For Office use only:

Cost code: CE45 9167

8

Permit No:

Receipt No:



## Folkestone - Controlled Parking Zone

### Application for Resident's Parking Permit

Before completion please read the booklet "Information for Residents"

| Section A – Details of app | licant |
|----------------------------|--------|
|----------------------------|--------|

| Surname<br>Mr/Mrs/Miss/Ms     |              |               |                       |  |  |
|-------------------------------|--------------|---------------|-----------------------|--|--|
| First                         |              |               |                       |  |  |
| Name                          |              |               |                       |  |  |
| Address                       |              |               |                       |  |  |
|                               |              | P             | ostcode               |  |  |
| Telephone: Home<br>Mobile     |              |               |                       |  |  |
|                               |              |               |                       |  |  |
| Proof as detailed in the bo   | ooklet shoul | d be attached | l                     |  |  |
| ection B – Details of applica | nt's vehicle |               |                       |  |  |
|                               |              |               |                       |  |  |
| Vehicle registration number . |              |               |                       |  |  |
| Make                          | Model        |               | Colour                |  |  |
| Is the vehicle kept and used  | by you?      | Yes           | No 🗆                  |  |  |
| Proof as detailed in the bo   | oklet should |               |                       |  |  |
| Please indicate the reason fo | or your appl |               |                       |  |  |
| 1) New application            |              |               |                       |  |  |
| 2) Renew current permit       |              | Current p     | permit number         |  |  |
| 3) Change of vehicle          |              | Current p     | permit number         |  |  |
| 4) Replace lost permit        |              | Current p     | Current permit number |  |  |
| 5) Replace stolen permit      |              | Current p     | permit number         |  |  |

| Administration Charges - | <b>nistration Charges</b> - New applications and renewals |       |
|--------------------------|---|-------|
|                          | Change of vehicle and replacement                         | £5.20 |

Please ensure you have completed the Declaration overleaf.

### Declaration:

I confirm the details given are correct and agree to provide additional information if required to confirm residence or vehicle ownership.

Signed ..... Date .....

# Failure to provide the necessary information and documentation will result in your form being returned to you and delaying your application.

Applications will not be processed until payment has been made.

### Payment Options

### Cheque or Postal Order

By cheque or postal order payable to Shepway District Council and sent with your application to the address below. Please write your vehicle registration number and address on the back of the cheque or postal order.

By credit/debit card at the Civic Centre.

Please note we cannot accept cash payments.

#### Completed application forms and relevant documents should be returned to:

Parking Services Shepway District Council Civic Centre Castle Hill Avenue FOLKESTONE Kent CT20 2QY