

Application for Parking Permit

Local Law No. 1 (Administration) 2011



Enquiries: 07 4913 5000 / 1300 790 919 Email: enquiries@livingstone.qld.gov.au

Address: PO Box 2292 YEPPOON QLD 4703

www.livingstone.qld.gov.au

PRIVACY NOTICE

Livingstone Shire Council is collecting the personal information you supply on this form for the purpose of processing your application. The Council is authorised to do this under the *Local Law No. 1 (Administration) 2011*, specifically *Subordinate Local Law No. 1.15 (Parking Contrary to an Indication on an Official Traffic Sign Regulating Parking by Time or Payment of a Fee) 2011*. Some of this information may be given to State Government authorities or Council's agents for collection of unpaid infringements. Your personal details will not be disclosed to any other person or agency external to Council without your consent unless required or authorised by law.

This form is to be used when applying for a Parking Permit. The details provided are used by Council to decide the application. The application must be submitted with the relevant fee and supporting documentation.

Applicant Details

Applicant Name (Individual, Partnership, Company)		Company Name (if Partnership or Company)	
<input type="text"/>		<input type="text"/>	
Postal Address		Registered Office Address (if Partnership or Company)	
<input type="text"/>		<input type="text"/>	
Suburb and Postcode		Suburb and Postcode	
<input type="text"/>		<input type="text"/>	
Contact Number(s)	<input type="text"/>	ABN / ACN	<input type="text"/>
<input type="text"/>	<input type="text"/>		
Email			
<input type="text"/>			

Vehicle Details

Registration Number	Make	Model	Colour
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Permit Type

Business Type

- | | |
|---|--|
| <input type="checkbox"/> Work Zone Parking Permit | <input type="checkbox"/> Temporary Parking Permit |
| <input type="checkbox"/> Resident Parking Permit | <input type="checkbox"/> Community Service Organisation Parking Permit |

Purpose of Permit

Location where the vehicle will be parked

Dates and Duration of Permit

OFFICE USE ONLY

Receipt No.	Amount Paid \$	Date Paid __/__/____	
Information Checked: Yes / No	Licence No:	Doc No:	Initials:

Checklist

The following is required to be submitted with this application. Use this checklist to ensure that you have attached all necessary documents for Council to assess and decide the application.

Your application may not be processed if mandatory supporting documentation is not submitted.

- If the applicant is a business a copy of their public liability (for a minimum of \$10 million for Council controlled roads and \$20 million for State controlled roads)
- A site plan detailing the specific part of the road that will be used as a work zone (for Work Zone Permits)
- Evidence that the applicant currently resides at the specified residence (for Resident Permits)
- Evidence that the applicant is part of a Community Service Organisation (for Community Service Permits)

Terms and Conditions

The approval must be displayed on the dashboard and be clearly visible. It is only valid for the approved location and dates on this application. In order for a valid permit to be issued an application must be submitted to Livingstone Shire Council prior to the date of commencement.

If any of the details on the application change you must notify Council and a new permit may be required. Any handwritten alterations or manipulations on the permit will deem it invalid and the applicable parking penalties will be enforced.

I understand the terms and conditions of this agreement and declare the information I supplied on this application is complete, truthful and correct in every detail.

Signature of Applicant

Date

Name of Signatory

Declaration

In satisfaction of *Local Law No. 1 (Administration) 2011* and in consideration of you allowing us to carry out the activities authorised under the approval, I/we (the Applicant) indemnify Council and its representatives against all loss, liability and expense borne of harm that arises directly or indirectly from each of the activities carried out by me/us as authorised by the Permit/Approval.

I acknowledge that "harm" includes property loss, property damage, death, personal injury and illness.

Signature of Applicant

Date

Name of Applicant (Individual, Partnership, Company)

Payment Options

IN PERSON – You can pay at Council's Customer Service Centre, **Yeppoon** (Town Hall), 25 Normanby Street or **Emu Park** (Library), 7-9 Hill Street.

TELEPHONE – Call 1300 790 919 or 07 4913 5000 between 8am and 5pm Monday to Friday to pay with MasterCard or Visa. This form must be received before Credit Card Payments can be taken.

Note: Livingstone Shire Council complies with the Payment Card Industry Data Security Standard. Compliance helps to alleviate sensitive data being compromised and protects cardholder data. **Credit Card Numbers are NOT to be recorded on this form – Customer Service staff will contact you regarding payment once this form is received.**

MAIL – Make your cheques payable to 'Livingstone Shire Council' and return with the completed form to PO Box 2292, Yeppoon Queensland 4703.