

PERMIT NO (OFFICE USE ONLY)	
DI/	

NAME	COMPANY NAME
ADDRESS/COMPANY ADDRESS	CONTACT NUMBER FOR DAY OF EVENT
POST CODE	
LOCATION FOR WHICH DISPENSATION IS RE	QUIRED
PURPOSE FOR REQUESTING THIS DISPENSA' CHARGES	
PURPOSE FOR REQUESTING THIS DISPENSATE  CHARGES  1 DAY = £10  1 WEEK = £30	
PURPOSE FOR REQUESTING THIS DISPENSATION IS RECOME.  CHARGES 1 DAY = £10  START DATE FROM	
PURPOSE FOR REQUESTING THIS DISPENSATION  CHARGES  1 DAY = £10  1 WEEK = £30  START DATE	TION
PURPOSE FOR REQUESTING THIS DISPENSATION  CHARGES 1 DAY = £10  START DATE FROM	UNTIL

## Data Processing Fair Processing Statement - Fareham Borough Council

**SIGNED** 

The information that you provide is used to determine whether or not to grant a Parking Dispensation. We have a duty to protect the public funds we administer and may use your information for the prevention and detection of fraud. The information may also be used for auditing, monitoring, statistical and other research. Some of the information we hold may be shared with other Council or Government departments, agencies and similar organisations (including law enforcement agencies) to enable them to perform their duties or for comparison purposes. The information we hold about you is normally retained for seven years after the end of the licence period. For further information about the National Fraud Initiative see www.fareham.gov.uk/dpnfi

I therefore fully understand and accept the conditions as outlined on the letter provided with the permit

DATED