**Reimbursement Form for TfL Congestion Charge, ULEZ Charge, and Silvertown & Blackwall Tunnel Charges**

**Page 1** To be completed by the clinic, printed, stamped and passed to the patient.

**Page 2** Further guidance for patients.

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| **Patient Name** |  |
| **Hospital Number** |  |
| **Address** |  |
| **Reason for payment**  The patient has been clinically assessed as too ill, weak or disabled to travel to an appointment on public transport.  In addition, please **circle** at least one of the 4 conditions below where applicable: | |
| * **Has a compromised immune system, or** * **Requires regular therapy or assessments or** * **Needs regular surgical intervention or** * **Is clinically assessed as being at moderate or high risk of Covid** | |
| **Clinic date(s)** |  |
| **Clinic/Ward/Dept** |  |
| **Site: SBH,RLH.WHX,NUH,MEH** |  |
| **Staff name** |  |
| **Staff position** |  |
| **Staff email address** |  |
| **Date** |  |
| **Clinic Stamp (if available)** |  |

**Patient Guidance**

1. Patients have a three-month window from the date of payment to claim reimbursement for ULEZ, Congestion Charge, or Silvertown/Blackwall Tunnel charges.
2. Patients must provide email or printed receipts (text messages are not accepted) for reimbursement.
3. AUTO PAY receipt numbers are required for reimbursement to the Auto Pay Account.
4. ULEZ and Congestion Charges can be paid either in advance or on the day of travel.
5. Payments made the following day are not eligible for reimbursement, as they are not part of the scheme set up with TfL.
6. Patients should post this form with receipts and bank details to:

**Cashiers Office,**

**2nd Floor Central Tower,**

**The Royal London Hospital,**

**Whitechapel**

**London**

**E1 1FR**

1. Alternatively, these documents can be emailed along with this form to:  
   **bartshealth.cashiers@nhs.net**

For any queries, the Cashier’s Office can also be contacted on:  
**020 3594 1040 / 2010**

1. All refunds will be reimbursed into a nominated bank account