

Application for an Australian Disability Parking Permit

For persons with permanent mobility limitation Permit Valid for Three (3) Years.

RAFFIC ACT AND TRAFFIC REGULATIONS AUSTRALIAN ROAD RULES OCAL GOVERNMENT ACT	Permit No:	Expiry Date:
	Receipt No:	NAR:
	Receipt Date:	
TY OF DARWIN BY-LAWS		
PPLICANT DETAILS		
Application name		
Address		
Postal Address		
Telephone (BH)	Mobile	
Declaration: I understand that the permit the vehicle whenever it is parked with the of the permit may result in it being revoke	e permit displayed and also th	
the vehicle whenever it is parked with the	e permit displayed and also th	
the vehicle whenever it is parked with the of the permit may result in it being revoked. Signature OCTOR'S REPORT (TO BE COM	e permit displayed and also the ed by City Of Darwin.	at any abuse or misuse Date
the vehicle whenever it is parked with the of the permit may result in it being revoked. Signature OCTOR'S REPORT (TO BE COND.) Does the applicant suffer from a physical disability	e permit displayed and also the ed by City Of Darwin. IPLETED BY MEDICA affecting mobility? Yes	Date No
the vehicle whenever it is parked with the of the permit may result in it being revoked. Signature OCTOR'S REPORT (TO BE COM	e permit displayed and also the ed by City Of Darwin. IPLETED BY MEDICA affecting mobility? Yes	Date PRACTITIONER



Medical Practitioner

Name	
Address	
Telephone	

Signature Date

PAYMENT

Permit Fee \$21.00

Payment can be made

- By email to darwin@darwin.nt.gov.au (with this form completed and attached). A Customer Service Officer will contact you to make payment before the form is processed.
- By mail to City of Darwin, GPO Box 84, Darwin NT 0801 (with this form completed and enclosed). A Customer Service Officer will contact you to make payment before the form is processed.
- In person at the Civic Centre, Harry Chan Avenue, Darwin
- Make cheque or money order payable to the City of Darwin and cross not negotiable.

PERMITS ARE ISSUED AT THE DISCRETION OF THE CITY OF DARWIN. THE CITY OF DARWIN MAY GRANT A PERMIT, REFUSE TO ISSUE A PERMIT OR CANCEL A PERMIT WHICH HAS BEEN ISSUED.

YOUR PERMIT WILL BE POSTED TO THE ADDRESS PROVIDED ON THE FRONT OF THIS FORM

For assistance please contact:				
City of Darwin	Postal	GPO Box 84, Darwin NT 0801		
Civic Centre	Telephone	(08) 8930 0300		
Harry Chan Ave	Facsimile	(08) 8930 0311		
Darwin NT 0800	Email	darwin@darwin.nt.gov.au		
	Website	www.darwin.nt.gov.au		
ABN 11 503 313 301				

Collection Notice

City of Darwin collects personal information from you, including your mobility status and personal contact details. We collect this information for the purpose of updating our administrative systems to be able to carry out Council's functions. The *Local Government Act* 2019 allows or authorises us to collect this personal information and you may seek access to this information.

We will only use your information for the purpose described here. It will not be used or disclosed in any other way unless we have your consent or we are authorised or required by law to do so. If you choose not to provide us with your information, we will be unable to complete your request. Your personal information will be handled in accordance with our Privacy Statement and the *Information Act 2002* (NT). Council's Privacy Statement is available from the City of Darwin, Harry Chan Ave, Darwin or via the Council's website at: www.darwin.nt.gov.au.