

Application for:
Disabled Person's Parking Permit for
Organisations



opportunity » growth » lifestyle

ORGANISATION NAME

NAME OF INDIVIDUAL WHO WILL TAKE RESPONSIBILITY FOR THE USE OF THE PARKING PERMIT

ORGANISATION ADDRESS

SUBURB

POSTCODE

<input type="text"/>	<input type="text"/>
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MAILING ADDRESS (IF DIFFERENT FROM ABOVE)

SUBURB

POSTCODE

<input type="text"/>	<input type="text"/>
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ORGANISATION TELEPHONE

Business: <input type="text"/>	Mobile: <input type="text"/>
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Types of disability experienced by the passenger regularly transported by your organisation?

Types of appliances used for support to aid the passenger's mobility

How many vehicles require permits?

(PLEASE PROVIDE VEHICLE REGISTRATION NUMBERS – if space exceeded please attach)

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IMPORTANT NOTE

A letter to Council from either the Director or Manager of the Organisation on corporate letterhead in support of the application to obtain a Disabled Parking Permit for Organisations must be provided.

Letter to Council on corporate letterhead enclosed: (If yes, please tick)

APPLICANT/AGENT - DECLARATION

I make this declaration in the firm belief that all the information on this form is, to the best of my knowledge, true and correct, and I am aware that false declarations may be punishable by law. I will fully comply with the "Conditions of Use" for the permit. If my circumstances change in any way likely to affect my eligibility for the permit, I agree to notify the issuing authority within fourteen (14) days. I further agree that the permit remains the property of the Frankston City Council, and will be returned within seven (7) days of notification of such return being required. The applicant's agent may sign and take full legal responsibility on the applicant's behalf.

Applicants signature

Date

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Please mail completed form to:

Community Safety Department
Frankston City Council
P O Box 490
FRANKSTON VIC 3199

Office Use only

Issue Date _____
Permit Number _____
Expiry date _____
Issuing Officer _____

FRANKSTON CITY COUNCIL PRIVACY STATEMENT

Frankston City Council collects personal information for the purposes of processing your application and undertaking all necessary administrative tasks and enforcement associated with your application/permit. Without this information, council is unable to process your application. Your personal information will not otherwise be disclosed without your consent or where required or permitted by law. You may apply to council for access/amendment to the personal information held about you by contacting the Privacy Officer on 1300 322 322