APPLICATION FOR 2016/2017 CAR PARKING PERMIT

*(please tick)* **NEW  RENEWAL  DETAILS CHANGE**  **EXISTING PERMIT No………………………..**

**Section 1 – Please complete in BLOCK Capitals**

Title (Mr/Dr/Mrs/Miss/Ms)…………Forename …………………………………Surname………………………………..

Job Title……………………………………………………..Department…………………………….………………………

New Starters Commencement Date………………………………Student End Date…………………………………….

Work Base: CGH / GRH / Other Residential Address *(see note 1).*……………………………………………….

…………………………………………………………………………………………………Postcode: ……………………….

Ext No……………..Bleep No……………… If registered Disabled please state Registration No…………………..

Trust E mail address…N/A…………………………………………….. NI Number…………………………………………….

Vehicle Reg No (1)…………………….…... (2)………….………….….. (3)………..……………... (4)………..….…………

***IF INFORMATION IS MISSING THE APPLICATION WILL BE RETURNED CAUSING DELAYS***

**Section 2** Category of Permit Requested: *(see note 2)*

Standard User…. Essential User\*…… Shift Worker…… Crown/Lease….

Resident………...... Volunteer….………. Disabled………... Carer’s………...

*\*Essential User: Permits will only be issued on the authority of the Assistant Chief Executive & Director of Service Delivery.*

**IF INFORMATION IS MISSING THE APPLICATION WILL BE RETURNED CAUSING DELAYS**

**Section 3** (see note 4)I understand that if I am issued with a staff car parking permit, the issue will be subject to GHNHSFT’s and Indigo’s car parking rules as advertised across the site in the Terms & Conditions , and I agree to abide by the rules therein.

Applicants Signature…………………………………………………………….Date…………………………………..

**Until the Permit has been issued no parking in the staff car parks is allowed.**

Please tick preferred collection point…GRH.... CGH......

Permits will **only** be available for collection from Parking Shops *(during advertised opening hours)* **Daily parking charges are paid using a ‘Smart Card’. A deposit for this card will be required upon collection.**

**Section 4** (see note 4) To be signed by the Line Manager confirming authenticity of application:

Managers Signature…………………………………Managers Name (Block Capitals)……………………………….

**May we remind all managers of their responsibility to ensure that the above information is accurate.**

**ON COMPLETION, PLEASE RETURN THIS FORM TO THE PARKING SHOPS AT GLOUCESTER MSCP OR AT SANDFORD ROAD CHELTENHAM.**

**IF INFORMATION IS MISSING THE APPLICATION WILL BE RETURNED CAUSING DELAYS**

**Section 5 For Office Use Only**:

Permit Issue date……………………………………………Permit Number…………………………………………………….

Permit Holders Signature…………………………………………………………………………………………………………..



**Section 6**(see note 6) **If you are eligible for a permit and fulfil the necessary criteria (in line with Trust Policy) please sign the form below confirming permission to have the permit fee deducted from your salary at source. Failure to complete all sections of this form will result in the delay of processing your application.**

X

**Payment on collection** please tick **Student Volunteer** please tick

**Assignment No. \*\*** Please indicate the\*\*

**£35 / £60 / £90 / £125 / £160 / £190**

N/A

As taken from your payslip cost of your permit

**Signature:**………………………………………………**Name:** (BLOCK CAPITALS)……………………………………. .

**Green Transport Plan – Staff Parking Permits**

**IMPORTANT GUIDANCE NOTES FOR ALL STAFF**

**NOTE 1**

**Residential Address**

If you are on secondment or placement, the address you give should be the place where you will be residing while working at one of the Trust sites. If you do not have the address when you receive this form wait until you have the information before returning the form. ***Addresses must include the Post Code.***

**Proof of Residence**

All personnel must produce proof of residence when collecting their parking permit. This must show the persons name and address on the same document, examples of this are driving licences and utility bills.

**Vehicle Registrations**

The current permit has enough space to show four vehicle registrations. You will only be issued with one permit and this must be moved between vehicles as required. If no registration is given the permit cannot be processed. If you change your Vehicle inform the permit office of the details and you will be issued with a new permit on receipt of your old permit ***(do not deface the permit by crossing out a registration and entering a new one).***

**APPLICATIONS WILL BE RETURNED IF FORMS DO NOT HAVE ALL INFORMATION REQUIRED**

**NOTE 2**

**Category of Permit Required**

You should only tick one category of permit. The qualifying criteria for a category of permit can be found on the Trust intranet site.

**APPLICATIONS WILL BE RETURNED IF FORMS DO NOT HAVE ALL INFORMATION REQUIRED**

**NOTE 4**

**Signatures**

Applicants must sign sections 3 & 6, Managers must sign section 4

Forms cannot be processed unless signed by the applicant and the relevant manager confirming the validity of the application.

**APPLICATIONS WILL BE RETURNED IF FORMS DO NOT HAVE ALL INFORMATION REQUIRED**

**NOTE 6**

**Method of payment for non Trust staff (includes PCT staff)**

Those personnel requiring a parking permit but who are not employed by the Trust must pay fully upon collection of the permit, tick the box to indicate you are paying in full on collection. **Payment should not be sent with applications but should be presented when the permit is issued**.

**Salary Box**

The amount charged for the parking permit is linked to the person’s salary as follows:

Up to £15,000 per annum then payment is £35 £15,001 to £25,000 per annum payment is £60

£25,001 to £35,000 per annum payment is £90 £35,001 to £50,000 per annum payment is £125

£50,001 to £75,000 per annum payment is £160 Over £75,000 per annum payment is £190

**New Starters**

Those joining the Trust should receive their application with the letter telling them their application for their new post has been successful. This should be completed and returned as directed on the form this will help us to have your permit ready for collection on your first day.

When filling in this form, new starters will not have an assignment number, please write NEW STARTER in the box.

**You must sign in the signature box which allows the Trust to deduct the monies from your salary.**

**APPLICATIONS WILL BE RETURNED IF FORMS DO NOT HAVE ALL INFORMATION REQUIRED**

**MISCELLANEOUS**

**Returned Forms**

Delays in processing your permit will occur if your form is returned to you because of missing or incorrect information. These areas will be highlighted please amend as necessary and return the form to the Parking Shops at Gloucester MSCP or at Sandford Road Cheltenham.

**Change of Details**

The Permit Office must be notified of any changes to the details on your application form i.e. residential address, dept, contact number.

**Cancelling a Permit**

**You must return your current permit to the Parking Shop with your Smart Card, the payroll department will then be instructed to stop all payments at the earliest available opportunity. If you have applied and no longer wish to collect a new permit, please call the Gloucester office straight away on 0300 422 6101, your application will then be cancelled**