

This application is pursuant to The Local Government Act 1999 and in accordance with Council Bylaw 2.

Applicant Details

Name (to be put on permit):	
Address:	
Phone Number:	
Email:	

Vehicle Details

Vehicle/s Registration Number:	
Vehicle Description (e.g. truck/car/colour/make):	

Reserve Details

Reserve/s Permit Need For:	
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Agreement

I hereby apply for a permit to park on Council Reserves for the following reason:

- ☐ business
- ☐ personal
- ☐ special event
- ☐ temporary purpose

Upon acceptance of application the permit will be valid for 12 months unless specified otherwise.

All permits must be displayed in the nominated vehicle at all times otherwise an expiation will be issued.

All permits are non-transferable.

Applicant's Signature

Name:			
Signature:		Date:	