## Request to cancel a Parking Permit (Personal or Business)

Office use only Permit Returned YES / NO Staff Initials



Please complete all relevant sections of this form using BLOCK CAPITALS

Section A	About t	he pe	rmit																				
Permit number <u>f</u>																							
Permit Type																							
(For Permits paid monthly – see Section D) Where payment has been made upfront, refunds are only considered for full unused months' remaining after permit has been handed in for cancellation; an administration charge of £15.00 is applicable in all cases.																							
Section B	Person	reque	esting	g the	refu	nd																	
Full																							
Full Address																							
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Postcode									Day	/time	coı	ntac	t nui	mbe	er/ M	lobil	е						
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Email Addres	S						Ĺ			<u> </u>										<u> </u>	<u></u>		
How refunds are calculated – Full cost less £15 admin fee ÷12 x unused months remaining																							
If payment was made by card, the refund amount will be credited to the original card,																							
providing it is still valid; otherwise please complete Section C for Cheque refund  Section C Please provide details for refund cheque (Name and Address)																							
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Full Name																							
Full Address																							
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Post Code																							
Section D I	For Pers	onal a	and F	Rusin	ess	Pern	nits r	naid	mo	nthl	v by	/ Inv	/oic	e oi	r Dir	ect	Deb	oit -	an				
administrati											•	4							<b></b>				
Reception s													•			•					<		
payments; any outstanding amount <b>MUST</b> be paid in full before the permit will be cancelled.																							
Direct Debit MUST NOT be cancelled until all payments are up-to-date.																							
Signed												_ [	Date	ed									