

# Application for Super Gold Card Parking



**WHANGANUI  
DISTRICT COUNCIL**  
Te Kaunihera a Rohe o Whanganui

## Applicant Details

Full Name:

Residential Address:

Postal Address:

Super Gold Card Client Number:

Preferred contact method:

Email

Phone

Postal

Contact Phone

Home:

Work:

Mobile:

Email Address:

## Applicant's declaration

### Privacy statement

Council collects information that it considers relevant for the purpose of this application, some of the information collected is personal information. Council, if subject to an Official Information request, may be required to release information contained in this application including personal information. However, Council will not release your personal information unless it has first consulted with you and is required to do so under the applying legislation.

Under the Privacy Act 1993, you have the right to access the personal information held about you by the council and you can also request that the council correct any personal information it holds about you.

I understand that as the applicant, all correspondence related to this application will be made to me.

I the undersigned confirm that I have read and understood the Privacy Statement and the information provided on the application form is true and correct.

Signature:

Date:

## Office Use Only

Card Number issued:

Date of issue:

Issuing Officer: