

Please make sure your details below are correct, otherwise this could cause a delay in the issuing of your permit



BLUE BADGE – ALL ZONES PARKING PERMIT APPLICATION FORM

FOR THE PARKING OF VEHICLES BY BLUE BADGE HOLDERS IN PARKING BAYS IN THE RESIDENTIAL PARKING
ZONES FOR A MAXIMUM CONTINUOUS PERIOD OF 3 HOURS.

Please Note: Applications will ***only*** be accepted from a valid Blue Badge holder; or otherwise, the carer or legal guardian of a valid Blue Badge holder on completion of the application form; and presentation of supporting documents, in the case of a carer or legal guardian.

PERSONAL DETAILS (BLUE BADGE HOLDERS DETAILS)

Name	<input type="text"/>	Address	<input type="text"/>
Surname	<input type="text"/>		

(Applicants must provide the follow documentation along with this application)

- Original Valid Blue Badge
- Applicants ID Card
- Utility Bill (dated within the Last 3 months)

CONTACT DETAILS

(For use only if there are any queries with your application)

Home Telephone : <input type="text"/>	Mobile : <input type="text"/>	Email: <input type="text"/>
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DECLARATION OF APPLICANTS

I wish to apply for a Parking Permit in respect of that specified in this application.

I understand that any permit issued remains the property of Gibraltar Car Parks Ltd and that the issue of a permit is conditional on my surrendering it in the event of any of the following:

- 1) Upon the issue of a duplicate permit.
- 2) The Blue Badge holder has deceased
- 3) The applicant no longer holds a Blue Badge

I undertake to inform Gibraltar Car Parks Ltd immediately if any one of the events specified in sub - paragraphs 1) 2) or 3) has occurred.

I declare that all the information given in, and supporting this application, is correct and I understand that a false statement may render me liable for exclusion from the scheme and liable for prosecution.

I declare that any vehicle using a permit because of this application will not park in such a manner that it obstructs other residents access and that all relevant drivers will be made aware of this condition.

I declare that I will not duplicate the permit issued under this application.

I understand that parking a vehicle issued with a permit because of this application form in spaces defined as Residential Car Parking Spaces is limited to a continuous maximum period of 3 hours.

I understand that I shall display the permit issued under this application along with my Blue Badge and Blue Parking Clock at all times while parked in Residential Car Parking Spaces.

Please tick to confirm that you have read and understood the conditions and confirm the information provided on this form is correct

Name : <input type="text"/>	Signature : <input type="text"/>
Date : <input type="text"/>	

If you make the return as Carer, Parent, Guardian etc., state in what capacity and for whom made.

Name of person you have signed for:

Capacity:

DATA PROTECTION STATEMENT

All information you provide on this application will be used by Gibraltar Car Parks Ltd to whom it is necessary, as agents for the Government for parking permit purposes only. By signing this application, you are consenting to Gibraltar Car Parks Ltd processing this information for the purpose of issuing Permits for Commercial Vehicles. Gibraltar Car Parks Ltd may pass on key data to the Government for the purposes of regulation of parking. Gibraltar Car Parks Ltd may also pass on key data to bodies responsible for auditing and administering public funds, for the purposes of preventing and detecting fraud.