

PERMIT NO:	
EXP DATE:	

APPLICATION FOR AUSTRALIAN DISABILITY PARKING PERMIT

Name of Applicant	
Postal Address	
Residential Address	
Contact Number	
TYPE OF PERMIT	
PERMANENT (needs to be renewed every three (3) years)	
The below section "Medical Practitioner to complete" needs to be completed and a report/medical certificate must b	
attached with this application	
RENEWAL OF PERMIT Old Card No:	
No need to complete the section "Medical Practitioner to complete"	
TEMPORARY How many months are required?	
The below section "Medical Practitioner to complete" needs to be completed and a report/medical certificate must be	
attached with this application. If you require an extension on the temporary permit or you loose the permit or the	mit is
stolen or damaged you will need to complete a new application form.	
COMMUNITY ORGANISATION How many permits are required?	
A letter on your organisations letterhead requesting the permits along with a brief description of the specific commun	ity
service you offer people with a disability must accompany the application form. There is no need for the "Medical Pr	ıcti-
tioner to complete" section to be completed.	
MY PERMANENT PERMIT HAS BEEN; Lost Stolen Damaged	
No need to complete the section "Medical Practitioner to complete"	
Lost/Stolen/Damaged Card No:	
<u>Declaration:</u> I understand that the permit issued is for <u>my use only</u> and that I must be in or using the vehicle	
whenever it is parked with the permit displayed and also, that any abuse or misuse of my permit may result	in it
being revoked by Barkly Regional Council. I have read, understand and I am bound by the conditions as liste	d on
page 2 of this application.	
Signature Applicant: Date:	
MEDICAL PRACTITIONER TO COMPLETE	
The below section must be completed in full and a report/medical certificate must be provided or the application may be reje	ted
Name of Medical Practitioner: Provider No:	
Address:	
Phone: Fax:	
I have attached a report/medical certificate describing the nature and extent of disability and specified the type o	
bility aids that will be used by the applicant.	
Signature:Date:	



AUSTRALIAN DISABILITY PERMIT CONDITIONS FOR BARKLY REGIONAL COUNCIL

Payment can be made in person at the Council Office; 41 Peko Road, Tennant Creek, where EFTPOS facilities are available, or by post, with the completed application form and relevant documentation enclosed and a cheque to:

PO Box 821, Tennant Creek NT 0861

PERMIT FEE \$5.00

YOUR PERMIT WILL BE POSTED TO THE ADDRESS YOU HAVE PROVIDED ON THE APPLICATION FORM

DISPLAYING THE PERMIT

- Permits must only be used when the vehicle is being used to transport the permit holder
- The permit only needs to be displayed when parking under the above conditions
- The permit must be displayed inside the windscreen
- The permit number and expiry date must be clearly visible from the exterior of the vehicle

THE PERMIT

- Is valid if the vehicle is being used to transport the permit holder
- Allows the vehicle to be parked in parking spaces which are signposted have the people with disability symbol painted on the road surface.
- You should not exceed any parking sign time limits applying to a parking area for people with disabilities
- The permit does not permit parking in the following areas:
 - No standing zone
 - No parking zone
 - Loading zone
 - Bus and Taxi zones

CONCESSIONS

- If there are no parking bays for a person with a disability the following concessions will be made on other parking bays;
 - Twice the period indicted on signage E.G. 15 minutes extended to 30 minutes
 - After the concession time permit is over then normal parking restrictions apply.
 - <u>Please note:</u> if the parking sign is in an area set aside for people with disabilities, the additional parking concessions do not apply

CAUTION

- If the applicant allows misuse of the disability permit allocated to them to take place, this can lead to the permit being revoked and Council may pursue enforcement action.
- If it has been found that the applicant and/or Medical Practitioner has provided false and/or misleading information or details, this can lead to the application being rejected.
- If it is found after the issue of the permit that the applicant and/or Medical Practitioner has provided false or misleading information or details, this can lead to the permit being revoked and Council may pursue enforcement.
- Permits are issued at the discretion of Barkly Regional Council. Barkly Regional Council may grant a permit, refuse to issue a permit or cancel a permit which has been issued.