WICKLOW COUNTY COUNCIL COMHAIRLE CHONTAE CHILL MHANTÁIN MUNICIPAL DISTRICT OF ARKLOW CEANTAR BARDASACH AN LINBHEAR MÓR



APPLICATION FOR RESIDENT PERMIT FOR PAY AND DISPLAY (RP01)

Please forward Applications & queries to the following address only:

Parking Section, Bray Municipal District, Civic Centre, Main Street, Bray, Co. Wicklow. Tel: 01-2744900

1.	Name of applicant					
2.	Full Postal Address					
3.	Telephone Number Mobile					
4.	Vehicle Registration No.					
5.	Make of Car					
6.	Colour of Car					
7.	Are you the house Owner Tenant					
8.	Permit Location					
9.	Is the above address your normal place of residence? Yes	No				
The To	Illowing information should be enclosed (photocopies)	For Office Hee Only				
Vehicle Registration Form		For Office Use Only				
Valid F	Road Tax	Reg.				
Road Tax						
A copy of a current Utility Bill (i.e. phone, electricity etc.,) with the house address shown as above.		Utility Bill				

To the Local Authority concerned

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That the foregoing particulars are correct and that I have read this form in full and that I v	will
not park without making the correct payments until I receive a parking permit.	

SIGNATURE	DATE	
• ,,	not entitle you to park without payment. You cannot ane as you receive a parking permit.	vail
For Office Use Only: Permit No.	Issue Date:	