



CORK CITY COUNCIL  
COMHAIRLE CATHRACH CHORCAÍ

**OFFICIAL USE ONLY:**

Customer ID: \_\_\_\_\_

DATE: \_\_\_\_\_

Operations Directorate  
Tel: 021 4924343

Parking Section  
email: [parkingpermits@corkcity.ie](mailto:parkingpermits@corkcity.ie)

**Application Form - Change of Vehicle (Aug 2022)**

**YOU MAY APPLY FOR THIS PERMIT ONLINE ON THE CORK CITY COUNCIL WEBSITE**

**[HTTPS://WWW.CORKCITY.IE/EN/COUNCIL-SERVICES/SERVICES/PARKING-SERVICES/APPLY-ONLINE/](https://www.corkcity.ie/en/council-services/services/parking-services/apply-online/)**

**PLEASE COMPLETE IN BLOCK CAPITALS**

**Applicant Details:**

Surname: \_\_\_\_\_ Forename: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Eircode: \_\_\_\_\_

Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

Permit No: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

**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

**NB – A new Parking Permit WILL NOT ISSUE unless the original permit is returned along with this application form.**

**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:**

**You May Apply for this Permit on the Cork City Council website:**

**<https://www.corkcity.ie/en/council-services/services/parking-services/apply-online>**

1. **Termination of Permit**

Cork City Council reserves the right to terminate a permit/permit application if deemed necessary due to insufficient documentation, failure to provide further information requested, ineligibility for permit, etc.

2. **Request for Additional Information.**

Cork City Council reserves the right to request whatever further information is required to evaluate the eligibility of applications.

3. **The above application form 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** – This documentation must be registered to the applicant’s name and address.
- 5. A photocopy of your **Current vehicle insurance certificate** – this documentation must match the applicant’s name and address. **Please note insurance discs or insurance schedules/Cover Letters from Insurance Companies are not acceptable.**
- 6. Fee of **€10.00** applies to a Change of Vehicle. The new Permit will be valid until the expiry date of your existing permit.
- 7. Please send the Postal Application to Cork City Council, Parking Section, Room 335, City Hall, Cork, T12 T997 payable by Cheque, Bank Draft or Postal Order made payable to **Cork City Council**. **PLEASE DO NOT ENCLOSE CASH WITH YOUR APPLICATION.**
- 8. The Renewal of a permit is the responsibility of the Permit Holder.
- 9. **Please allow 5 - 10 working days for the processing of your application.**
- 10. Applicants are advised that the completed application form 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.

*“Cork City Council is committed to fulfilling its obligations imposed by the Data Protection Acts 1988 to 2018 and the GDPR. Our privacy statement and data protection policy is available at <http://www.corkcity.ie/services/corporateandexternalaffairs/dataprotection/>. We request that you read these as they contain important information about how we process personal data that is supplied to us.*

**FOR OFFICIAL USE ONLY – ADDITIONAL INFORMATION:**

**Customer ID:** \_\_\_\_\_