

PARKING METER REFUND ENQUIRY

PERSONAL DETAILS

Please print <u>u</u>	Jour Full Name	and Address Bel (OW . This section must be c	ompleted by the person makir	ng the decla	ration.
Surname			Given Names			
Address					Postcode	
Phone No.			Email			
TICKET	PURCH/	ASE DETAIL	_S			
Meter No.			How much was paid			
Date/Time of	Purchase		,	If Possible please provide co	opy of the ti	cket
If paid by credit card, please provide the first 6 and last 4 digits of the credit card. Do not provide all numbers.						
Description of problem:						
TICKET PURCHASE DETAILS FOR SECOND TICKET (IF APPLICABLE)						
Meter No.			How much was paid			
Date/Time of	Purchase		,	If Possible please provide co	opy of the ti	cket
If paid by credit card, please provide the first 6 and last 4 digits of the credit card. Do not provide all numbers.						
I have read and accept the NCA Privacy Policy available on the NCA website at www.nationalcapital.gov.au						