Parking services

Application for the suspension of parking bays

h&f putting residents first

Parking Services, PO Box 57142, London SW6 2WZ

Fax back to: **020 8753 3267** Alternatively please scan and email to: **parkingsuspensions@lbhf.gov.uk**

Surname | First name | Company (if applicable)

Address

Postcode

Daytime contact number | Email address | Fax number

I would like to request the suspension of ____ bays at the following location (please specify exact location required enclosing map if possible)

Reason for suspension

From ____ To ____ Being ____ day(s)

Please note that suspensions are not granted for cars, people carriers, four-wheel drive vehicles or minibuses, please seek advice to avoid receiving any unnecessary parking fines.

Notes

The suspension desk opening hours are Monday - Friday, 8.00am - 6.00pm (excluding bank holidays).

1. Suspension of bays requires at least 8 days notice in writing. Applications including payment must be received no later than 4.00pm on the 8th day before the date requested. If you require suspension of bays longer than 30 metres or for more than 3 days this requires more notice; please telephone the parking office on **020 7371 5678** for further information.
2. A bay is approximately five metres in length.
3. Suspensions only apply during the controlled zone hours. If you have any problems with illegally parked vehicles in the suspended area booked, contact the parking office on 020 7371 5678. **We cannot guarantee to remove all vehicles parked in a suspended bay.**
4. At least two suspension warning signs will be erected at the location depending on the availability of street furniture.

Cost

1. £35 per bay per day, payable on application. We do not accept payment by cheque. You may also pay at the cashiers office in Hammersmith Town Hall extension- 9.00am to 5.00pm (Monday to Friday), excluding bank holidays.

Cancellations or changes

1. Should you need to change the suspension you have booked, you must contact parking services in writing at least 8 days before the new date required.
2. We must be given at least two working days notice for all cancellations otherwise no refund will be issued.
3. **Please note: there is a fee of £35 for each cancellation or change.**

I confirm that I have read and understood the information above (failure to sign this application will result in it being declined).

Date ____ Signed ____

FOR OFFICIAL USE ONLY	Card:	Authorisation code:	
Consent no.	Date(s) authorised:	Authorising officer:	CDD:

Method of payment:

☐ Credit/debit card ☐ Cashiers (cash, card, cheque)

☐ Credit/debit card (details below) ☐ By telephone (We accept Mastercard/Visa/Maestro/Delta/Solo cards only)

Please note a handling fee of 1.25% will automatically be added to all credit card payments.

Amount £ ____ Card Issuing bank ____ Issue number ____

Cardholder's name & initials (as it appears on card) ____ Cardholder's signature ____

Cardholder's full billing address ____

Card number ____ ____ ____ ____ ____

Valid from ____ / ____ Expires ____ / ____ Signature strip no ____ Issue no ____

(NB. The signature strip number is the last three digits on the signature strip, which is on the reverse of your card)