



**CORK CITY COUNCIL
COMHAIRLE CATHRACH CHORCAÍ**

Roads & Transportation Directorate
Tel: 021 4924420/4924151/4924295

Transportation Division
email: parkingpermits@corkcity.ie

OFFICIAL USE ONLY:

Customer ID: _____

DATE: _____

Application Form - Change of Vehicle (January 2017)

PLEASE COMPLETE IN BLOCK CAPITALS

Applicant Details:

Surname: _____ Forename: _____

Address: _____

Contact No: _____ Email: _____ Permit No: _____

Details of New Vehicle:

Vehicle Registration No: _____ Vehicle Make & Colour: _____

Please confirm that the following documents are attached to this application:

- Vehicle Registration Book/Log Book for new Vehicle: Yes No
- Insurance Certificate for new vehicle: Yes No
- Permit for previous vehicle: Yes No

If previous permit not attached – Please outline the reasons why hereunder:

DECLARATION:

I _____ (INSERT NAME) of the above address confirm and solemnly declare that the information provided on this application form is correct and true, I further declare that the above address is my principal place of residence and I am currently residing at this address.

Signature of Applicant: _____ Date: _____

Please note:

1. The Transportation Public Counter is open from **10am to 4pm Monday to Friday**. **In order to allow your permit to be processed fully and payment made at the Cash Office the last application will be processed at 3:45pm. Incomplete applications cannot be accepted under any circumstances. Please note that the Cash Office closes at 4pm sharp.**
2. **Termination of Permit**
Cork City Council reserves the right to terminate a permit if deemed necessary due to insufficient documentation, further information requested, entitlement to permit etc.
3. The above application must be completed in full.

4. **The following documentation is required to be submitted with your completed application form:**
 - A **Photocopy** of the **Vehicle Licence Certificate/Log Book for your Vehicle** – The vehicle must be registered to the address for which the parking permit is being sought.
 - 5. A **photocopy** of your **Current vehicle insurance certificate** – the address on the insurance certificate must be the same as the address for which the permit is being sought. **Please note insurance discs or insurance schedules/Cover Letters from Insurance Companies are not acceptable. The Applicant should be the Policy Holder or Named Driver.**
 - Fee of **€10.00** applies to a Change of Vehicle. **The new Permit will be valid until the expiry date of your existing permit.**
6. Please send the Postal Application to Cork City Council, Transportation Division, City Hall, Cork, payable by Cheque, Bank Draft or Postal Order. Please made payable to **Cork City Council**. PLEASE DO NOT ENCLOSE CASH WITH YOUR APPLICATION.
7. The Renewal of a permit is the responsibility of the Permit Holder.
8. Applicants are advised that the completed application from together with all submitted documentation in support of the application will be required to be retained by Cork City Council for the purpose of audit inspection by both the Local Government Auditor and the City Council’s Internal Auditor for a period of no longer than 2 ½ years.

FOR OFFICIAL USE ONLY – ADDITIONAL INFORMATION:

Customer ID: _____