

# Elevations Public Car Park



## Car Park Permit Application Form

**Name:**

**Address:**

**Postcode:**

**Telephone Number:**

**Daytime (Work) Number:**

**Mobile Number:**

**E-mail Address:**

**Vehicle Registration:**

**Vehicle Make:**

**Vehicle Model:**

**Colour:**

**Ticket Required:**

Annual

Quarterly

Monthly

**Payment Method:**

Cash

Cheque

Credit/Debit Card

Standing Order

**Preferred Contact Method:**

Post

E-mail

Telephone

**Signature:**

**Date:**



*Please note that cheques need to be payable to 'Hinchingbrooke Water Tower Limited'.  
Permits will be delivered within 5-10 working days of application being received.*

*Completed forms need to be returned to: Hinchingbrooke Car Park, PO Box 226, Newmarket, CB8 1EZ.  
Please note that by signing this form you are agreeing to our Terms and Conditions.*