



TALKIN TARN MEMBERSHIP
PARKING PERMIT



PERSONAL DETAILS OF APPLICANT

Title: Mr Mrs Miss Ms

Forename(s): _____ Surname: _____

Home Address: _____

Postcode: _____ Daytime Telephone Number: _____

COMPANY DETAILS (*Where Applicable*)

Company Name: _____

Company Address: _____

Postcode: _____ Daytime Telephone Number: _____

VEHICLE DETAILS

Vehicle Registration Number(s): _____ / _____
(*maximum of 2 vehicles per permit*)

CAR PARK DETAILS

Talkin Tarn Car Park	<input checked="" type="checkbox"/>
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PERIOD OF USE

Monday to Sunday	<input checked="" type="checkbox"/>
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METHOD OF PAYMENT

Please note: Applications and payments cannot be done online.

Cheque/Cash

Period of Contract From: _____ To: _____ (*Maximum period 12 months*)

Payment Enclosed: £ 52.00

Cheque/Postal Order (*made payable to 'Carlisle City Council'*) / Debit or Credit card payments can be made by telephoning Parking Services on (01228) 817200 Monday to Friday between 9.30am – 4.00pm

SIGNED: _____ **DATE:** _____

If completed online - please print off application form, complete and return together with full payment to:
Parking Services, Carlisle City Council, Civic Centre, Carlisle, CA3 8QG.

If you have any telephone queries concerning the application, please contact Parking Services on (01228) 817200 Monday to Friday between 9.30am – 4.00pm. Further information regarding Car Parking can be found at www.carlisle.gov.uk or by emailing parkingservices@carlisle.gov.uk

FOR OFFICE USE ONLY

Debtor Number: _____

Debtor Invoice Number: _____

System Permit Number: _____

Stationary Permit Number: _____

Amount Received: _____

Date: _____

IMPORTANT – PLEASE READ GUIDELINES