

Offence Date:

FOH Stamp: F/Meter REGO WOF Other

**APPLICATION TO CANCEL
PARKING TICKET**

***Please complete a separate Application to
Cancel for each ticket***

Notice Number: _____ **Vehicle Registration Number:** _____

Applicant Name: Mr / Mrs / Miss / Ms _____
(Full name required)

Physical Address: _____

Postal Address: (if different from above) _____

Phone Number: _____ **Mobile:** _____ **Fax:** _____

Email: _____

I offer the following explanation: _____

_____ (please continue overleaf if required)

(Please ensure all fields are completed with the information requested. Failure to provide all information will result in a delay with processing. Please attach all related documents to support your application)

Signed statement: The information contained in this statement is true and correct and has been provided voluntarily.

Printed Name: _____ **Signature:** _____ **Date:** _____

Important information regarding the PRIVACY ACT:

The information provided on this form will be used to process parking infringement notices. Staff having direct access to this information includes the parking administration staff. In appropriate circumstances this information may be shared with the Ministry of Justice. The information requested is necessary to make decisions under the Transport Act, but if insufficient information is provided the explanation may not be considered. Under the Privacy Act 1993, you have the right of access to personal information about you held by Palmerston North City Council and you are also entitled to request information about you to be corrected.

Official Use Only: DECISION ON APPLICATION TO CANCEL A PARKING TICKET

APPROVED / DECLINED

Clause No: _____ **Reason:** _____

Documents Sighted? YES / NO If yes, document type: _____

Applicant advised in writing? YES / NO Letter / Email / Fax - Date Advised: _____

_____ **BSO:** _____ **Date:** _____

Authorised Signature of PNCC

Initials