

Application / Renewal for Parking Permit for Johnstone Car Park

Applicant's Name:				
Address:				
Email:				
PH: (BH)	(AH)	((Mob)	
I would like to apply for week applies and which will be invoiced	I agree to pay by			
Reason Parking Permi	t Required:			
Applicant's Signature:			Date:	
OFFICE USE ONLY:	Date Paid:	Receipt: _		

DECLARATION:

The Colac Otway Shire Council collects personal information to levy rates, issue permits and licences, and provide a variety of community services. The information collected in this form is used only for the purposes contemplated by the form (primary purpose) and is not passed on to third parties. In some instances however, disclosure is required by law or is necessary for the protection of persons or property. Where this occurs, Council will take every reasonable step to ensure your privacy is protected in accordance with the Information Privacy Act 2000 (Vic). Should you need to change or access your personal details, or require further information about Council's Privacy Policy contact our Privacy Officer on 5232 9400.