

PERMIT NO: _____

APPLICATION TO OCCUPY PUBLIC PARKING BAYS

APPLICANTS DETAILS:			
Name:			
Company:			
Address:			
CONTACT DETAILS:			
Work phone:		Mobile:	
Email:			
Contact person:			

REASON FOR OCCUPATION OF BAYS

Number of Bays:		Parking Location:	
Required Date:	/ /20	Required time:	

VEHICLES/EQUIPMENT/MATERIALS TO BE ON-SITE IN CO-JUNCTION WITH USE OF BAYS:

OFFICE USE ONLY			
APPROVED ENGINEERING DEPARTMENT OFFICER:			
PERMIT NUMBER:		APPROVAL DATE:	

Note: If application is successful, a permit and invoice will be provided to the permit applicant.