

LONDON BOROUGH OF SUTTON
CARER (ORGANISATION) PERMIT APPLICATION FORM



Please read the “***Carer (Organisation) Permit Eligibility Requirements and Terms and Conditions***” section below before completing **all sections** of this application form.

A NAME AND CONTACT DETAILS	
1	Title (Mr, Mrs, Miss, Ms)
2	First Name
3	Surname
4	Telephone Number
5	Email Address

B ORGANISATION DETAILS	
6	Organisation Name
7	Full Address
8	Postcode
9	Company/Charity/Care Quality Commission Registration (if applicable)

The details provided above must match those provided on any proof provided with the application form.

Proof Required

- (a) Letter from the organisation, signed by an authorised person such as a line manager, company director or company secretary (not the applicant) confirming that the person indicated in section A, above, is an employee of the organisation and their duties include undertaking essential care visits in resident’s homes in Sutton.

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C		VEHICLE DETAILS					
10	Vehicle Registration Number						
11	I own the vehicle? (tick)	YES			NO		
12	Vehicle Type Approval (tick)	L1-L7		M1		N1	
13	Fuel Type (please tick)	NORMAL	Petrol		Diesel		
		ALTERNATIVE	Hybrid		Gas		Electric
		OTHER (specify)					
14	CO2 Emissions (g/km)						
15	Vehicle Make						
16	Vehicle Model						
17	Vehicle Colour						
18	Please confirm that your vehicle meets the height and length restrictions (tick)	YES		NO			
		<i>The vehicle cannot exceed an overall height of 2.28 metres and an overall length of 5.25 metres</i>					

Proof that you are the registered keeper of the vehicle - we will only accept:

- (a) a copy of the vehicle registration document (V5) showing the address included on the application **or**
- (b) an insurance document showing you as the policy holder with the address and vehicle details included on the application.

If you are applying for a permit for a company car - we will only accept:

- (a) headed company notepaper from the company secretary (not the applicant) confirming that you have sole use of the vehicle (stating the vehicle registration number) which is kept at the address included on the application.

The Council will undertake periodic checks against all details provided in this application to ensure they are correct during the lifetime of the permit. We may require you to provide additional information, at any time during the period of permit validity, to confirm this information and reserve the right to cancel the permit should the information not be provided or if it is found that any of the information is not correct or no longer meets the criteria.

DECLARATION

By signing below I confirm that

- (a) All details provided in this application are correct and I authorise the Council to undertake any checks necessary to confirm the validity of the information provided.
- (b) I will inform the Council should any of this information change, including but not limited to, no longer being an employee of the company or no longer being the registered keeper of the vehicle included in the application form.
- (c) I have read and agree to abide by the terms and conditions included in the ***Carer (Organisation) Permit Eligibility Requirements and Terms and Conditions*** section below.
- (d) I have enclosed payment (£50) and all required evidence with this application.

SIGNATURE	
NAME	
DATE	

Applications and evidence can be returned:

By post or in person to:

SABA (formally Indigo) Customer Office
50 Grove Road
Sutton
SM1 1BT

Please include a cheque/postal order made payable to “**London Borough of Sutton**”. Please **DO NOT** send cash in the post.

Payments can be made by card, cash, cheque or postal order at this office.

Data Protection Information

Personal data has been collected by the London Borough of Sutton and Saba Park Services UK Ltd in order to process your permit application. Your personal data may be collected, processed, shared and retained in order to carry out the performance of a public task and fulfil our legal obligations in the following ways:

- To verify the information contained within the application and assess eligibility.
- Shared with third parties for appeals and enforcement. Full details of third parties are available in our privacy policy on our website at www.sutton.gov.uk
- Shared with the police or security organisations to prevent or detect crime
- Data will be stored for a period of six years from the date of permit expiry or as long as you have a valid permit, whichever is longer.

Data Rights

In relation to the personal data which we may hold about you, you have the right to request to: Be **informed**, have **access** or **rectify** incorrect information. You also have the right to **object** to or **restrict** our processing of your data. Under Data Protection law we must verify your identity and explain to you our reasons if we do not agree to carry out your request.

Contact and Further Information

Data protection questions can be made by email to dpo@sutton.gov.uk or in writing to the Information Officer, Civic Centre, Sutton, SM1 1EA. You further have the right to complain to the Information Commissioner's Office at www.ico.org.uk

CARER (ORGANISATION) PERMIT ELIGIBILITY REQUIREMENTS AND TERMS AND CONDITIONS

“**carer**” means an organisation with a valid operational need to park for short periods of time in either a resident’s parking place, a shared-use parking place or Permit Parking Area designated by a Traffic Management Order whilst providing essential care visits to a resident;

1. Each permit will be issued with a protective cover and parking disc (clock) to be displayed on the front or near side of the vehicle upon the leaving of that vehicle in an approved parking place.
2. The vehicle may only be parked for a limited period of up to 3 hours, and the parking disc (clock) must be set and displayed at the time of arrival.
3. A permit is only valid for the specific vehicle registration quoted on the permit.
4. A permit will enable the holder to park in any residents parking place, shared use parking place or Permit Parking Area in the London Borough of Sutton **whilst undertaking** the essential care visits to residents **in their homes**.
5. The permit **is not valid** when visiting a place of work or when any other activity is being undertaken.
6. A permit **does not** allow the holder to park on yellow lines, in disabled bays, in motorcycle bays, in doctors bays, on bus stops or in loading bays (during the hours of enforcement indicated on any signs), park on the footway (unless signs permit it), obstructing dropped kerbs in place to provide access for vehicles or pedestrians or in any parking place which has been suspended.
7. If the vehicle is parked in any area the permit is not valid, or for a purpose which is not valid, then a Penalty Charge Notice may be issued.
8. No refund will be issued after the permit has become valid.
9. A new permit must be obtained in the event of a change of vehicle, and a charge of £25 will be applied for the unexpired period of the permit, providing the original permit is returned.
10. If a permit is lost, stolen, destroyed or mutilated the Permit Holder shall notify the Council immediately and the permit will cease to be valid. A new permit will be issued for the unexpired period of the original and a £25 administration charge will be payable.

APPLICATION FORM GUIDANCE

Please complete the form in **CAPITALS** using black or blue ink.

Please note all name and address details will need to match the evidence documents required to be provided.

Payment by cheque/postal order will not be processed until we have approved the application. We may require further information to approve your application and if we do we will hold your cheque/postal order whilst we obtain this information.

If your application is not approved then your cheque/postal order will be returned to you.

SECTION A

- 1 – Enter your title
- 2 – Enter your first name as it appears on any evidence documents.
- 3 – Enter your last name as it appears on any evidence items
- 4 – Enter a day time telephone number we can reach you on in case we have any queries with your application
- 5 – Enter a valid email address (this will be used for renewal reminders)

SECTION B

- 6 – Enter the Organisation name of which you are an employee carrying out essential care duties in residents' homes in Sutton.
- 7 – Enter the full address, including any flat number, building name and street address as it appears on any evidence items
- 8 – Enter your full post code
- 9 – Enter the registered company number, charity number and/or Care Quality Commission registration number of the organisation. Your organisation should be able to provide this to you.

SECTION C

- 10 – Please enter the full alpha-numeric Vehicle Registration Mark of the vehicle
- 11 – Please tick which answer applies to you.
- 12 to 18 – This information can be found on your V5 document most can also be found by visiting this website (<https://www.gov.uk/check-vehicle-tax>)