

Parking Bay Suspension Application



Please write in BLOCK capital letters throughout and tick applicable boxes.

1. Applicant's details

Name Surname

Business/Organisation

Office Address in Full

Post Code

Daytime phone number Email

2. Details of Suspension Request (please note, each bay to be suspended is 6 metres long)

I would like to request the suspension of bay(s) at the following location:

Street (where suspension is required)

Property number or landmark Type of bay

Reason for suspension

Start date End date = week(s), day(s)

3. Amount payable

<input type="text"/> Number of bay(s)	x	<input type="text"/> Number of week(s)	x	£390.00	=	<input type="text"/>					
				<small>(rate per week)</small>			+		+ £30.00	= £	Amount payable
<input type="text"/> Number of bay(s)	x	<input type="text"/> Number of day(s)	x	£130.00	=	<input type="text"/>					
				<small>(rate per day)</small>							

4. Conditions of Application

The Council requires at least five working days notice to suspend a parking space.
The Council reserves the right to refuse applications where it deems the location unsuitable.
Suspensions may be up to 50 meters away from the requested location.
Suspension fees are not refundable if cancelled or dates altered due to no fault of the Council.
Payment can be made by either cheque or postal order only, and such made payable to: "LBB".
Completed application and payment are to be sent to:

5. Fair Processing Notice

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

For more information, contact the Corporate Anti Fraud Team at caft@lbbd.gov.uk or visit the website below:
<http://www.lbbd.gov.uk/AboutBarkingandDagenham/CouncilDepartments/FinanceAndResources/Pages/FairProcessing.aspx>

6. Declaration

I declare that I have read and understood the information above. I will comply with the requirements and conditions of the application. I confirm that the information I have provided are correct.

Signature Date

FOR OFFICIAL USE ONLY

Suspension ID Amount Paid Payment Method

Date of Issue Processed by Correct sum paid Approval given