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| If you need help lodging your form, contact us | |
| Email | council@northernbeaches.nsw.gov.au |
| Phone | 1300 434 434 |
| Customer Service Centres | Manly Town Hall, 1 Belgrave Street Manly NSW 2095 |
| | Dee Why Civic Centre, 725 Pittwater Road Dee Why NSW 2099 |
| | Mona Vale 1 Park Street Mona Vale NSW 2103 |
| | Avalon 59A Old Barrenjoey Road Avalon Beach NSW 2107 |

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|----------------------|----------------------|
| Office use only | |
| Form ID | 4040 |
| TRIM Ref | 2020/117707 |
| Last Updated | August 2021 |
| Business Unit | Customer Service |
| Permit No. | <input type="text"/> |

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|-------------------------------|---|
| Privacy Protection Notice | |
| Purpose of collection: | For Council to provide services to the community |
| Intended recipients: | Northern Beaches Council staff |
| Supply: | If you choose not to supply your personal information, it may result in Council being unable to provide the services you seek |
| Access/Correction: | Please contact Customer Service on 1300 434 434 to access or correct your personal information |

Permits are valid from 1 September to 31 August each year

- Are only valid at the Pay and Display areas within the Church Point Precinct
- Availability of parking space is not guaranteed
- Replacement permits will only be issued where vehicle is sold, disposed of or due to windscreen damage
- Original permit number and proof of purchase is required
- By signing this application, you acknowledge these conditions

Part 1: Fees

| | | | |
|--|---|--|------------|
| Resident - full year (1 Sept - 31 Aug) | \$538.00 | Non-Resident - full year (1 Sept - 31 Aug) | \$1,098.00 |
| Resident - half year (1 Mar - 31 Aug) | \$269.00 | Non-Resident - half year (1 Mar - 31 Aug) | \$538.00 |
| Postage and Handling | Standard Post - Please confirm you have a secure letter box as we do not take responsibility for lost or stolen items | | No charge |
| | Registered Post - Tracking number will be provided | | \$11 |

Part 2: Applicant Details

| | | | |
|---------------------------------------|--|-----------------------------|--|
| First name | | | |
| Family name | | | |
| Business/organisation (if applicable) | | | |
| Residential address | | | |
| Suburb | | Postcode | |
| Email address | | | |
| Postal address | | | |
| Suburb | | Postcode | |
| Phone number | | Vehicle registration number | |
| Signature | | Date | |

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ACCORDING TO PROCEDURES**

| | | | |
|---------------------|----------------------------------|----------------------------|--|
| Credit Card Details | | | |
| Please charge my | <input type="radio"/> Mastercard | <input type="radio"/> Visa | <input type="radio"/> American Express |
| Amount | \$ | | |

| | | | | | | | | | | | | | | | |
|-------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Name as appears on card | | | | | | | | | | | | | | | |
| Card Number | | | | | | | | | | | | | | | |
| Expiry Date | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | |
|----------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Signature | | | | | | | | | | | | | | | |
| Daytime Phone Number | | | | | | | | | | | | | | | |
| Date | | | | | | | | | | | | | | | |

Please note: Payment card surcharge of 0.5% applies

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