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
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Surname Mr/Mrs/Miss/Ms					
First					
Name					
Address					
		P	ostcode		
Telephone: Home 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