

PRIVATE OFF-STREET PARKING SPACES APPLICATION

FORM A1.5



Applicant Information:

Name and Surname:

Tel. / Mob.

Address:

E-mail:

Fax:

ID: (copy of applicant if required)

Parking Area Information:

Location (attach site plan):

Capacity:

VRN of vehicles using the garage*:

	Vehicle Registration	Description of Vehicle		Vehicle Registration	Description of Vehicle
1.			6.		
2.			7.		
3.			8.		
4.			9.		
5.			10.		

* For additional vehicles please fill in a second application form.

Local Council may carry out a site inspection to ensure that the parking area is as described in the application, and may also carry out regular checks to ensure that the use remains the same. An annual fee of €46.50 (Lm20) will be charged for each vehicle on top of the road licence. The application is subject to the CVA Board approval.

Signature of Applicant:

Signature of receiving clerk:

Date:

FOR OFFICE USE ONLY

Input date:

Documents requested:

Site plan

CVA acknowledgement no:

Site Inspection:

Reason for non-approval