

Residential Parking Permit

Application Form

Name of person likely to be using the vehicle which is the subject of this Application		
Title:	Given name:	Family name:
Address:		Post code:
Contact numbers:	Mobile:	
Email:		

CONDITIONS
<ol style="list-style-type: none">1. The dwelling unit is the principal place of residence of the applicant.2. If a residential property has access to any off-street parking spaces, then that property is not eligible for a residential parking permit.3. A Residential Parking Permit is subject to an annual fee in accordance with Council's fees and charges register.4. Applicants shall produce evidence of vehicle ownership prior to the issue of a permit.5. The permit shall be affixed on the left side of the dash, clearly visible from the kerb.6. The permit shall only apply within the area defined by the Council and in the manner specified by the Council.7. The permit shall only apply until the date shown thereon.8. A fresh application for renewal of the permit shall be made each year, prior to 30 June.9. The permit to expire if the applicant ceases to reside on the premises and no refund of the charge, if applicable, will be made.10. The permit is neither assignable nor transferable and permit holders have no jurisdiction whatsoever in the use of such areas (zones). The areas are for the sole use of vehicles for which permits have been issued and are clearly displayed.11. Permits not renewed by the 31st July will be cancelled and a fresh application for consideration by Council will be necessary.

Having read the conditions for the issue of Parking Permits do you consider that you are eligible for a Permit?	YES	NO
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Details of motor vehicle for which a Permit is required:-			
Registration Number:		Vehicle Colour:	
Vehicle Make:		Vehicle Type:	
Yes, I have supplied registration papers to prove ownership of the vehicle.			

I undertake to comply with the conditions of issue of a permit.

I realise that where a charge is made for a permit no refund is to be made if I cease to reside at the above premises.

Signature:	Date:
Name:	