## **Roinn na nOibríochtaí** Operations Department



# OPERATIONS DEPARTMENT, FINGAL COUNTY COUNCIL, GROVE ROAD, BLANCHARDSTOWN, DUBLIN 15 TELEPHONE: (01) 890 6260 EMAIL: howmaloparea@fingal.ie

# APPLICATION FOR A CARERS PARKING PERMIT

## PLEASE COMPLETE IN BLOCK CAPITALS

Residents (applicants) Name:		
Carer(s) Relationship to Residen	t	
Residents Telephone number:		
Residents Email:		
Carers Vehicle Registration No: _		
I declare that the particulars in t	Date:	
1,631461163 318114141 C	Datc	

#### WITH THIS APPLICATION YOU MUST:

- 1. Supply proof of resident's address (i.e. utility bill).
- 2. Supply a <u>photocopy of current insurance certificate</u> for the carer's vehicle in the carers name.
- 3. Supply valid Road Tax for the carer's vehicle.
- 4. Supply written confirmation from the resident's doctor that the residents requires on-going daily car for a chronic illness.

#### **PLEASE NOTE:**

A CARERS PERMIT MAY BE ISSUED TO A MAXIMUM OF 2 NON-RESIDENT IMMEDIATE FAMILY MEMBERS WHO ACT AS VOLUNTARY CARERS FOR A RESIDENT WHOSE DWELLING IS IN A PAID PARKING AREA.

INCOMPLETE APPLICATIONS WILL BE RETURNED.

THE RENEWAL OF A PERMIT IS THE RESPONSIBILITY OF THE RESIDENT.

IT IS €10 FOR A REPLACEMENT PERMIT

The annual fee for a Carers Parking Permit is €20. Cheques / Postal Orders, etc. should be made payable to Fingal County Council. We also accept phone payments. If you wish to pay by credit card or laser card, please telephone (01) 890 6260. The Cash office is open from 9.30am to 3.30pm Monday to Friday.

Completed applications can be returned to: Fingal County Council, Car Parking Services, Operations Department, Grove Road, Blanchardstown, Dublin 15 or by email to <a href="mailto:howmaloparea@fingal.ie">howmaloparea@fingal.ie</a>