Ranger & Emergency Services APPLICATION FOR PERMIT 2023-24



Permit Type	TEMPORARY PARKIN	IG	
Date(s) Required	From//	to//	
APPLICANT DETAILS			
Name		Phone	
Address		Postal Address (if different)	
Email address			
VEHICLE DETAILS (m	aximum of 2 vehicles)		
Make / Model		Registration	
Make / Model		Registration	
LOCATION			
No. of Bays			
	NOT BE ISSUED FOR LOADIN	G BAYS, TAXI BAYS, 15 & 30 MINUT	E BAYS OR ACROD BAYS
2. Permit user must be		y on behalf of the Permit holder; ed above, and will comply with tho	se conditions at all times
Applicant's Signature		Date	
Temporary Parking Per		plicant upon approval of the Permit \$14 per day (or part thereof) after e has been completed.	
Office Use Only Application APPROVED:	YES □ NO □	Date Approved:	
Authorised Officer Name		Authorised Officer Signatu	re

All Communications to: