**PLACE DIRECTORATE**

**AUTHORISED PERMIT PARKING FOR RESIDENTS AND VISITORS - APPLICATION FORM**

This agreement is made by virtue of powers invested in the Council by the Road Traffic Regulation Act 1984 and the Tameside Metropolitan Borough Council (King Street, Stalybridge)(Controlled Parking Areas) Order 2013 made by the Council under the Road Traffic Regulation Act 1984 (as amended) and is made between Tameside MBC and the undersigned applicant

Applicant’s Name .................................................................................................

Address ....................................................................................….......... ..................................................................................................

 …………………………………………………………………….

Telephone number ……………………………………………………………………..

**Parking area -** King Street, Stalybridge

Scheme identifier reference :- **S1**

Period of **Resident’s Permit** from 1st December 2021 to 30th November 2022

Number of Resident Permits Required - Please circle None / 1 / 2

Vehicle Registration No (s) ………………………......................................................

**(Proof of residency is required i.e. utility bill, rates bill etc)**

Period of **Visitor’s Permit** from 1st December 2021 to 30th November 2022

Number of Visitor’s Permits Required - Please circle None / 1

Number of books of 20 Visitors Parking Vouchers required – please state no. …………..

I certify that I am resident at the above address and that the particulars given are true. I wish to obtain Permit(s) for the King Street, Stalybridge controlled parking zone in accordance with the Terms and Conditions as set out by Tameside Metropolitan Borough Council.

I can confirm that I have read and agree to observe those Terms and Conditions.

I confirm that in making this application I am acting on behalf of and with the agreement of all the other residents of the property.

Applicant’s Signature....................................................................................................................

Date...................................................