



## Garage Application

Applicant details	
Full Name	
Date of Birth	/ /
Address	
Telephone Number (inc Mobile)	
Are you a Council Tenant      YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>If Yes please note:</b> Your application CANNOT be registered unless your account is clear at the time of receipt.	

**You must notify the Council of change of contact details**

## LOCATION OF GARAGES - SOUTH YARMOUTH AREA

### PLEASE INDICATE YOUR PREFERRED AREA

**Middlegate**      *includes:*    Clarendon Close [ ] King Street [ ] Nottingham Way [ ]  
Orford Close [ ] Sackville Close [ ] Sidney Close [ ]  
Townshend Close [ ] Yarmouth Way [ ]

**Blackfriars Road** *includes:*    Abyssinia Road [ ] Malakoff Close [ ] Ordnance Road [ ]

Signed \_\_\_\_\_

Date: \_\_\_\_\_