



**Residents Parking, PO Box 9854, Leicester LE3 7BX**

**Please select which permit you are applying for**

- Residents' Parking Permit
- Residents' Parking Permit-Business
- Residents' Parking Visitor Permit Books
- Residents' Parking Permit for Replacement Vehicle
- Residents' Parking Trade Visitor Permit Books
- Residents' Parking Long Term Trade Visitors Permit
- Residents' Parking Permit Essential Visitor (Carer)

**Please do not send original documents, photocopies are acceptable.**

**PERMITS ARE ONLY VALID ONCE DISPLAYED ON THE WINDSCREEN OF THE VEHICLE**

**1 Resident Parking Permit Personal details (BLOCK LETTERS PLEASE)**

Title (Mr/Mrs/Miss/Ms) \_\_\_\_\_ Surname \_\_\_\_\_ Forenames \_\_\_\_\_

Address of where you are applying for your permit

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Post code \_\_\_\_\_

Daytime telephone no \_\_\_\_\_ E-mail \_\_\_\_\_

Is this address your permanent residence in a family home or rented student accommodation?

Please specify \_\_\_\_\_

If you are a Blue Badge holder, please supply your blue badge number and enclose a copy of the blue badge

**2 Vehicle details (one vehicle only per form)**

Car  Motorcycle  (Please specify)

a) Registration No. \_\_\_\_\_ Make \_\_\_\_\_ Colour \_\_\_\_\_

b) Name and address on the vehicle registration document?

Title (Mr/Mrs/Miss/Ms) \_\_\_\_\_ Surname \_\_\_\_\_ Forenames \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Post code \_\_\_\_\_

If this address is not the same as in Part 1 please explain your circumstances below:

**3 Permit Request**

I wish to apply for a residents' parking permit for zone \_\_\_\_\_ 1 year  or 6 months   
(Maximum of 2 per property per year). Please see the appropriate zone information sheet for details

**Temporary permits of less than 12 months or where residing in temporary rental accommodation will not be sent a reminder.**

**Prices: Residents' Parking Permit £50, 6 months or less £25  
(Motorcycles £25, Blue Badge Holders Free)**

#### 4 Visitor Books (BLOCK CAPITALS PLEASE)

I wish to purchase \_\_\_\_\_ book(s) of visitor permits for zone \_\_\_\_\_ Please see the appropriate zone information sheet for details.

Visitor books are only issued to residents registered on the residents' parking database and are only issued for the zone in which the applicant is registered **(if you have not registered, please provide proof of residency)**

In most zones a maximum of 2 books per residence per calendar month may be issued, on a first come, first served basis.

Each book contains 10 permits, each valid for 1 day. **Visitor Permits £10 per book of 10**

#### 5 Business Permit (BLOCK CAPITALS PLEASE)

Business name \_\_\_\_\_

Business address \_\_\_\_\_

\_\_\_\_\_ Post code \_\_\_\_\_

Daytime telephone no \_\_\_\_\_ E-mail \_\_\_\_\_

Business representative: Title (Mr/Mrs/Miss/Ms) \_\_\_\_\_ Surname \_\_\_\_\_ Forename \_\_\_\_\_

#### 6 Permit for Replacement Vehicle

I wish to apply for a replacement residents' parking permit for zone \_\_\_\_\_

**(Please note that evidence of the new vehicle is required and the old permit will need to be returned when requesting a replacement permit. (Visitor books can be purchased to cover an interim period.) Price £10.**

##### Existing vehicle details

Registration number \_\_\_\_\_

##### Replacement vehicle details

Registration No. \_\_\_\_\_ Make \_\_\_\_\_ Colour \_\_\_\_\_

What is the name and address on the vehicle registration document?

Title (Mr/Mrs/Miss/Ms) \_\_\_\_\_ Surname \_\_\_\_\_ Forenames \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post code \_\_\_\_\_

If this address is not the same as in Part 1 please explain your circumstances below:

#### 7 Trade Visitor Permit Books

I wish to purchase \_\_\_\_\_ books of trade visitor permits

Trade Visitor books are only issued to residents registered on the residents' parking database **(if you have not registered, please provide proof of residency)**

A maximum of 4 books per residence per year may be issued, on a first come, first served basis. Each book contains 5 permits, each valid for 1 day. Permits are transferable between vehicles. **Book price: £10**

**8 Long Term Trade Visitors Permit**  
**Applicant details (BLOCK CAPITALS PLEASE)**

Title (Mr/Mrs/Miss/Ms) \_\_\_\_\_ Surname \_\_\_\_\_ Forenames \_\_\_\_\_

Status (Resident / Landlord / Owner (if not resident)) \_\_\_\_\_ Zone (if known) \_\_\_\_\_

Company Name (if appropriate) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post code \_\_\_\_\_

Daytime telephone no \_\_\_\_\_ E-mail \_\_\_\_\_

Property address (if different from above) \_\_\_\_\_

\_\_\_\_\_ Post code \_\_\_\_\_

**Details of work to be undertaken (Must be supported with documentary evidence)**

Nature of works \_\_\_\_\_

Start date of works \_\_\_\_\_ Estimated end date \_\_\_\_\_

Main Contractor Details: Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post code \_\_\_\_\_

Telephone (inc. code) \_\_\_\_\_

I wish to apply for a Long Term Trade Visitor Permit for zone \_\_\_\_\_ **(Price £10 per week or part thereof)**

Start Date \_\_\_\_\_ Number of weeks (maximum 4) \_\_\_\_\_

**9 Permit Essential Visitor (Carer) (A charge may apply, please check eligibility )**

**Personal details and also complete section 2 (BLOCK CAPITALS PLEASE)**

Title (Mr/Mrs/Miss/Ms) \_\_\_\_\_ Surname \_\_\_\_\_ Forenames \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post code \_\_\_\_\_

Daytime telephone no \_\_\_\_\_ E-mail \_\_\_\_\_

Please state your reason for requiring an essential visitor parking permit \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please submit with the application an endorsement of your needs from a suitably qualified medical professional, for example a Doctor. **Applications cannot be considered without this.**

## Declaration

- (a) I hereby certify that I am resident at the address shown on the application form. I wish to apply for a Residential Parking Permit in respect of the vehicle specified. I have read the notes below and agree to be bound by the terms and conditions as laid out in 'Operation of Permit Parking in Leicestershire' (available on our website or on request).
- (b) I understand that any permit issued remains the property of Leicestershire County Council and that the issue of a permit is conditional on my surrendering it to the Council in the event of any of the following:
  - i. Ceasing to be a resident at the given address
  - ii. The vehicle being adapted or used in such a manner that it ceases to be a vehicle conforming to the requirements of the scheme
  - iii. Upon the issue of a duplicate permit
- (c) I undertake to inform Leicestershire County Council immediately if any one of the events specified in sub-paragraphs (i), (ii), or (iii) has occurred.
- (d) I declare that all the information given in and supporting this application is correct and I understand that a false statement may render me liable for exclusion from the scheme and liable for prosecution.
- (e) I declare that any vehicle issued with a permit as a result of this application will not be parked such that it obstructs other residents' accesses and that all relevant drivers will be made aware of this condition.

## Application Notes

This application must be filled in by the person applying for a Residents' Parking Permit. Applications can only be accepted by persons living within the Residents Parking Zone, as defined on the information sheets and plans available on the website or on request.

Proof of Residency should have your name and address printed on it, and is dated within the last three months.

Acceptable forms are ONE of the following: top part of a bank statement, tenancy agreement, gas, electricity or council tax bill. If proof of residency information is not available please contact the Residents Parking Team for further advice.

Leicestershire County Council will take all due care of documents submitted to them in support of an application. However we cannot take responsibility for any documents lost or damaged in the post.

We therefore recommend you send clear scanned, faxed or photocopies of documentation.

Permits will be sent to the address to which they are registered unless otherwise notified to us.

Applicants are advised that Leicestershire County Council may require verification of any of the details on the application form. Anyone attempting to falsify details will render themselves liable to exclusion from this scheme and will be liable for prosecution.

Leicestershire County Council reserves the right to revoke or cancel any permit used in contravention of the conditions laid down in the 'Operation of Residents' Parking in Leicestershire'.

### WARNING

**Any person knowingly making a false statement for the purpose of obtaining a Residential Parking Permit is liable to prosecution under section 115(2) of the Road Traffic Regulation Act, 1984, and may be liable to a fine not exceeding £2,500**

**PLEASE NOTE THAT REFUNDS WILL NOT BE GIVEN FOR PERMITS RETURNED TO LEICESTERSHIRE COUNTY COUNCIL BEFORE THEIR EXPIRY DATE**

### Data Protection Statement

The personal information you provide on this application form will be used by Leicestershire County Council for parking permit purposes. By signing this application you are consenting to Leicestershire County Council processing this information for the purpose of issuing residential parking permits and operating the residents' parking scheme. Leicestershire County Council may also pass on key data to bodies responsible for auditing and administering public funds, for the purposes of preventing and detecting fraud.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**APPLICATIONS FOR PERMITS CANNOT BE PROCESSED UNLESS ACCOMPANIED BY PROOF OF RESIDENCY, VEHICLE REGISTRATION DOCUMENT (V5C) AND THE APPROPRIATE FEE.**

**Payment – THIS PART OF THE FORM WILL BE DESTROYED ONCE PAYMENT IS CONFIRMED**

I wish to pay by: Cheque  £ \_\_\_\_\_ (**payable to *Leicestershire County Council***)  
Credit/debit card  Please fill in details below

Please debit my MASTERCARD/VISA/MAESTRO/DELTA/SOLO\* card (\*delete as appropriate)  
(For MAESTRO please use the 18 digit MAESTRO number)

Card number:

Valid from:  Expiry date:  Issue: \_\_\_\_\_

Amount: £  .

Name on card:  Signature:

Cardholder address   
 Postcode:

Leicestershire County Council cannot accept responsibility or liability for personal financial details sent by post, or payments sent by post whether cash, cheque, credit/debit card or any other form.

***If you have any queries or require further information on residents parking:***

**Telephone:** (0116) 305 5442

**Fax:** (0116) 305 6618

**e-mail:** [residentparking@leics.gov.uk](mailto:residentparking@leics.gov.uk)

**Mail:** Residents Parking, PO Box 9854, Leicester. LE3 7BX

**www:** [www.leicestershire.gov.uk](http://www.leicestershire.gov.uk)

**Form PA1**