

Contract Parking Application Form

Please fax back FAO Teresa Corbridge, PA to the Chief Executive - 01422 398490

1. Permit Type							
5 day permit (including free weekends) @ £150.00 per quarter							
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Permit Start Date							
Price is <u>inclusive</u> of VAT							
2. Vehicle Details (maximum of 2 shared vehicles per permit)							
Vehicle 1:		AA a dal					
Manufacturer		Model:					
Colour:		Registration:					
Vehicle 2:							
Manufacturer		Model:					
Colour:		Registration:					
3. Personal Details	<u> </u>	_					
First Name:		Surname:					
House no:		Street:					
Town/City:		Post Code:					
Telephone:		Email:					
Emergency Contac	ct Number:						
Automatic Renewal Each Quarter? YES, please renew until I inform otherwise NO, please contact me to confirm renewal each quarter							
Recommended by a Friend? Complete their name and you both save 10% off one full quarter (3 months) parking fee:							
4. Payment Details (please circle to indicate your preferred payment option)							
I wish to pay: (please tick)							
☐ Quarterly by Cheque ☐ Quarterly Direct Debit ☐ Monthly Direct Debit							
Please note: direct debits are taken on or around the 12 th of the month.							
All permits are issued subject to terms and conditions. Please sign to accept the terms and conditions:							
Signed:	gned: Date:						