



PARKING DISPENSATION APPLICATION FORM



Applicant Details:

| Name of Applicant: | Miss/Ms/Mrs/Mr | | | | |
|--|---|--------------------------------|--------------------------------|------------------------|--------|
| Address of Applica | nt: | | | | _ |
| | Po | st Code | | | = |
| Telephone Number | s: Home | Work: | Mobile: | | |
| Other Details: | | | | | |
| Location Required: | | | | | |
| Start Date: | Dı | ıration of Total Works | : | | |
| Vehicle Registration | า Number/Make/Coloเ | ur: | / | | _ |
| | ation: | | | | - - |
| To view our Privacy no N.B Dispensations are valid The Dispensation is for single | tice, please visit https: I for 1 week and must be ree yellow lines. Not for parking | ://new.enfield.go.uk.p | basis as required | | |
| All other requested need to l Charges can be found on a se | | . Without full details we will | unfortunately be unable to pro | cess your application. | |
| Payment Details: | | | | | |
| Cash: 🗖 | Amount: £ | | | | |
| Cheque: 🗖 | Cheque Number: 🗖 | □□□□ Amou | nt: £ | | |
| | Credit / Debit card pa | ayments can only be a | accepted in person or via | the telephone. | |
| Return to: | | | | | |
| Crown Road Vehicle Pai Crown Road | К | | | | |
| Enfield | | | | | |
| EN1 1TH | | | | | |
| Telephone: 020 3856 00 | | | | | |
| Email: enfieldpound@n OFFICE USE ONLY | siservices.co.uk | | | | |
| Payment Taken by: _ | | Signed: | Date: | | |