

Longford County Council
Traffic Section
Market Square
Longford
043-3331563

OVER 65'S RESIDENTS PARKING PERMIT FORM

Name:		
Home Address:		
Phone No.	Mobile No	
Designated Street/C	Car Park:	
Vehicle Registratio	n No: Make/Model:	
Amount Paid:		
SIGNED :	DATE:	
	STATUTORY DECLARATION BY APPLICANT	
I, hereby declare that the particulars given in this application form are correct and true in every detail to the best of my knowledge and I make this solemn declaration conscientiously believing the same to be true by virtue of the Statutory Declarations Act, 1938.		
_	the application form, please ensure that you have vant documentation as detailed below;	
(if rented/lea	ensing Certificate and letter from Landlord ased accommodation) plus Landlords P.R.T.B. Number i.e. Driver's License, Passport or Birth Cert	
G	permits are issued free of charge.	

Issued on __/__/20

For Official Use: - New Permit Number _____

Please forward Application Form to Longford County Council, Traffic Section, Market Square, Longford.

We collect and process this information to manage and administer the relationship between you and us. The processing is necessary for the performance of a contract to which you are a party or to take steps at the request of you, prior to entering into a contract with us. For further information on how Longford County Council process personal data, please see our <u>Privacy Policy</u> on our website <u>www.longfordcoco.ie</u> under <u>Data Protection</u>

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