
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Dokumenti mitluba:

- Kopja tal-Karta ta' l-identita' jew tal-Passaport.
- Kopja tal-Karta ta' l-Identita' jew tal-Passaport tal-persuna li qegħda timla din l-applikazzjoni f'isem l-applikant.
- Kopja tal-Karta ta' l-Identita' jew tal-Passaport tal-propjetarju tal-vettura (jekk l-applikant m'għandux vettura).
- Kopja tal-logbook tal-vettura.
- Kopja tal-Blue Badge ta' l-applikant maħruga mill-Aġenzija Sapport (aktar informazzjoni tinstab fl-anness sit) https://sapport.gov.mt/wp-content/uploads/2024/01/Application-for-EU-Disability-Card-Blue-Badge_EN.pdf
- Rapport Mediku minn tabib liċenzjat (formola provduta minn Transport Malta) datat mhux eqdem minn xagħarejn mis-sottomissjoni tal-applikazzjoni

Dikjarazzjoni

Jiena nikkonferma li l-informazzjoni li ipprovdejt hija korretta u li jiena se ninforma lill-Awtorita' tat-Trasport mingħajr dewmien jekk l-informazzjoni li qiegħed ngħaddi ma tibqax valida.

Jiena qiegħed nifhem li l-Awtorita' tat-Trasport qegħda ttrisserva d-dritt li tirtira l-permess mingħajr avviż jekk jirrizulta li l-informazzjoni mgħoddija mhiex korretta.

Jiena _____ nikkonferma li qrajt u fhimt il-kontenut kollu u filwaqt li qed napplika għall-parkeġġ riservat personalizzat niddikjara li l-informazzjoni kollha li għaddejt hija korretta.



Transport Malta

Applikazzjoni għall Parkeġġ Riservat Personalizzat għal min għandu I-Blue Badge

Informazzjoni dwar l-applikant

Kunjom _____ Isem _____

Indirizz _____

Lokalita _____

Data tat-twelid _____ Tel/Mob No _____

Numru tal-Blue Badge _____ Numru tal-karta ta' l-Identita' _____

Indirizz Elettroniku _____

Dettalji tal-persuna li qegħda timla din l-applikazzjoni (jekk mhiex l-applikant)

Kunjom _____ Isem _____

Indirizz _____

Lokalita' _____

Data tat-Twelid _____ Tel/Mob No _____

Numru tal-Karta ta' l-Identita/Passaport _____

X'tigi mill-applikant _____



MEDICAL REPORT – PERSONALISED RESERVED PARKING FOR BLUE BADGE HOLDERS APPLICATION

This information must be filled by a licenced medical doctor.

Applicant’s name and surname: _____

Applicant’s ID card number: _____

Applicant’s age: _____ years

Medical doctor’s name and surname: _____

Medical doctor’s registration number: _____

Medical doctor’s specialisation: _____

List of diagnosed medical condition(s) in order of the extent to which these affect the applicant’s mobility and/or behaviour that could be of danger to self and/or others, if at all:

- (1) _____
- (2) _____
- (3) _____
- (4) _____
- (5) _____

For each of the diagnosed medical condition(s) listed above, indicate whether or not medical images or reports certifying these conditions are available, and whether or not, and if so, which of these, are being submitted with this application as evidence:

- (1) _____
- (2) _____
- (3) _____
- (4) _____
- (5) _____

Give a clear and accurate explanation of the applicant's disability, vis-à-vis the applicant's request for a Personalised Reserved Parking for Blue Badge holders:

Personalised Reserved Parkings for Blue Badge holders are regulated by national legislation – Legal Notice 113 of 2024. For each of the below medical eligibility criteria, indicate whether or not you have assessed the applicant, and whether or not you can certify that the applicant meets these criteria:

- *A substantial and long-term physical impairment that results in:*
 - *An absolute inability to walk more than twenty (20) metres.*
 - Applicant assessed? Circle: Yes OR No
 - Applicant meets the criteria? Circle: Yes OR No
 - Any evidence being submitted? Circle: Yes OR No
 - If yes for any of the above, at what age did the disability start? ___ years
 - Other comments: _____

 - *A condition wherein if the applicant walks for more than twenty (20) metres, this could be life threatening and/or severely detrimental to the applicant's health and well-being.*
 - Applicant assessed? Circle: Yes OR No
 - Applicant meets the criteria? Circle: Yes OR No
 - Any evidence being submitted? Circle: Yes OR No
 - If yes for any of the above, at what age did the disability start? ___ years
 - Other comments: _____

- *A long-term mental, intellectual or psychosocial disability manifesting, inter alia, in behaviour of concern, and due to such behaviour he requires continuous human support.*

▪ Applicant assessed? Circle: Yes OR No

▪ Applicant meets the criteria? Circle: Yes OR No

▪ Any evidence being submitted? Circle: Yes OR No

▪ If yes for any of the above, at what age did the disability start? ___ years

▪ Other comments: _____

Doctor's official stamp:

Doctor's signature: _____

Date: _____