

Privacy

The personal information collected on this form will only be used by the City of Perth for the sole purpose of providing requested and related services. Information will be stored securely by the City and will not be disclosed to any third parties without your express written consent.

Copyright

I authorise the City of Perth to reproduce any attachments provided with this form for internal purposes only.

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Instructions: Please print clearly using **black pen** in the spaces provided.

30 days written notice is required for all cancellations

1. CUSTOMER DETAILS

Surname:	<input type="text"/>	First Name:	<input type="text"/>
Company Name:	<input type="text"/>		
Address:	<input type="text"/>		
Telephone:	<input type="text"/>	Postcode:	<input type="text"/>
Mobile:	<input type="text"/>	Facsimile:	<input type="text"/>
E-mail:	<input type="text"/>		

2. PERMIT DETAILS

Permit No:	<input type="text"/>
Car Park Name:	<input type="text"/>

3. CANCELLATION DETAILS

Required date of cancellation:	<input type="text"/>
Reason for cancellation:	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Signature:	<input type="text"/>	Date:	<input type="text"/>
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Response Time: 5 Working Days from date of receipt

Please Note: This form is available in alternative languages and formats on request.