

RESIDENTIAL PARKING PERMIT APPLICATION FORM

PLEASE RETURN TO CITY OF GREATER GEELONG
CUSTOMER SERVICE CENTRE OR PO BOX 104, GEELONG 3220



Please see attached Conditions of Operation - you must reside at this property to apply (not applicable to landlords and property managers).

Permit is valid only in your street. Residential parking permits are not valid in ticket parking areas, paid parking bays, shopping strips, off-street car parks or prohibited parking areas i.e. bus zones, no stopping etc .or other parking prohibitions as specified in the Road Rules Victoria.

RESIDENT TO COMPLETE:

Please use BLOCK letters

Title (Mr, Mrs, Miss, Ms, Dr etc)	_____	D.O.B	_____
Surname:	_____	Other name:	_____
Address:	_____	Postcode:	_____
Postal Address (if different):	_____		
Phone number/s:	_____		

Permit Details

How many permits are you applying for? (maximum of 2 per property):	_____		
Time restriction directly effecting this residence?	_____		
I reside permanently at this residence?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
I am the registered owner?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
If no, please provide a copy of your residential lease or current utilities account which reflects this property address.	<input type="checkbox"/> LEASE	<input type="checkbox"/> UTILITIES ACCOUNT	

Declaration:

I acknowledge that this declaration is true and correct and I make it with the understanding and belief that a person who makes a false declaration is liable to the penalties of perjury.

I have read and understood the Conditions of Operation.

Permits are not transferable and need to be returned to City of Greater Geelong when no longer required.

The personal information requested on this form is being collected for the purpose of updating our database and will solely be used by Council to provide services to you. The applicant understands that failure to provide the required information may result in Council not processing the application. You may apply to Council for access and/or amend the information by contacting us on 03 5272 5272.

Applicant's signature: _____ Date: _____