

# Request for Temporary Vehicle Parks Permit

## Applicant Information

Full Name:			
Address:			
			Post Code
Phone:		Email:	

## Requirements

Address / Street	
Date and times required	
Number of Parks	
Registration of Vehicles	
Purpose	

## Terms and conditions of Application

I understand by making this application that I accept / comply with following conditions:

- Your submitted application must be approved by the Council before use.
- A yellow copy of this notice must be displayed in the front window of each vehicle listed.
- Applicant's personal details can be removed and are not required to be displayed.
- No permit will be issued for more than 3 carparks.
- When possible off-street parking for the location should be used as well as less congested streets or open parking time limits near the location applied for.

I hereby agree to observe and comply with all terms and conditions, statues, regulations, Bylaws and instructions given by Council Officers covering the conditions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only:	
Approved by:	Date / Time

**Please display the authorized copy of this form in your dashboard to avoid incurring parking fines.**