

Application for an Australian Disability Parking Permit/s for an Organisation – New Application



Complete All Sections in full, incomplete application forms will not be accepted.
Please allow 14 working days for processing.

Fees can be found at alicesprings.nt.gov.au

Eligibility Criteria

Only organisations that provide transport to individuals who meet one or more of the following criteria can apply – **The individual requires the use of a wheelchair, requires the use of a walking aid, is permanently blind or their mobility is affected by a debilitating condition/impairment.**

Please provide a brief statement of how the organisation meets the eligibility criteria:

Organisation Details

Name of Organisation:

ABN No. of Organisation: Type of Organisation:

Address of business premises:

Postal Address:

Phone: Email:

Website:

Details of the Organisations Representative

Name of Representative:

Position in the organisation:

Department if Applicable:

Email:

Phone: Mobile:

Number of Permits

A permit per vehicle, up to 5 registered vehicles of an organisation and each vehicle is used to transport individuals who meet the required criteria. **The individual requires the use of a wheelchair, requires the use of a walking aid, is permanently blind or their mobility is affected by a debilitating condition/impairment.**

An organisation may hold a maximum of 5 permits. **If additional permits are required, please provide the vehicle registration details associated with each permit. These requests will be assessed by the Alice Springs Town Council and further evidence may be requested.**

How many permit/s are required:

Number of drivers carrying out this purpose:

Vehicle registration numbers

Complete this section outlining all the vehicles you are seeking permits for.

Make	Model	Registration Number

Instructions on how to get the Permit/sto the Organisation

Call to collect Email to collect Post

If permits are not collected within 2 weeks of being called/emailed they will be posted.

Please submit the completed form:

- In person to – Civic Centre Reception, 93 Todd Street, Alice Springs NT 0870
- Email: astc@astc.nt.gov.au Post: PO Box 1071, Alice Springs NT 0871 Fax: (08) 8953 0588
- Please call the Council on (08) 8950 0500, if you require further assistance.

To Be Completed, Signed and Dated by Representative

I, _____, the organisation's representative, understand that any permits issued are for the sole use of the above organisation. The permits must be allocated to vehicles registered to the organisation, and are used for the transportation of individuals who meet the eligibility criteria. Permit Numbers are unique to the organisation. The organisation's responsibility is to record the permits and their allocation.

All employees of the organisation have read and understood the conditions of the use of the permit. Any abuse or misuse of permits may result in the Alice Springs Town Council revoking the permits.

The following regulatory authorities apply to this application:

Northern Territory Legislation - See link for full details www.legislation.nt.gov.au

➤ *Northern Territory of Australia Traffic Regulations 1999*

➤ *Northern Territory of Australia Traffic Regulations - Australian Road Rules*

Alice Springs Town Council – See link for full details www.alicesprings.nt.gov.au

➤ *Alice Springs (Management of Public Places By-Laws 2009)*

➤ *Australian Disability Parking Permit/s for an Organisation – Conditions of Use*

I have read, understood and am bound by all the legislation, regulations, by-laws and conditions of use and conditions as stated in this application.

Signature: _____ Date: _____

(Signature of organisation representative)

Fee: X No. of permits: _____ = \$ _____ Receipt No.: _____