



Dispensation Request Form

Applicant: _____ Address: _____ _____ Tel No: _____ Fax: _____	Office Use (ref no): <div style="border: 2px solid black; height: 100px; width: 100%;"></div>
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Location:			
Dates required:	From:	To:	No: of days:
Times required:	From:	To:	
Reason for dispensation (attach relevant documentation):		Signed by applicant:	
		Dated:	

<u>Vehicle Registrations:</u> (Make/Model/Colour)			
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Payment details:	No of days x No of vehicles (£13.90 per vehicle per day)	£ Chq No:	Cash/Chq Receipt No: BT
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<u>ENFORCEMENT OFFICER ONLY</u>	Signed:	Dated:
I confirm that on my inspection, the above dispensation has been granted:		

Cheques to be made payable to Trafford Council and application form returned to:

Parking Services, Trafford Council, Trafford Town Hall, Talbot Rd, Stretford M32 0TH
 Or payment by card can be made over the phone: 0161 912 1383/5863.